



Trouves Health Care

TITLE:	CONFIDENTIATLIY AND DISCLOSURE OF MEDICAL RECORD	POLICY 4.02
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Authority: [45 CFR 164.530, Security and Privacy](#)
[RCW 70.02, Medical Records](#)
[RCW 18.139, Regulation of health professions](#)
[WAC 388.78A.2350, Coordination of health care services](#)

PURPOSE:

This policy outlines Trouves obligation and procedures related to using, disclosing and requesting protected health information (PHI).

SCOPE:

This policy applies to Trouves employees, residents and outside stakeholders.

POLICY:

- A. Trouves makes every reasonable effort to limit PHI disclosure to the minimum necessary to accomplish the intended purpose of the use, disclosure or request.
- B. Trouves provides PHI to external health care providers when an authorization is:
 - 1. In writing, dated, and signed by the resident;
 - 2. Identify the nature of the information to be disclosed;
 - 3. Identify the name and institutional affiliation of the person or class of persons to whom the information is to be disclosed;
 - 4. Identify the provider or class of providers who are to make the disclosure;
 - 5. Identify the resident; and
 - 6. Contain an expiration date or an expiration event that relates to the resident or the purpose of the use or disclosure.
- C. Trouves may provide disclosure of PHI without resident authorization if the disclosure is:
 - 1. Not related to sexually transmitted disease;
 - 2. To a person who the provider or facility reasonably believes is providing health care to the resident;
 - 3. To any other person who requires health care information for health care education, or to provide planning, quality assurance, peer review, or administrative, legal, financial, actuarial services to, or other health care



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operations for or on behalf of the health care provider or health care facility; or for assisting the health care provider or health care facility in the delivery of health care and the health care provider or health care facility reasonably believes that the person:

- a. Will not use or disclose the health care information for any other purpose; and
 - b. Will take appropriate steps to protect the health care information;
4. To any person if the health care provider or health care facility believes, in good faith, that use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public, and the information is disclosed only to a person or persons reasonably able to prevent or lessen the threat, including the target of the threat. There is no obligation under this chapter on the part of the provider or facility to so disclose; or
5. For payment, including information necessary for a recipient to make a claim, or for a claim to be made on behalf of a recipient for aid, insurance, or medical assistance to which he or she may be entitled.

D. If the conditions of RCW 70.02.050 are not met, Trouves may not require, a resident to authorize the facility to share health care information.

E. A health care provider shall disclose health care information, except for information and records related to sexually transmitted diseases, unless otherwise authorized in RCW [70.02.220](#), about a resident without the resident's authorization if the disclosure is:

- 1. To federal, state, or local public health authorities, to the extent the health care provider is required by law to report health care information; when needed to determine compliance with state or federal licensure, certification or registration rules or laws, or to investigate unprofessional conduct or ability to practice with reasonable skill and safety under chapter [18.130](#) RCW. Any health care information obtained under this subsection is exempt from public inspection and copying pursuant to chapter [42.56](#) RCW; or
- 2. When needed to protect the public health.

F. If an external health provide is unresponsive to Trouves effort to coordinate services, Trouves will:

- 1. Provide notice to the resident of the risks of not allowing the assisted living facility to coordinate care with the external provider; and



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2. Address known associated risks in the resident's negotiated service agreement.

- G. When coordinating care or services, Trouves will:
1. Integrate relevant information from the external provider into the resident's preadmission assessment and reassessment, and when appropriate, negotiated service agreement; and
 2. Respond appropriately when there are observable or reported changes in the resident's physical, mental, or emotional functioning

PROCEDURE:

- A. The resident, resident's guardian or health care facility may request a Disclosure of Protected Health Information form from Trouves Administrative Department.
- B. The completed, signed form is returned to the Administrative Department for processing.
- C. The administrative department retains the original or a copy of each authorization or revocation in conjunction with any health care information from which disclosures are made.
- D. The disclosure form expires one year after signing of the authorization, unless renewed by the resident.
- E. Trouves charges a minimuml fee of \$.25 a page for copies.

EXCEPTIONS:

No exceptions to this policy may be granted without the prior written approval of the Director.

SUPERCEDES:

Non