Verbal Release of Protected Health Information (PHI)

I. Description:

Procedures and requirements for verbal release of patient information

II. Rationale

It is the policy of University of North Carolina Health Care System (UNCHCS) to ensure the proper disclosure of information, both verbally and in writing, and to verify the identity of all individuals requesting Protected Health Information (PHI). This policy describes the process for verbal release of PHI, including verification of the identity of individuals requesting PHI, setting passwords for family members and friends to obtain PHI, and releasing PHI to such individuals.

III. Policy

If the patient is capable, the patient will control the release of PHI to his/her family members and friends. If the patient lacks capacity (including minor patients), the authorized representative will control the release of PHI. (See UNCHCS Policy, "Authorized Representatives of Patients.") Use of a password makes it easier for staff members to identify an individual requesting PHI about a patient. If the patient is placed in a bed (admission, observation or extended stay), a password should be established by either the patient, if capable, or the authorized representative, if the patient is not capable, under the procedure below. For all other patients (day-op, ED, etc.), using a password is recommended depending on the circumstances, using professional judgment. If the patient lacks capacity, the staff member should use the verification of identity procedures below, if necessary, to identify the authorized representative.

A. Obtaining a Password

1. If the patient is capable, the patient will set a password and will give out the password to his/her friends and family to obtain PHI about the patient. If the patient lacks capacity, the authorized representative will set and give out the password to those he/she is permitting to obtain PHI about the patient. To verify the identity of the authorized representative, see Section III.B. below.

2. Upon patient placement in a nursing unit, the admitting nurse will enter the family password on the Electronic Medical Record in the Admission Navigator using the procedure below.
   a. Access electronic medical record. Select Admission Navigator. Select the Contact Information. Enter
b. The password chosen by the patient or authorized representative should be easily remembered, but not easily guessed. In addition, the password should not be connected to the patient's medical record number, Social Security number, Ident-A-Band number or room number. (For example, the password may be something that is a favorite interest, such as the patient's favorite sport.)

c. When a patient is transported, Carolina Air Care will secure a password from the parent/family member before transporting the patient to UNC Hospitals. The password will be a part of the patient hand-off to the bedside admitting nurse.

i. Coach the parent/guardian to keep the password simple and something they can easily remember.

ii. In the case of multiples, the password can be the same for all babies.

iii. Coach parent/guardian on limiting the sharing of the password with others.

3. The Password will be used primarily for the purpose of sharing information over the telephone. However, there may be times when the password maybe used to obtain information at the bedside (e.g. grandparent not previously known to staff, requests information at the bedside).

4. A Password column should be added to the "My Unit" patient list. Specific patient passwords will appear in this column. Nursing staff can view/confirm all unit passwords from the "My Unit" patient list.

5. If the patient requests a change of password, the nurse will enter the new password in the electronic nursing record by editing the information.

6. When a child is admitted in DSS Custody the Password will be established with the County Case Worker in conjunction with the hospital care manager. If the child goes into custody while already a patient the Password will be changed and communicated through the Case Worker and hospital care manager.

7. Upon transfer to another unit, the transferring unit nurse will communicate the password to the receiving unit nurse. The receiving nursing unit will ensure that the password was entered on the electronic medical record.

B. Verification of Identity

Individuals may present themselves to UNCHCS staff members either by phone or in person. For requesters simply asking for information from the patient list (see Section III.C.1. below), verification of identity is not required. For other situations, if a password has been established and the requester gives the correct password, no further identification is necessary. In all other cases, the identity of the requester must be verified. The staff member will obtain the requester's name and relationship to patient to identify the requester. The staff member will also obtain the purpose of the request and basis for our providing information. Requests made in writing for release of PHI will be referred to Health Information Management.

If the requester's identity must be verified, the following methods are suggested:

- Requester should give his/her address and phone number, and a photo ID/number. If feasible, this information should be retained in the medical record to assist in future identification of family members/friends. Compare the information about the requester with information that may have been given by the patient about his/her family/friends and recorded in the medical record.
- If the employee has any question about the identity of the requester, UNC Hospitals Police may be contacted to run a search on the individual using his/her drivers' license (if available). If necessary, the employee can verify with the patient the requester's right to information, and the employee may call the
requester back.  

- If available, obtain a copy of the document granting authority of the individual as the patient's representative (Health Care Power of Attorney, Guardianship papers, etc.). The copy should be placed in the medical record.

1. Authorized Representatives of Patient
   a. To determine the appropriate authorized representative for the patient, refer to UNCHCS Policy, "Authorized Representatives of Patients" and obtain appropriate documentation, as required by such policy.

