



Patient Access

Patient Request to Restrict Disclosure of Private Health Information (PHI) to Health Insurance Plan

To ensure compliance with the Privacy Rule, when a patient requests a restriction on the disclosure of protected health information to their health insurance plan for specifically designated item(s) and/or service(s).

Scope: This procedure applies to all staff registering or pre-registering patients for services at Medina Surgery Center

Definitions: NA

Policy : Patients have a right to request a restriction on the disclosure of protected health information to their health insurance plan and pay out of pocket for the service. When a request is made, the provider must restrict the disclosure of protected health information for those item(s)/service(s) designated by the patient.

Procedure: When a patient requests a restriction on the disclosure of protected health information to their health insurance plan it is the responsibility of the employee registering or checking the patient in at the point of service area to:

- Have the patient complete the “Request to Restrict Disclosure of Information to Insurance Health Plan for Items or Services Paid in Full” form.
- Ensure the form is signed and dated by the patient and or Medina Surgery Center representative.
- The employee checking in or registering the patient at the point of service will be responsible for signing and dating the form.
- Scan the “Request to Restrict Disclosure of Information to Insurance Health Plan for items or Services Paid in Full” form into the G: drive.
 - Rename document to “Self pay-Pt name-DOS”.
 - Go into “View Patient Notes” of patient account and enter document name with note stating procedure is self-pay only-do not submit to insurance.
 - Provide patient with a copy of the form if requested.

Responsibilities and Authorities:

Office Manager

Records

N/A

References:

N/A