Public Health Activities – Disclosures of PHI

APPLICABILITY:

This policy applies to the following entities (collectively referred to as "UNC Health Care System" or "UNCHCS" in this policy):

- UNC Health Care System/UNC Medical Center
- UNC Physicians Network
- UNC Physicians Network Group Practices
- Rex Healthcare / Rex Hospital
- Chatham Hospital
- Caldwell Memorial Hospital
- UNC Rockingham Health Care / UNC Rockingham Hospital
- Johnston Health
- Lenoir Memorial Hospital
- Margaret R. Pardee Memorial Hospital
- Nash Healthcare System / Nash Hospitals
- Wayne UNC Health Care

*UNC Medical Center includes all UNC Hospitals' facilities and the clinical patient care programs of the School of Medicine UNC-Chapel Hill (including UNC faculty physicians).

I. Description

It is the policy of UNCHCS to permit the disclosure of PHI for public health activities to a Public Health Authority, other government authority, a person subject to the jurisdiction of the Food and Drug Administration, a person who may have been exposed to a communicable disease or at risk of spreading or contracting the disease, or an employer in certain situations, without first obtaining the patient's authorization or giving an individual an opportunity to agree.

Included within the scope of this policy are the patient care programs of the UNC School of Medicine (UNC SOM). As a result, this policy shall apply to all UNC SOM personnel, including but not limited to faculty, staff, students, trainees, interns and volunteers who may be full-time, part-time, paid or unpaid who create, store, transmit, access or use any patient information in support of clinical purposes for UNCHCS or any other healthcare entity.
II. Policy

A. **Prevention of Diseases.** UNCHCS may disclose PHI for public health activities to a Public Health Authority that is authorized by law to collect or receive such information for the purpose of preventing or controlling disease, injury, or disability. This includes, but is not limited to, the reporting of disease, injury, vital events, such as birth or death, in the conduct of public health surveillance, public health investigations, and public health interventions.

B. **Child or Elder Abuse.** UNCHCS Facilities may disclose PHI to a Public Health Authority or other appropriate government authority authorized by law to receive reports of child or elder abuse or neglect.

C. **FDA.** UNCHCS Facilities may disclose PHI to a person subject to the jurisdiction of the Food and Drug Administration:
   1. To report adverse events, product defects or problems with biological product deviations, if the disclosure is made to the person required or directed to report such information to the Food and Drug Administration;
   2. To track products if the disclosure is made to a person required or directed by the Food and Drug Administration to track the product;
   3. To enable product recalls, repairs, replacements or lookback; or
   4. To conduct post marketing surveillance to comply with requirements or at the direction of the Food and Drug Administration.

D. **Communicable Diseases.** UNCHCS Facilities may disclose PHI for public health activities to a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition, if Facility or a Public Health Authority is authorized by law to notify such person as necessary in the conduct of a public health intervention or investigation.

E. **Work-related Illness, Injury or Workplace-related Medical Surveillance.** UNCHCS Facilities may disclose PHI about an individual who is a member of the UNCHCS workforce to the employer of the individual if:
   1. UNCHCS Facility is a department of or its physicians are employed by such employer, or Facility provides health care to individuals at the request of the employer to conduct evaluations relating to medical surveillance of the workplace or to evaluate whether an individual has a work-related illness or injury;
   2. Any such disclosure of PHI must consist of findings concerning a work-related illness or injury or workplace-related medical surveillance. The employer must require such findings in order to comply with its obligations under federal regulations or state law, to record such illness or injury, or to carry-out responsibilities for workplace medical surveillance; and
   3. UNCHCS Facility must give written notice to the individual that PHI relating to medical surveillance of the workplace and work-related illnesses and injuries will be disclosed to the employer. The notice requirement is met by giving a copy of the notice to the individual at the time the health care is provided, or if the health care is provided at the work site of the employer, such notice must be posted in a prominent place at the location where the health care is provided.

III. Definitions

None
IV. References
45 C.F.R. § 164.512(b)

V. Related Policies/Forms
None

Attachments: No Attachments

Approval Signatures

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<th>Step Description</th>
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<td>Jerylyn Williams: VP Chief Audit &amp; Comp Officer</td>
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<td>SYSTEM Site Administrator</td>
<td>Emilie Hendee: HCS-Sr Attorney</td>
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<td>David Behinfar: HCS-Privacy Dir</td>
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Applicability

Caldwell Memorial Hospital, Chatham Hospital, Johnston Health, Nash Health Care, UNC Health Care System, UNC Lenoir Health Care, UNC Medical Center, UNC Physicians Network, UNC Rex Healthcare, UNC Rockingham Health Care, Wayne Memorial Hospital