

UC Riverside, School of Medicine Policies and Procedures**Policy Title:** Law Enforcement Policy**Policy Number:** 950-02-010

Responsible Officer:	Compliance Officer
Responsible Office:	Compliance Office
Origination Date:	06/2013
Date of Revision:	Not Applicable
Scope:	UCR School of Medicine and All UCR Health Practice Locations

I. Policy Summary

All reports or disclosures of PHI to law enforcement officials must be carried out in accordance with this policy and federal and state regulation and laws. Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Confidentiality in Medical Information Act (CMIA) permit the disclosure of Protected Health Information (PHI) to law enforcement officials in specified circumstances:

- Pursuant to legal process and as otherwise required by law;
- To a limited degree, for purposes of identifying and locating certain classes of persons;
- As necessary to alert law enforcement to the commission and circumstances of a crime.

II. Definitions

Refer to Standard Definition Guide Document.

III. Policy Text

UCR Health recognizes the need to balance safeguarding the privacy and security of PHI with reporting or disclosing PHI to law enforcement officials as required or permitted by law. All reports or disclosures of PHI to law enforcement officials must be carried out in accordance with this policy and federal and state regulation and laws.

Unless the disclosure is required or permitted by state and federal regulations and laws, no information can be provided to law enforcement without the patient's written authorization.

When reporting or disclosing PHI to law enforcement officials, providers and staff will provide only the "minimum necessary" PHI is provided to accomplish the intended purpose. Disclosure does not require the provision of a copy of the patient's medical record.

Disclosure which include copies of the patient's medical record to law enforcement cannot be made unless:

- The disclosure is mandated by law.
- The disclosure has been authorized in writing by the patient or the patient's legal representative.
- The disclosure is necessary to comply with legal process, such as a court order, search warrant or subpoena. Consultation with the Compliance and Privacy Officer or Campus Legal Counsel prior to making the disclosure is required. Providers and staff shall complete the *Report of Mandatory Disclosures of PHI* form (Attachment A) and document in the patient's medical record all reports and disclosures of PHI made to law enforcement officials.

A. Mandatory Disclosures

Under California law, physicians are required to make oral and written reports to local authorities in various situations. The most frequent situations involve persons who:

1. Have a physical injury resulting from a firearm or assaultive or abusive conduct;
2. May be victims of child abuse;
3. Have an injury or condition resulting from neglect or abuse of a patient transferred from another health facility;
4. May be victims of sexual assault, including rape;
5. Have injured or threatened on duty UCR Health personnel;
6. May be victims of elder or dependent adult abuse.

Any information which the provider is required to release to law enforcement officers pursuant to such mandatory disclosure provisions may be disclosed to law enforcement officers upon their request.

B. Permissive Disclosures

1. Disclosures to Correctional Institutions

PHI may be disclosed to a correctional institution or law enforcement official having lawful custody of the inmate if the correctional institution/law enforcement official represents that the PHI is necessary for the provision of health care to such individuals; or the health and safety of such individuals, other inmates, or others at the correctional institution (e.g. officers, employees, persons responsible for transporting or transferring inmates) are in jeopardy.

2. Disclosures About Patients Who Present A Serious Threat of Physical Violence

UCR Health may disclose a patient's PHI to law enforcement if the health care provider reasonably believes that the patient poses a serious threat of physical violence against a reasonably identifiable victim, or if there is a good faith belief that the patient committed a crime on UCR Health premises. UCR Health may only disclose the following information:

- Name and Address

- Date and place of birth
- Social Security Number
- ABO blood type and Rh factor
- Type of injury
- Date and time of treatment
- Date and time of death (if applicable)
- A description of distinguishing physical characteristics including, but not limited to height, weight, gender, race, hair and eye color, presence or absence of facial hair (beard or moustache), scars and tattoos

Additional guidance for reporting and disclosing PHI to law enforcement may be sought from the Chief Compliance and Privacy Officer or Campus Legal Counsel.

IV. Responsibilities: Not Applicable

V. Procedures:

1. Verify the purpose of the disclosure and determine whether the disclosure can be made and how much information can be disclosed.
2. Verify and document the identity of the law enforcement officer to whom the information was provided (for example name, agency, and badge number).
3. If the disclosure requires that a form be completed, make a copy of the form for the patient's record.
4. If the disclosure is made pursuant to the patient's written authorization, place a copy of the authorization in the medical record and document what information was provided.
5. Document on the *Report of Mandatory Disclosures of PHI* (Attachment A) that the disclosure was made, if the disclosure was made verbally, or if information was printed from the patient's medical record. A copy of this report will be scanned into the patient's medical record and forwarded to the Compliance and Privacy Department.

VI. Form/Instructions:

Attachment A - Report of Mandatory Disclosures of PHI

VII. Related Information:

A. References

Regulatory and Standards Analysis
HIPAA Privacy Rule provides regulations for disclosures of patient information to law enforcement, and California state law provides further restrictions and limitations on disclosure of patient information to law enforcement.

B. Literature

Privacy Rule 45 CFR Section 160-164
California Medical Information Act Civil Code Section 56

Welfare and Institutions code 5328(t)

VIII. Revision History: 03/2016
01/2020

Approvals:



PAUL HACKMAN, J.D., L.L.M.
CHIEF COMPLIANCE AND PRIVACY OFFICER,
SCHOOL OF MEDICINE

2-10-2020

DATE



DEBORAH DEAS, M.D., M.P.H.
VICE CHANCELLOR, HEALTH SCIENCES
DEAN, SCHOOL OF MEDICINE

2-10-2020

DATE

Attachment A

UCR Health

Report of Mandatory Disclosures of PHI

Patient Name: _____
Medical Record Number: _____ DOB: _____

Disclosing Department/Practice: _____

Name of Staff Making Disclosure: _____

Date Released: _____

Purpose of Release

- Public Health/Infectious Disease Reporting
- Disclosures about Victim of Abuse/Neglect or Domestic Violence
- Use and Disclosure to Avert Serious Threat to Health or Safety
- Other: _____

Disclosed to: _____

Name of Organization: _____

Name of Individual: _____

Address: _____

Phone Number: _____ Fax. No.: _____

Copy of Report (PHI) Attached OR:

Description of PHI Disclosed	Date: From	Date: To	Notes

Forward to the University of California Riverside School of Medicine, Compliance and Privacy Office, 900 University Avenue, Riverside, California 92521.