2. Family Members/Friends Involved in Care of Patient
   a. No information should be provided if the patient has opted out of sharing information with family and friends on the General Consent for Treatment form. Otherwise, proceed to (b).
   b. The staff member will ask the requester to give information which will assist in identifying the individual. (See bulleted list above.)
   c. Once the requester has been identified, information may be given as stated in Section III.C.2. below regarding release of information to family and friends.

3. Other Requesters (Law Enforcement, Government Agencies, Other Officials)
   a. If the requester is a law enforcement official, refer the individual to the applicable police department: at UNC Hospitals, the appropriate department would be UNC Hospitals' Police; at a University site, the appropriate department would be UNC Campus Police.
   b. For requests from other government agencies, officials, or attorneys, no information should be given by a department, but the individual will be referred in accordance with UNCHCS Policy, "Police and Investigative Activities in Hospital."

C. Amount of PHI which can be released

If the patient is not capable, the authorized representative has a right to any information which the patient may obtain. No information will be given to family/friends if the patient/authorized representative has opted out of sharing information with family/friends or the requestor does not reference the patient by name. No information, including patient location, can be provided regarding patients receiving mental health or substance abuse health services from the UNC Hospitals Psychiatry Service or WakeBrook unless they "opt in" as described in applicable admission policies. All releases of information must be limited to the minimum amount of information necessary to fulfill the purpose of the request. If there is any question about the amount of information to be given to a requestor, before releasing the information, the employee should contact his/her supervisor.

1. Persons Requesting Patient by Name from Patient List Without a Password
   No information about the patient should be given if the patient's Electronic Medical Record or the General Consent for Treatment filed in the patient's hard copy medical record indicates that the patient objects to having his/her information released from the "patient list." If the person continues to inquire about a patient who does not want his/her information released, the staff will suggest that he/she contact the person's family or his/her source of information. If the person is still not satisfied, the staff will ask the person to hold or wait, and the staff will contact the department manager or director for assistance. The department manager/director may choose to contact the patient to alert him/her to the situation.

If the patient does not object to disclosures from the "patient list," UNCHCS may provide the following
information to people who request the patient by name:

a. The patient's location in UNCHCS;

b. The patient's condition described in general terms that do not give specific medical information about the patient using "good", "fair", "serious", "critical", or "deceased." Stable is not considered a patient condition and should not be given out as such. These conditions are defined as follows:

i. Good - Vital signs are stable and within normal limits. Patient is conscious and comfortable. Prognosis is excellent.

ii. Fair - Vital signs are stable and within normal limits. Patient is conscious but may be uncomfortable. Prognosis is favorable.

iii. Serious - Vital signs may be unstable and not within normal limits. Patient is acutely ill and may not be conscious. Prognosis is questionable.

iv. Critical - Vital signs are unstable and not within normal limits. Patient may not be conscious. Prognosis is unfavorable.

If the requester asks for additional information, refer to Sections III.A. and III.B. above. The requester should either provide the password assigned by the patient (as described in Section III.A. above) or should be identified as a family member/friend (as described in Section III.B. above; family and friends are entitled to information as set forth in Section III.C.2. below).

2. Family and friends

Unless the patient objects, UNCHCS may (i) use or disclose to a family member, other relative, or a close personal friend of the patient, or any other person identified by the patient, PHI directly relevant to such person's involvement with the patient's care or payment related to the patient's care, and (ii) use or disclose PHI to notify, or assist in the notification of (including identifying or locating), a family member, a personal representative of the patient, or another person responsible for the care of the patient, of the patient's location, general condition, or death. Staff should provide minimal information that is appropriate for these purposes, in the staff member's professional judgment. See Policy ADMIN #0139, "Privacy/Confidentiality of Protected Health Information."

3. Phone vs. In-Person Inquiries

Generally, inquiries by phone and in person will be handled in the same manner. Some exceptions include:

a. If the patient is capable of consenting:

i. If the requester is in the room with the patient, staff should ask the patient if it is acceptable to discuss the patient's information with the individual present.

ii. If the requester is at the nurse's station or on the phone, before information is given, the password should be obtained from the requester or identity of the requester as the authorized representative should be verified as described above.

b. If the patient is not capable of consenting:

i. If the requester is in the room with the patient, in order to obtain information, the requester should be either the authorized representative or be authorized by the authorized representative to receive information.

ii. If the requester is at the nurse's station or on the phone, before information is given, the password should be obtained from the requester or identity of the requester as the authorized
representative should be verified as described above.

**Attachments:**

No Attachments

**Applicability**

UNC Medical Center