

Bethany Life Communities	Date Written: 2-24-2003	Date Revised: 5-1-2009
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***Policy Statement***

In the absence of a consent or authorization from a resident to disclose protected health information, Bethany Life Communities will verify the identity and authority of such person(s) seeking the disclosure of protected information prior to the release of such data.

***Policy Interpretation and Implementation***

1. When a request for the disclosure of information is presented to Bethany Life Communities without a resident's consent or authorization, the HIPAA Compliance Officer will:
  - a. Verify the identity and authority of the person seeking the disclosure of protected health information; and
  - b. Obtain documentation, statements or representation from the person requesting the disclosure.
2. When government officials request the disclosure of protected information, the HIPAA Compliance Officer may rely on the following documentations, statements or representations to verify the identity of government officials:
  - a. If the request is made in person, the official must present an agency identification badge, credentials, or other proof of government status;
  - b. If the request is in writing, such request must be presented on appropriate government letterhead, dated, and signed by appropriate personnel to include the job title or position of the person requesting such data; and/or
  - c. If the disclosure is to a person acting on behalf of a government official, a written statement on appropriate government letterhead, stating that the person is acting upon his/her behalf. Such statement must be dated and signed by the official to include his/her job title or position.
3. When investigative agencies or law enforcement officials request the disclosure of protected health information, the HIPAA Compliance Officer may rely on the following documentation, statements or representations to verify the authority of such officials:
  - a. A written, dated, and signed statement of the legal authority under which the information is requested;
  - b. If a written statement is impracticable, an oral statement of such legal authority; and/or
  - c. A warrant, subpoena, court order, or other legal process issued by the court.
4. When researchers request the disclosure of protected information for research purposes, the HIPAA Compliance Officer may rely on the following documentation, statements or representations to verify the authority of such researcher(s):
  - a. That the use or disclosure is sought solely to review protected health information (PHI) as necessary to prepare a research protocol or for similar purposes necessary for the research;

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- b. That no protected health information (PHI) will be removed from Bethany Life Communities during the course of the review; and
  - c. That the disclosure of such information is necessary to complete the research project.
- 5. All research documentation, statements or representations must identify the Institutional Review Board (IRB) or privacy board that approved the waiver of authorization, the date of approval, and the signature of the chairperson or other authorized representative of the IRB or privacy board.
- 6. A copy of all identity and authority documents must be filed in the resident's medical record.
- 7. In all other instances where there are no specific requirements for verifying the identity and authority of persons seeking disclosure of protected information, the HIPAA Compliance Officer shall use professional judgment and follow Bethany Life Communities' established policies in verifying the identity and authority of person(s) prior to the disclosure of requested information.
- 8. Where there is doubt concerning the validity of documents, statements, or representations, the HIPAA Compliance Officer shall obtain guidance from Bethany Life Communities' legal counsel prior to releasing requested data.