

UNIVERSITY OF FLORIDA
INFORMATION PRIVACY POLICIES & PROCEDURES
PRIVACY MANAGEMENT

HIPAA: Responding to a Request for Restriction of Uses and Disclosures of Protected Health Information

POLICY

03/28/2003

1. Patients and personal representatives are permitted to request restrictions of uses and disclosures of protected health information for treatment, payment, or health care operations. The University of Florida is not obligated to agree to these requests, but will review all requests and respond to the patient in writing within a reasonable period of time
2. Only the Privacy Officer, in consultation with appropriate personnel representing the patient care area affected by such a request, may agree to requests for restrictions. Requests that are agreed to by any other personnel will not be valid.
3. If the University of Florida agrees to any restriction, it must adhere to the terms of the agreement until the agreement is terminated, either by the patient or the University. The designated management representative must ensure that all the records to which restrictions apply are appropriately flagged.

DEFINITIONS

Restriction: A specifically defined limitation of use or disclosure of an element of protected health information that would normally be available for use or disclosure by a health care provider in the normal course of business for treatment, payment or health care operations.

PRIVACY REQUIREMENTS

1. Patients have the right to request that the University of Florida restrict uses or disclosures of protected health information about the patient to carry out treatment, payment or health care operations.
2. The University is not required to agree to a restriction; however, if a restriction is agreed to, the University must not use or disclose the restricted information, except in cases where the patient is in need of emergency treatment and the information is essential to the treatment.
3. The University may terminate its agreement to a restriction if:
 - a. The patient agrees to or requests the termination in writing;
 - b. The patient orally agrees to the termination and the oral agreement is documented.
 - c. The University informs the patient that it is terminating its agreement, and that the termination only affects information created or received after notifying the patient.

PROCEDURES

1. All Requests for Special Privacy Protections forms should be fully completed before they are forwarded to the Privacy Office.
 - a. Review the completed Request form to verify the scope of the requested restriction and to determine if the University of Florida is capable of effectively and consistently restricting the uses or disclosures.
 - b. Discuss the requested restriction with the patient care area(s) affected by the request, as needed.

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- c. Document the grant or denial of restriction on the Response to Request for Special Privacy Protections form.
 - d. File the original Response form in the Privacy Office along with the original Request form.
 - e. Send a copy of the Response to the requestor, or delegate this duty to a clinic manager or supervisor. Send a copy of the Response to the appropriate area to be filed in the patient's medical record.
2. Restrictions agreed to by the University should be reviewed if the Privacy Officer is notified of any difficulties in abiding by the restriction, or of any problems that arise as a result of the restriction.
3. Document the termination of a restriction on a Termination of Special Privacy Protections form. File the original Termination form with the original Request and Response forms in the Privacy Office.
 - a. Send a copy of the Termination form to the patient.
 - b. Send a copy of the Termination of Special Privacy Protection form to the appropriate area to be filed in the patient's medical record.
 - c. Notify all patient care areas affected by the termination.
4. A new Request for Special Privacy Protections should be completed for any additional restriction requests and should follow the same procedure outlined above. (Each request makes all previous requests obsolete. The new form should contain all restrictions requested - not just the most recent request.)
5. Retain all documentation for a period of at least six years after the date that it was last in effect.

REFERENCES

HIPAA Regulations: 45 CFR § 164.501 (Definitions); § 164.522 (Right to Request Privacy Protections)

EXHIBITS

Form: Response to Request for Special Privacy Protections
Form: Termination of Special Privacy Restrictions