



**Office of Regulatory Compliance**

**HIPAA Policy 6.1**

<b>Title:</b>	<b>Right to Request Restrictions</b>
<b>Source:</b>	<b>Office of Regulatory Compliance</b>
<b>Prepared by:</b>	<b>Assistant Vice Chancellor for Regulatory Affairs</b>
<b>Approved by:</b>	<b>Vice Chancellor for Research</b>
<b>Effective Date:</b>	<b>July 1, 2013</b>
<b>Replaces:</b>	<b>04/13/03</b>
<b>Applies:</b>	<b>All UCD campuses</b>

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## **Introduction**

### ***Purpose***

The purpose of this policy is to: Identify the rights of all individuals receiving medical care or testing, or participating in research, to request restrictions on the uses and disclosures of their protected health information (“PHI”); Identify the process for terminating a restriction, agreed to by the UCD on the uses and disclosures of PHI; and, Identify the policies and procedures for documenting all agreed-upon restrictions.

### ***Reference***

45 C.F.R. §164.522(a)

### ***Applicability***

This policy applies to all requests for restriction made to the UCD on the uses and disclosures of PHI.

## **Policy**

UCD must allow individuals an opportunity to request a restriction of the uses or disclosures of PHI about the individual to carry out treatment, payment, or

health care operations; and disclosures permitted under UCD HIPAA policy 4.3 regarding involvement in the individual's care and notification purposes.

## **Procedures**

1. All requests for restriction must be made in writing.
2. The UCD is not required to agree to a restriction unless:
  - a. The disclosure is for the purpose of carrying out payment or health care operations and is not otherwise required by law; AND
  - b. The PHI pertains solely to a health care item or service for which the individual, or person other than the health plan on behalf of the individual, has paid the covered entity in full.
3. If the UCD does agree to a restriction, the UCD must not use or disclose PHI in violation of the restriction, except if the individual who requested the restriction is in need of emergency treatment and the restricted PHI is needed to provide the emergency treatment. In these cases the UCD may use the restricted PHI, or may disclose the PHI to a health care provider, to provide emergency treatment to the individual. If the restricted PHI is disclosed to a health care provider for emergency treatment, the UCD must request that the health care provider who reviews the restricted PHI not further use or disclose the information.
4. A restriction agreed to by UCD in this policy, is not effective to prevent uses or disclosures of PHI required by the Secretary of HHS or as required or permitted by state or federal law.
5. The UCD may terminate its agreement to a restriction if:
  - a. The individual agrees to or requests the termination in writing;
  - b. The individual orally agrees to the termination and the oral agreement is documented; or
  - c. The UCD informs the individual that it is terminating its prior agreement to a restriction. (Note: such termination is only effective with respect to PHI created or received after the UCD has informed the individual.)
6. The UCD may not terminate a restriction implemented under section 2 above.
7. All documentation of restrictions must be kept for six (6) years from the date they were made or were last in effect, whichever is later.