

# On the Line: Professional Practice Solutions (10/03)

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**Q:** Does the privacy rule allow us to release patient information over the telephone without authorization? How do I decide when I should ask for verification of a treatment relationship with the patient?

**A:** In the past, HIM professionals have carefully guarded the releasing of patient information. It seems contrary to usual standards of HIM practice, therefore, to release health information without authorization. However, the privacy rule now allows the release of health information without an authorization from the patient in certain situations:

- for treatment (by the patient's or another covered entity)
- for payment
- for healthcare operations

The biggest challenge for most HIM departments is determining if there is a treatment relationship between the patient and the requesting provider. While the privacy rule allows the release of health information without authorization for specific purposes, it also requires verification of the identity of the person requesting health information. In Section 164.514(h), the rule requires the covered entity to "verify the identity of a person requesting protected health information and the authority of any such person to have access to protected health information under this subpart, if the identity or any such authority of such person is not known to the covered entity." Within this challenge is the knowledge that urgent requests for patient information and unauthorized requests for information come to an HIM department via telephone. It is the HIM department's responsibility to be as careful as possible when verifying identity and to treat the request as urgently as is necessary to assist in patient care delivery.

What steps should a covered entity take to be in compliance with the privacy rule? When written requests are received from other covered entities, the HIM department's policy should be to:

- Determine if the covered entity is known to your facility. If the requester is a current medical staff member, a former medical staff member, or a local covered entity, then you have verified the covered entity's identity and have met the intent of the rule
- If the requester is unknown to you, you can verify that he or she has authority to request the information by:
  - Checking the local telephone book or Internet business pages for a business address
  - Calling the switchboard of the requesting facility and verifying identity of the practitioner making the request
  - Verifying whether the clinician is an MD by visiting the American Medical Association's (AMA) Web site at [www.ama-assn.org](http://www.ama-assn.org) (the site lists all MDs, not just AMA members). Doctors of Osteopathy (DOs) who are members of the American Osteopathic Association can be located at [www.aoa-net.org](http://www.aoa-net.org)
- If the identity of the clinician cannot be verified, contact the patient or individual who is the subject of the request to notify him or her of such request and to obtain authorization to release the information. Your organization may decide that getting an oral authorization is sufficient for this purpose
- Send the information when the identity is verified or when the patient has authorized the release of information

When your HIM department receives a telephone request, policy should require staff to:

- Verify the identity and business address of the covered entity
- If the covered entity is unknown to you, but verifiable, ask for a (faxed) written request for PHI in order to have a record of the request
- If you cannot verify the identity of the covered entity, obtain the authorization from the patient or individual who is the subject of the request. Again, your organization may choose to consider verbal verification and authorization as meeting your procedural guidelines

While the privacy rule has changed some of the ways we do business, HIM professionals still must protect the individual's health information while making sure it is available for treatment. Following the above guidelines will allow compliance with the rule as well as a moderate level of caution.

## Reference

"Standards for Privacy of Individually Identifiable Health Information; Final Rule." 45 CFR Part 164.530. *Federal Register* 65, no. 250 (December 28, 2000). Available at <http://aspe.hhs.gov/admsimp>.

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