

ORGANIZATION POLICY

POLICY TITLE: ONSLOW MEMORIAL HOSPITAL DISCLOSURE
 REGARDING DECEDENTS

POLICY NUMBER: 1309

PURPOSE AND APPLICABLE LAW: The purpose of this Policy is to establish the Hospital's disclosure regarding decedents who have been deceased fifty (50) years or less at the time that the request for disclosure is made.

It is the policy of OMH that if under applicable law, an executor, administrator, or other person has authority to act on behalf of a deceased individual or of the individual's estate, OMH will treat such person as a personal representative of the patient (See HIPAA Procedure: Disclosure of Information to Personal Representatives).

It is also the policy of OMH that family members and the other individuals involved in the decedent's care prior to death may receive individually identifiable information of the decedent so long as the decedent did not express a contrary desire prior to death or such disclosure is contrary to state or federal law.

When using or disclosing a deceased patient's protected health information, OMH must make reasonable efforts to limit the information used or disclosed to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request.

DEFINITIONS: Certain terms having specific definitions are used in this Policy, and these terms and definitions are as follows:

- A. Individually identifiable health information means information that is a subset of health information, including demographic information collected from an individual, and:
 - 1. Is created or received by a healthcare provider, health plan, employer, or healthcare clearinghouse; and
 - 2. Relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and
 - i. That identifies the individual; or
 - ii. With respect to which there is a reasonable basis to believe the information can be used to identify the individual.

- B. Protected health information means individually identifiable health information that is:
 - 1. Transmitted by electronic media (e.g., internet, intranet, extranet, facsimile dial up lines);

2. Maintained in any medium of electronic media (e.g., computer hard drives, removable/transportable digital memory medium, such as magnetic tape or disk, optical disk, or digital memory card); or
3. Transmitted or maintained in any other form or medium.

PROCEDURE:

Prior to releasing the deceased patient's protected health information, OMH shall verify the requesting individual's authority to determine whether the person has the authority, as an executor/administrator, coroner/medical examiner, funeral director, or other authorized person, to act on behalf of the deceased patient or the deceased patient's estate, or to request information about a deceased patient.

If the requesting individual provides documentation sufficient to ensure that he/she is authorized to receive information regarding a deceased patient, OMH may treat such person as a personal representative of the patient with respect to the protected health information relevant to the personal representation. (See HIPAA Procedure: Disclosures of Information to Personal Representatives).

The documentation of the requesting individual's authority shall be retained in the Patient's chart for six years.

If the requesting individual is a family member or an individual that was involved in the decedent's care prior to death, OMH shall verify that there is no documentation or other indication that the decedent expressed a preference that the requesting individual be prohibited from receiving the information, unless that preference is contrary to a provision of state or federal law requiring disclosure.

If the Requesting Individual is a Coroner or Medical Examiner: OMH may disclose the deceased patient's protected health information for the purpose of identifying a deceased person, determining a cause of death, or other duties as authorized by law.

If the Requesting Individual is a Funeral Director: OMH may disclose the deceased patient's protection health information to funeral directors, consistent with applicable law, as necessary to carry out their duties with respect to the decedent. If necessary for funeral directors to carry out their duties, you may disclose the Patient Information prior to, and in reasonable anticipation of, the patient's death.

EFFECTIVE DATE: June 2005

REVISION DATE: January 12, 2009, January 2015

REVIEW DATE: December 2011, January 2018

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