

	Ethics & Compliance Department	
	Policy No.: 14	Created: 01/2018
		Reviewed: 09/2024
	Revised:	

HIPAA: DISCLOSING PROTECTED HEALTH INFORMATION FOR MINORS TO PARENT OR LEGAL GUARDIAN

SCOPE:

All Envision Healthcare teammates. For purposes of this policy, all references to “teammate” or “teammate” include temporary, part-time and full-time employees, independent contractors, clinicians, officers and directors.

PURPOSE:

Envision Healthcare Operating, Inc. and its subsidiaries and affiliates (“Envision” or “the Company”) has adopted this Disclosing Protected Health Information for Minors to Parent or Legal Guardian policy to provide guidance to teammates regarding the appropriate circumstances and procedures for the disclosure of a minor’s protected health information (“PHI”) to their parent(s) or legal guardian.

POLICY:

The PHI of minor patients (under age 18) may be used or disclosed to the minor patient’s parent(s) or legal guardian only in accordance with this policy.

Parental Involvement

In most cases, the minor patient’s custodial parent(s) or guardian(s) are involved in obtaining treatment for the minor and will have consented to treatment and assumed responsibility for payment. In that case, the parent(s) or guardian(s) has the right to exercise the minor patient’s privacy rights, including the right to review the minor’s PHI.

Rights of Non-Custodial Parent

State law may allow non-custodial parents to review the medical records of their child, but they generally do not have the right to exercise the minor patient’s other privacy rights (such as requesting amendments, accountings, or restrictions on disclosure). Unless prohibited by state law or by a court order, a non-custodial parent may be provided with a copy of the child’s medical records upon written request and payment of copying fees. If the non-custodial parent is responsible for paying for the child’s treatment, the non-custodial parent may also have access to the child’s payment records. If the non-custodial parent is not known to the Company, obtain and document verification of his or her identity and relationship to the child. Contact the Privacy Official if there are doubts about the non-custodial parent’s right to see the child’s records.

	Ethics & Compliance Department	
	Policy No.: 14	Created: 01/2018
		Reviewed: 09/2024
	Revised:	

Rights of Stepparent

A stepparent generally does not have the right to have access to the child’s PHI unless given such rights by a court. However, if the stepparent is known to be actively involved in a minor patient’s health care treatment, the stepparent may be given access to those parts of the record that are directly relevant to the care being provided by the stepparent (*See* Policy 15 – Disclosing Protected Health Information to Family/Friends/Caregivers).

Verification of Identity and Relationship

If the person is not known to the Company, obtain and document verification of the person’s identity and relationship to the child. If there is any doubt about the person’s identity and relationship to the child, contact the Privacy Official.

Treatment Obtained by Minor without Parental Involvement

If the minor patient obtained the treatment independently, without the involvement of a parent or guardian, and is either “emancipated” or otherwise entitled under state law to consent to such treatment, disclosures to the minor’s parents shall be made only under the following circumstances:

- A) State law does not prohibit disclosure of the information to the minor’s parents, and the treating practitioner determines that it is appropriate to release the information to the parents; or
- B) The minor patient has been advised, and does not object, that his or her parents may be billed for the services unless other satisfactory payment arrangements are made. (This allows the minor to elect not to receive the treatment if he or she cannot make payment arrangements and does not want a bill sent to the parents.) The minor’s agreement should be documented in the record.

Logging of Disclosure

If the parent is acting as the minor patient’s personal representative, there is no need to log the disclosure. If the parent does not have such authority but is being given the records because the treating practitioner determines that the release is appropriate, the disclosure must be logged in accordance with the separate policy regarding accounting of disclosures (*See* Policy 33 – Accounting of Disclosures).

POLICY REVIEW

The Ethics & Compliance Department will review and update this Policy, when necessary, in the normal course of its review of the Company’s Ethics & Compliance Program.