Healthcare Providers
Disclosures to Family, Friends or Others
Patient Location

There are instances when a patient’s friend or family member contacts one of Purdue’s clinics to ask about the location of a patient or whether the patient has been seen at the clinic. Following is guidance provided to assist clinic staff in providing appropriate responses for specific situations that commonly occur in Purdue’s clinics. Also provided, is the related information in the Notice of Privacy Practices that addresses this issue and an FAQ that addresses a clinic’s responsibilities related to providing “directory information” should the clinic decide to provide this information. Should a clinic decide to provide information, as stated in the Notice of Privacy Practices, directory requirements must be met, as specified in the FAQ.

Guidance

**Situation:** Friends or family are concerned about the whereabouts of a person. They contact the clinic to ask if a person is at the clinic or has been seen as a patient recently.

**Response:** If the patient is not currently at the clinic, the caller may be told that the person is not at the clinic.

If the person is currently receiving services at the clinic, clinic staff should take the name of the caller, their purpose for calling the patient and tell them that they will check. Clinic staff should then ask the patient if it is okay to provide information to the caller and what information to provide. If the patient does not want the clinic staff to provide information, staff should tell the caller that they are unable to provide information about the patient due to privacy rights and suggest that the caller contact the patient directly for information.

If the caller is asking for historical information about visits or services provided and the patient has not either provided an authorization to share this information or a verbal consent to share information with this person pertaining to their involvement in the patient’s treatment or payment, the caller should be informed that due to HIPAA confidentiality requirements, information about patient visits is not provided without patient authorization.

If the patient is a student and the caller is concerned about the student’s whereabouts or safety, the caller can be told that in the case of a student emergency, emergency contact information, provided by the student in the University student system, is used to notify friends or family members. If the caller is still concerned about the student, they should contact the West Lafayette Dean of Student’s office at 765-494-1747 or 765-494-1254 to ask for help in locating the person or contact law enforcement for help finding a missing person.
**Situation:** A Purdue instructor calls the clinic to check to see whether a student was actually at the clinic and legitimately away from class.

**Response:**
The instructor should be informed that due to HIPAA confidentiality requirements, patient visits cannot be verified between the clinic and instructor without a written authorization from the patient. It is standard procedure for the clinic to provide a written visit verification form to the student patient who can then provide to the instructor.

**Situation:** An individual comes to the clinic and tells the reception area that they have arrived to pick up a patient.

**Response:**
If the patient has notified clinic staff that someone is coming to pick them up, the individual should be directed to the location of the patient.

If the patient has not provided information about anyone coming to pick them up, clinic staff should ask for the person’s name and tell the person that they will check. Another staff member should be given a note to tell the patient that someone has arrived to pick them up and ask them whether it is okay to tell the person the patient’s location in the clinic.

**Health Information Pertaining to Decedents**

HIPAA protects individually identifiable health information about individuals who have been deceased for up to 50 years after the date of death. After that time, the information is no longer defined as protected health information.

Generally, an authorization is required for a particular use or disclosure of the PHI of a decedent, a covered component may use or disclose the PHI in that situation, only if the covered component obtains an authorization from the decedent’s personal representative, except that certain disclosures are permitted to family members involved in the care of the patient prior to death.

**Indiana State Law – Personal Representatives**

Indiana State Law dictates who may act as a personal representative for a deceased person.

In the case where a court has appointed a personal representative, one of the following two documents should be presented: a letter of administration (if there is no will) or a letter testamentary (if there is a will).
If there is no court appointed personal representative, then a spouse would be the acting representative. If there is no spouse, any responsible member of the patient's family would be the acting representative, including a parent, guardian, or custodian of the deceased patient's minor child and no documentation would be required in either of these cases, except for appropriate identification.

The representative should sign their own name on the authorization and indicate that they are the decedent’s representative.

**Disclosures about a Decedent to Family Members and Others Involved in Care**

Covered components are permitted to disclose a decedent’s protected health information to family members and others who were involved in the care or payment for care of the decedent prior to death, unless doing so is inconsistent with any prior expressed preference of the individual.

For example, a covered health care provider could describe the circumstances that led to an individual’s passing with the decedent’s sister who is asking about her sibling’s death. In addition, a covered health care provider could disclose billing information to a family member of a decedent who is assisting with wrapping up the decedent’s estate. However, in both of these cases, the provider generally should not share information about past, unrelated medical problems.

Finally, these disclosures are permitted and not required, and thus, a covered component that questions the relationship of the person to the decedent or otherwise believes, based on the circumstances, that disclosure of the decedent’s protected health information would not be appropriate, is not required to make the disclosure.

**Notice of Privacy Practices- Disclosures to family, friends, or others**

In very limited cases, we may provide health information to family members, or close friends who are directly involved in your care or the payment for your health care, unless you tell us not to. For example, we may tell a friend who asks for you by name where you are in our facility, and we may allow a friend or family member to pick up a prescription for you. We may also contact a family member if you have a serious injury or in other emergency circumstances. We may discuss medical information in the presence of a family member or friend if you are also present and indicate that it is okay to do so.

**FAQ provided by the Office for Civil Rights:**

Does the HIPAA Privacy Rule permit hospitals and other health care facilities to inform visitors or callers about a patient’s location in the facility and general condition?
Answer:
Yes. Covered hospitals and other covered health care providers can use a facility directory to inform visitors or callers about a patient’s location in the facility and general condition. The Privacy Rule permits a covered hospital or other covered health care provider to maintain in a directory certain information about patients – patient name, location in the facility, health condition expressed in general terms that does not communicate specific medical information about the individual, and religious affiliation. **The patient must be informed about the information to be included in the directory, and to whom the information may be released, and must have the opportunity to restrict the information or to whom it is disclosed, or opt out of being included in the directory.** The patient may be informed, and make his or her preferences known, orally or in writing. The facility may provide the appropriate directory information – except for religious affiliation – to anyone who asks for the patient by name. Religious affiliation may be disclosed to members of the clergy, who are given additional access to directory information under the Rule. (See other FAQs at this site by searching on the term “clergy”.)

Even when, due to emergency treatment circumstances or incapacity, the patient has not been provided an opportunity to express his or her preference about how, or if, the information may be disclosed, directory information about the patient may still be made available if doing so is in the individual’s best interest as determined in the professional judgment of the provider, and would not be inconsistent with any known preference previously expressed by the individual. **In these cases, as soon as practicable, the covered health care provider must inform the patient about the directory and provide the patient an opportunity to express his or her preference about how, or if, the information may be disclosed.** See 45 CFR 164.510(a).