

UNIVERSITY PHYSICIANS OF BROOKLYN, INC.

POLICY AND PROCEDURE

		No:	_____	
Subject:	USES & DISCLOSURES OF DECEDENT INFORMATION	Page	1	of 2
Prepared by:	Shoshana Milstein	Original Issue Date:	NEW	
Reviewed by:	HIPAA Policy & Procedure Team	Supersedes Date:	NONE	
Approved by:	HIPAA Oversight Committee	Approval Date:	12/02	
		Distribution:		
		Issued by:		

- I. **Purpose:** To ensure that all uses and disclosures of protected health information (PHI) of decedents comply with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its accompanying regulations.

II. **Policy**

A. HIPAA Privacy Standards- All HIPAA Privacy policies and procedures apply to the PHI of deceased patients.

B. Personal Representatives- A “qualified person” may be treated as the patient’s personal representative in regard to his/her PHI. See the policy on Personal Representatives for guidelines.

C. Law Enforcement- PHI about a patient who has died may be disclosed to a law enforcement official for the purpose of alerting law enforcement of the patient’s death if there is suspicion that the death may have resulted from criminal conduct.

D. Coroners, Medical Examiners and Funeral Directors

1. PHI may be disclosed to a coroner or medical examiner, without authorization, for the purpose of identifying a deceased person, determining a cause of death or for other duties authorized by law.
2. PHI may be disclosed to funeral directors without authorization, as necessary, to carry out their duties with respect to the decedent. PHI may also be disclosed prior to, and in reasonable anticipation of, the patient's death, when necessary.

E. Organ Transplantation- PHI may be disclosed to an organ procurement organization or other entities engaged in the procurement, banking or transplantation of cadaveric organs, eyes or tissue for the purpose of facilitating organ, eye or tissue donation and transplantation.

III. Procedure

The development of the procedure section is the responsibility of the respective PRACTICE. It is dependent upon the unique needs of each practice's operating structure and shall be advanced and customized accordingly.

- IV. Responsibilities:** It is the responsibility of all medical staff members and practice staff members to comply with this policy. Medical staff members include physicians as well as allied health professionals. Practice staff members include all employees, medical or other students, trainees, residents, interns, volunteers, consultants, contractors and subcontractors at the practice.

- V. Reasons for Revision-** Regulatory changes

- VI. Attachments-** None

- VII. References-** Standards for Privacy of Individually Identifiable Health Information, 45 CFR §164.502(f)(g), §164.512(f)(g)(i)