

	Ethics & Compliance Department	
	Policy No.: 6	Created: 01/2018
		Reviewed: 09/2024
	Revised:	

HIPAA: DISCLOSING PROTECTED HEALTH INFORMATION FOR TREATMENT, PAYMENT, OR HEALTHCARE OPERATIONS

SCOPE:

All Envision Healthcare teammates. For purposes of this policy, all references to “teammate” or “teammates” 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 Treatment, Payment, or Healthcare Operations policy to inform teammates of the authority provided to them under HIPAA regarding the use and/or disclosure of protected health information (“PHI”) for treatment, payment, or health care operations.

POLICY:

Use for Treatment, Payment, or Healthcare Operations

PHI may be used or disclosed for the purposes of treatment, payment, or health care operations of the Company without the patient’s authorization in accordance with this policy.

Treatment means the provision, coordination, or management of health care and related services by one or more health care providers. Treatment includes not only the direct provision of medical treatment, services, or products, but also consultations between providers, the referral of a patient for health care from one health care provider to another, and the coordination or management of the patient’s health care by a health care provider and a third party.

Payment means activities related to obtaining payment or reimbursement for the provision of health care services, including, but not limited to, billing and collection activities, plan eligibility or coverage determinations, adjudicating claims, risk adjustments, and similar activities.

Health care operations means activities related to carrying out and monitoring the internal functions of the Company, including, but not limited to, quality assessment, review of care, records management, training and education, resolution of internal grievances, certification and licensing activities, business management, general administrative functions, planning and development, auditing of Company activities, conducting or arranging for legal services, patient satisfaction surveys, and similar activities.

	Ethics & Compliance Department	
	Policy No.: 6	Created: 01/2018
		Reviewed: 09/2024
	Revised:	

Optional Consent to Use Health Information for Treatment, Payment, or Healthcare Operations

Except as required by state law, it is not mandatory to obtain written consent/authorization to use or disclose the patient’s PHI for treatment, payment, or health care operations purposes. (However, an “informed consent for treatment,” disclosing the risks and benefits of a proposed procedure, is still required.)

Minimum Necessary Access

PHI that is used and shared for treatment, payment, or health care operations purposes is subject to minimum necessary disclosure rules. Only those workforce members who have been granted appropriate authority are allowed to use or review PHI and may access only the information needed to carry out their duties.

Use of Business Associates for Healthcare Operations Purposes

Outside parties such as auditors, management companies, attorneys, accountants, and others may assist in carrying out the Company’s treatment, payment, or health care operations. If these parties use or disclose patient PHI when assisting the Company with treatment, payment, or health care operations, they must have a business associate contract in accordance with the Company’s separate policy on business associates.

Disclosures to Other Providers and Health Plans for Their Healthcare Operations Purposes

PHI may be disclosed for the health care operations purposes of other providers and health plans, provided that the following are met:

- A) The other provider or health plan is covered by the HIPAA privacy regulations; and
- B) The other provider or health plan has a current or prior relationship with the patient, and
- C) The information is being sought for purposes related to quality assessment or evaluation of care and competence or is being sought for the purpose of health care fraud and abuse detection or compliance.

Internal Access by Company Professionals

The Company’s clinicians may request and be given access to the complete health records of any Company patients they are treating or have previously treated. Support staff who are assisting in such treatment may also have access to the patient’s health records in order to assist in the patient’s treatment.

	Ethics & Compliance Department	
	Policy No.: 6	Created: 01/2018
		Reviewed: 09/2024
	Revised:	

Contact the Privacy Officer if a Company physician or other professional seeks access to the record of a patient with whom he or she does not have a treatment relationship.

Disclosures to Outside Treatment Providers

Outside physicians and other health care providers involved in treating the patient, including hospitals, labs, pharmacies, nursing homes, and similar providers, may be given access to all PHI about the patient, including the complete record if requested. If the record is extensive, you may contact the treatment provider to see if he or she would prefer to receive only selected portions of the record. If the patient has requested and been granted a restriction on disclosures to a particular provider, do not release the information to that provider except in an emergency. (For further information regarding requests for restrictions on disclosures, *see* Policy 25 – Restriction of Use of Disclosure)

Purposes Related to Treatment

Patient information may be shared with treatment providers in accordance with this policy as necessary to arrange for appointments, referrals, diagnostic tests, consultations, management and coordination of care, determinations of suitability for services, and similar services directly related to treatment.

Verification of Treatment Relationship

If the health care provider requesting the PHI is not known to the Company, the provider’s identity must be verified and documented. This may be accomplished by calling the person back at an official phone number or asking the person to fax the request on official letterhead of the provider they are representing. If necessary, contact the patient directly to confirm that the requesting provider is involved in the patient’s treatment. If doubts still exist, contact the Privacy Official for a determination of further actions needed.

No Log of Disclosure Required

Disclosures for treatment, payment, or health care operations do not need to be recorded in the patient’s Protected Health Information Disclosure Log. For future reference, however, any treatment disclosures made to persons outside the Company should be noted in the patient’s record and should indicate what information was disclosed, by whom, to what person, how that person is involved in the patient’s treatment, and the date of disclosure.

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.