

# Partners In Recovery

POLICY AND  
STANDARDS

*Applicable Arizona Department of Health Services Behavioral Health Rule(s):*

R9-20-211 *Client Records* and R9-21-209 *Records*

**Policy Name: Uses & Disclosures of  
Protected Health Information (PHI) Requiring  
No Permission From the Member**

**Policy Number: REC - 0002**

---

H.M. Gilbert Jr., Executive Director, PIR

---

Date

***Cross Reference(s)***

*Uses and Disclosures of PHI for Treatment, Payment, and Health Care Operations; Uses and Disclosures of PHI Requiring Prior Internal Review; Member Representation; Minimum Necessary Uses and Disclosures of PHI; Verification; Uses and Disclosures of PHI for Special Government Functions; Uses and Disclosures of PHI for Judicial and Administrative Proceedings*

***Policy Statement***

Partners In Recovery, Direct Care Clinics (DCC) may use or disclose protected health information (PHI) without obtaining authorization from the member for disclosures required by law, public health and health oversight activities, about decedents in certain situations, and in situations in which abuse, neglect, or domestic violence is suspected.

***Purpose***

The purpose of this policy is to describe the conditions under which DCC may use and/or disclose a member's PHI without obtaining member authorization.

***Scope***

Partners In Recovery Direct Care Clinics.

***Key Terms***

Should the reader need to inquire as to the definition of a term used in this policy, the Partners In Recovery > Key Term Glossary can be found in the back of the Policy and Procedure Manual.

***Standards***

- I. DCC may use or disclose PHI without obtaining an authorization or other permission from the member:
  - A. For treatment, payment or health care operations, and
  - B. For uses and disclosures required by law if they comply with, and are limited to, the relevant requirements of the law.
- II. DCC may disclose PHI for public health activities to:
  - A. A public health authority authorized by law to collect or receive the information to prevent or control disease, injury, or disability, including, but not limited to, the reporting of disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions;
  - B. A public health authority or other appropriate government authority authorized by law to receive reports of child abuse or neglect; or
  - C. A person subject to the jurisdiction of the Food and Drug Administration (FDA) with responsibility for the quality, safety or effectiveness of an FDA-regulated product or activity:
    1. To report adverse events (or similar reports with respect to food or dietary supplements), product defects or problems, or biological product deviations;

2. To track FDA-regulated products;
  3. To enable product recalls, repairs, or replacement (including locating and notifying individuals who have received products of product recalls, withdrawals, or other problems); or
  4. To conduct post marketing surveillance to comply with requirements or at the direction of the FDA.
- D. If DCC obtains information related to a member's communicable disease in the course of providing a health service or from a health care provider, such information shall only be otherwise disclosed as provided in ARS 36-664.
- III. Disclosures about victims of abuse, neglect or domestic violence
- A. DCC may disclose PHI about a member whom DCC reasonably believes to be a victim of abuse, neglect, or domestic violence to a government authority, including a social service or protective services agency, authorized by law to receive reports of abuse, neglect, or domestic violence as follows:
1. To the extent the disclosure is required by law and the disclosure complies with and is limited to the relevant requirements of the law; or
  2. If the member agrees to the disclosure; or
  3. To the extent the disclosure is expressly authorized by statute or regulation and:
    - a) A Partners In Recovery clinician, in the exercise of professional judgment, believes the disclosure is necessary to prevent serious harm to the member or other potential victims; or
    - b) If the member is unable to agree because of incapacity, a law enforcement or other public official authorized to receive the report represents that the PHI being sought is not intended to be used against the member and that an immediate enforcement activity that depends upon the disclosure would be materially and adversely affected by waiting until the member is able to agree to the disclosure.
- B. If DCC makes a disclosure permitted by the above section (III.A), the member is promptly informed that the report has been or will be made, except if:
1. The Partners In Recovery clinician, in the exercise of professional judgment, believes informing the member would place him/her at risk of serious harm; or
  2. DCC would be informing the member's personal representative, and DCC reasonably believes the personal representative is responsible for the abuse, neglect, or other injury and that informing the personal representative would not be in the best interests of the member as determined by a Partners In Recovery clinician, in the exercise of professional judgment.
- C. Arizona law provides for reporting of child abuse and neglect pursuant to ARS 13-3620; adult abuse and neglect pursuant to ARS 46-454; sexually violent persons for compliance

with the SVP Program in Title 36, Chapter 37; and the abuse or neglect of certain disabled members pursuant to the State Protection and Advocacy Agency.

IV. Uses and disclosures for health oversight activities

A. DCC may disclose PHI to a health oversight agency for oversight activities authorized by law, including audits; civil, administrative, or criminal investigations; inspections; licensure or disciplinary actions; civil, administrative, or criminal proceedings or actions; or other activities necessary for appropriate oversight of:

1. The health care system;
2. Government benefit programs for which health information is relevant to beneficiary eligibility;
3. Entities subject to government regulatory programs for which health information is necessary for determining compliance with program standards; or
4. Entities subject to civil rights laws for which health information is necessary for determining compliance.

B. For the purpose of the disclosures permitted by Section IV.A, a health oversight activity does not include an investigation or other activity in which the member is the subject of the investigation or activity and such investigation does not arise out of and is not directly related to:

1. The receipt of health care;
2. A claim for public benefits related to health; or
3. Qualification for, or receipt of, public benefits or services when a patient's health is integral to the claim for public benefits or services.

C. Notwithstanding Standard IV. B. above, if a health oversight activity or investigation is conducted in conjunction with an oversight activity or investigation relating to a claim for public benefits not related to health, the joint activity or investigation is considered a health oversight activity for purposes of Standard IV of this policy.

D. Audits by accrediting bodies do not qualify as health oversight activities.

V. Uses and disclosures of PHI about decedents

A. DCC may disclose PHI to a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death, or other duties as authorized by law.

B. DCC may disclose PHI 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, DCC may disclose the PHI prior to, and in reasonable anticipation of, the member's death.

VI. Disclosures for workers' compensation. DCC may disclose PHI as authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar

programs, established by law, that provide benefits for work-related injuries or illness without regard to fault.

VII. Other situations in which DCC may use and disclosure PHI without obtaining authorization from the member are addressed in the following policies:

- A. *Uses and Disclosures of PHI Requiring Prior Internal Approval;*
- B. *Uses and Disclosures of PHI for Special Government Functions;*
- C. *Uses and Disclosures of PHI for Judicial and Administrative Proceedings; and*
- D. *Uses and Disclosures of PHI for Treatment, Payment and Health Care Operations*

VIII. Documentation/Record Retention

- A. Copies of all written or electronic communications or forms are maintained in the designated record set.
- B. All statements verifying identity or authority for any action or activity identified in this policy that requires verification are documented in the designated record set.
- C. All statements supporting professional judgment determinations for any action or activity identified in this policy that addresses professional judgment are documented in the designated record set.

***Associated Partners In Recovery Direct Care Clinic Forms & Attachments***

*None*

# # #