Use and Disclosure of PHI of Deceased Individuals

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

UNCHCS shall protect the PHI of deceased individuals for as long as it is held by the UNCHCS Facility.

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. PHI of Decedents In General. To the extent that UNCHCS maintains health information regarding an
individual who has been deceased for at least 50 years, such information is no longer subject to HIPAA
and may be used and disclosed as determined by UNCHCS, subject to other applicable state or federal
laws.

B. Disclosure of PHI in General. Disclosure of PHI of a decedent may only be made as follows:

1. To the Personal Representative of the Decedent (See UNCHCS Personal Representatives Policy); or
2. The Executor of the Decedent's estate; or
3. The Decedent's next-of-kin (as defined by NC Statute; contact the UNCHCS Privacy Office or your
legal counsel for additional guidance for determining next-of-kin).
4. UNCHCS may disclose a decedent's PHI to family members and friends who were involved in the
care or payment for care of the decedent prior to death, in the same manner as when the patient was
living. This means that PHI of a deceased individual may be disclosed to a family member, other
relative, or a close personal friend of the individual, or any other person identified by the individual,
who was involved in the individual's care or payment for health care prior to the individual's death,
that is relevant to such person's involvement, unless doing so is inconsistent with any prior
expressed preference of the individual that is known to UNCHCS.

C. Coroners and Medical Examiners. PHI of a Decedent may be disclosed to a coroner or medical
examiner for the following purposes:

1. Identifying a deceased individual;
2. Determining a cause of death;
3. Other duties as authorized by law.

D. UNCHCS Facilities performing coroner or medical examiner functions. If a UNCHCS Facility
performs the duties of a coroner or medical examiner, that UNCHCS Facility may also use PHI for the
purposes described in this Policy.

E. Funeral Directors. PHI may be disclosed to funeral directors as necessary to carry out their duties with
respect to the decedent as long as it is consistent with applicable law. If a provider believes, in his/her
professional judgment, that a patient will inevitably die, such patient's PHI may be disclosed to funeral
directors if it is deemed necessary in order for them to carry out their duties.

F. Organ Procurement Organizations. PHI may be disclosed to organ procurement organizations or other
entities engaged in the procurement, banking, or transplantation of cadaver organs, eyes, or tissue in
order to carry out organ, eye or tissue donation and transplantation.

G. Disclosure of PHI of Decedents to Researchers. PHI of a deceased person may be used or disclosed
for research purposes without obtaining an authorization from a personal representative and without
obtaining approval by the UNC IRB or Privacy Board if the following representations and disclosures are
obtained in writing from the researcher:

1. The use or disclosure is sought solely for research on the PHI of deceased individuals;
2. Documentation of the death of the individuals who are the subjects of the PHI exists;
3. The PHI sought is necessary for the research; and
4. The researcher restricts further uses unless the PHI is de-identified
### III. Definitions

None

### IV. References

45 CFR 164.502(f), 164.510(b)(5), 164.512(f)(4), 164.512(g), and 164.512(h)

### V. Related Policies/Forms

UNCHCS [Personal Representatives Policy](http://unchealthcare.policystat.com/policy/5795201/)

### Attachments:

No Attachments

#### Approval Signatures

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<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
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<tbody>
<tr>
<td></td>
<td>Jerylyn Williams: VP Chief Audit &amp; Comp Officer</td>
<td>01/2019</td>
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<tr>
<td>SYSTEM Site Administrator</td>
<td>Emilie Hendee: HCS-Sr Attorney</td>
<td>01/2019</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