

# Preparing for Suspension of Disclosure Accounting

Save to myBoK

by Carol Ann Quinsey, RHIA

Are the rules for the suspension of disclosure accounting keeping your organization in suspense?

Section 164.528 of the privacy rule outlines the requirements for accounting of disclosures for individuals. Section 164.528 (a) (2)(i) calls for suspension of disclosure accounting if requested by a health oversight or law enforcement agency. This article will explain suspension of disclosure accounting so your organization is prepared to handle these requests.

## Written versus Oral Requests

There are two ways a covered entity may be asked to suspend disclosure of accounting—written or oral. First, the rule states that accounting of disclosures must be suspended if the health oversight or law enforcement agency has made a written request to the covered entity and states that such an accounting to the individual would be reasonably likely to impede the agency's activities. The statement must specify the time period covered by the suspension of accounting.

The rule goes on to state that if an oral request is made to a covered entity by a health oversight or law enforcement agency, the covered entity must:

- document the statement (request), including the identity of the person making the statement
- temporarily suspend the individual's right to an accounting of disclosures subject to the statement
- limit a temporary suspension to 30 days unless a written statement is submitted to the covered entity during the 30-day period

## Determining Policies, Procedures

Can your organization respond if a patient asks for an accounting of disclosures during a time when a suspension of disclosure accounting is in effect? As you consider your options, it may be helpful to imagine what the circumstances might be when a patient asks for an accounting of disclosures.

Consider the following questions: Is it likely that a patient is just curious about disclosures of his or her medical information, and the request is only coincidental with the suspension? Or does the patient suspect something is being investigated and is looking for proof? Should your organization let the time allowed by the privacy rule elapse before producing the accounting if it would allow you to pass through the suspension period? Or should you respond to the individual as soon as it is practical to do so?

Each covered entity should determine how to proceed. The rule does not clearly state what disclosure accounting is suspended. Your organization will need to address questions like: Is all disclosure accounting suspended during the time period of the request? Or does the suspension of accounting only cover disclosures made to the specific agency that requested the suspension? Executive management and legal counsel should be involved in making the decision of how to interpret this before writing policies and procedures.

## Turnaround Time

Covered entities are allowed 60 to 90 days to provide an accounting of disclosures to individuals. However, a copy of a patient's medical record must be produced in 30 to 60 days and even more quickly in some states. Patients could perceive that they are being "put off" if they are told that it will take 60 to 90 days to produce an accounting of disclosures.

If a patient requests an accounting during a time of suspension, it seems reasonable to contact the agency requesting the suspension of accounting to determine if the suspension still needs to be in place. If the suspension can be terminated,

disclosure accounting could take place following routine procedures. If the suspension is still required, each covered entity needs procedures for how to respond.

## Reporting What You Can

If the covered entity chooses to respond to the patient with an accounting of disclosures that are not subject to the suspension, your organization could accompany the accounting with a cover letter stating, “This is a list of disclosures that can be reported at this time” or similar language. If there are no disclosures other than those subject to the suspension, language in the letter to the patient could state, “We have no disclosures to report at the present time.”

What happens if the patient requests a later accounting of disclosures and realizes that there are disclosures listed that were not reported in a previous accounting? The covered entity can explain that it was bound by the privacy rule to honor a request not to report disclosures to the specific agency at the time of the patient’s previous request and that the time period for such suspension has expired, allowing you to provide a complete list.

There are positives and negatives to reporting or not reporting in the event of a suspension of disclosure accounting. It is important to consider all facets of the procedure before you are faced with a request from a patient or his or her representative for an accounting of disclosures. Policies that allow staff flexibility in responding while ensuring that the organization has carefully considered and endorsed a policy and procedure to handle suspensions of disclosure accounting will allow staff to respond confidently.

## Reference

“Standards for Privacy of Individually Identifiable Health Information; Final Rule.” 45 CFR Parts 160 and 164. *Federal Register* 67, no. 157 (August 14, 2002). Available at <http://aspe.hhs.gov/admnsimp/>.

*Carol Quinsey* ([carol.quinsey@ahima.org](mailto:carol.quinsey@ahima.org)) is an HIM practice manager at AHIMA.

---

**Article citation:**

Quinsey, Carol. "Preparing for Suspension of Disclosure Accounting." *Journal of AHIMA* 74, no.7 (July/August 2003): 61.

---

Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.