

**POLICY TITLE:** Enhanced Privacy Requests – Facility Directories

**Responsible Department:** Corporate Privacy Office

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#### **SUMMARY & PURPOSE:**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule provides Federal privacy protections for individually identifiable health information, called protected health information or PHI, held by most health care providers and health plans and their business associates. The HIPAA Privacy Rule protects all "*individually identifiable health information*" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule sets out how and with whom PHI may be shared.

The HIPAA Privacy Rule grants patients important rights with respect to health information obtained and maintained by Baptist Health. The Baptist Health Privacy Office is responsible for ensuring the confidentiality of Baptist Health patient medical information and responding to such requests. BHSF patients have the right to opt out of the facility telephone switchboard directory.

#### **POLICY:**

It is the policy of Baptist Health South Florida, Inc. ("BHSF" or "Baptist Health") to comply with applicable state and federal laws, including those protecting the confidentiality of patient health information and establishing certain individual privacy rights. This policy governs receiving and responding to requests to opt out of the facility directory.

#### **SCOPE/APPLICABILITY:**

This policy applies to the Patient Access department of each BHSF facility that admits or registers patients and the Patient Experience, Pastoral Care, Consumer Access and Emergency departments of each BHSF facility and to every Baptist Health employee who is authorized to disclose directory information regarding a BHSF facility patient.<sup>1</sup>

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<sup>1</sup> This policy does not apply to patients who are prisoners or in custody of law enforcement officials or patients who are being admitted for services to the South Miami Hospital Addiction Treatment & Recovery Center.

All references to Policies must go to the BHSF Master Copy on the BHSF Intranet; do not rely on other versions / copies of the Policy.

**PROCEDURES TO ENSURE COMPLIANCE:**

All requests to opt out of the facility directory from a patient/family member should be directed to the Patient Access department of a BHSF facility or the Privacy Office. All BHSF employees are expected to validate the patient's wishes with regard to disclosing their presence to the general public prior to acknowledging the patient's presence in a BHSF facility.

1. General Rule: Request for privacy regarding their presence in our facility
  - a. BHSF may list patients' name, general condition (e.g., fair, critical) and location in our directory, unless they ask us not to. BHSF may disclose this information to anyone who asks for a patient by name.
2. Creation and Use of Facility Directories
  - a. Upon admission or registration, all patients shall be asked if they wish to opt-out of the facility directory.
  - b. The facility directory may include the patient's name, location in the BHSF facility, and religious affiliation (NOT place of worship such as Bet Shira Congregation, Trinity Cathedral).
  - c. Directory information (except religious affiliation) may only be disclosed to persons who ask for the patient by name. Directory information, including religious affiliation, may be disclosed to members of the clergy.
  - d. The patient will be included in the facility directory unless the patient specifically requests otherwise.
  - e. If the patient opts-out of the directory, they shall fill out a facility directory opt-out form (Form 6022 – Facility Directory) which will be included in the patient's medical record.
3. Emergency Situations
  - a. If the form cannot practicably be completed due to the patient's incapacity or an emergency treatment situation, the Patient Access department shall consult with the patient's attending physician to determine if inclusion in the facility directory and subsequent use or disclosure of this information is:
    - i. Consistent with a prior expressed preference of the patient, if any; and
    - ii. In the patient's best interest in the exercise of professional judgment.
4. Creating the Directory
  - a. The Patient Access department must enter only the agreed information from the directory form into the computer to create the facility directory. If religious affiliation is to be excluded, enter "declined to specify".
  - b. If a patient name or patient location is not to be included in the facility directory, the Patient Access department must complete the appropriate fields in the registration computer system and have the patient complete the facility directory opt-out form (Form 6022 – Facility Directory).
  - c. Before any information regarding the patient's name, location, religious affiliation (directory information) may be disclosed, this information must be provided from the patient verification screen that may be accessed through a name and/or numeric inquiry in Net Access. Not all name inquiry options provide access to patient verification screens.
    - i. This process is designed to capture the most updated patient request with respect to inclusion or exclusion from the facility directory.
    - ii. The patient verification screen displays restriction indicators (Name, Location, and Religious Affiliation).
5. Documentation
  - a. The Patient Access department must include the facility directory opt-out form (Form 6022 – Facility Directory) in the medical record.
6. Disclosure of presence in a BHSF facility to those requesting information
  - a. Anyone covered by this policy who receives a request from any individual about whether a patient is admitted to or receiving services at a BHSF facility shall direct the individual to the Patient Experience representative, the operator or the information desk of the affected BHSF facility.
  - b. The Patient Experience representative, the operator or the information desk of the affected BHSF facility shall ask the individual for the patient's name and provide directory information as follows:
    - i. If the individual does not know the patient's name, the Patient Experience representative, the operator or the information desk of the affected BHSF facility must state that the department cannot provide assistance without the patient's name.

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- ii. If the individual knows the patient's name, the Patient Experience representative, the operator or the information desk may look at the facility directory and respond as follows:
  - 1) If a patient is **NOT** designated by the Privacy Flag in the facility directory, the Patient Experience representative, the operator or the information desk may provide all of the information listed in the directory EXCEPT religious affiliation to the requesting individual. Either department may use additional information, such as date of birth or address, to distinguish between patients with the same name.
  - 2) If the patient has the Privacy Flag designation in the directory, the Patient Experience representative, the operator or the information desk must respond by stating "I have no information about this person." The Patient Experience or Consumer Access departments may NOT provide any other response.

**SUPPORTING/REFERENCE DOCUMENTATION:**

- Health Insurance Portability and Accountability Act of 1996 as amended from time to time and including any regulations promulgated thereunder (collectively, "HIPAA")
- Applicable Florida State Laws

**RELATED POLICIES, PROCEDURES, AND ASSOCIATED FORMS:**

Corporate HIPAA Privacy Policies

Form 6720 – Notice of Privacy Practices Brochure

Form 6022 – Facility Directory Opt Out Form

BHSF Administrative Policies - Patient Access:

- 352.01 HIPAA Privacy Procedures – Exclusions from the Facility Directory (No Information Patients)

**ENFORCEMENT & SANCTIONS:**

1. Reference: Corporate HIPAA Privacy Policy 10000-74220-605.20- Sanctions for Privacy Violations
2. Violations of this policy will be determined by the Chief Privacy Officer in consultation with the appropriate levels of department leadership and appropriate Human Resources management level. Reference: HR policies 5250- Employee Conduct and 5300- Corrective Action.
3. Violations of this policy may lead to disciplinary action up to and including termination.
4. Enforcement of this policy will be performed by Baptist Health South Florida's Privacy Office in conjunction with Human Resources, as circumstances may dictate.