

Medical One

Accounting of Non-Authorized Disclosures Policy

Effective date of policy: **June 26, 2013**

Protected health information (PHI) may be disclosed without patient authorization (“non-authorized”) in certain circumstances. These include but are not limited to:

- Public health authority,
- The FDA
- The medical examiner or coroner after a patient has died
- Worker’s Compensation
- As authorized by state or federal law

This practice is not required to account for disclosures made: to the individual to which the information pertains, for treatment, payment or health care operations, when authorization is given, to person’s involved in the patient’s care, for national security or intelligence, to correctional institutions or law enforcement officials, as part of a limited data set or that occurred prior to April 14, 2003.

If this practice makes certain non-authorized disclosures, it will keep a log of the disclosures for six (6) years. An accounting must include: the date of disclosure, the name of the entity or person who received the PHI, person’s address, a brief description of the PHI disclosed, and a brief statement of purpose for the disclosure.

A patient may request, in writing, an accounting of any non-authorized disclosures of his PHI. The patient is allowed one accounting per year at no charge. If a patient requests frequent disclosures, this practice may charge for this service, PROVIDED he is informed of the approximate charge in advance and agrees to it. The practice must retain documentation of any accounting made to an individual.

The practice will respond to the request for accounting within 60 days of the receipt of the request, but may have a one-time 30-day extension in which to respond to or comply with the request from the patient.