DEPARTMENT: Information Protection & Security	**POLICY DESCRIPTION:** Information Blocking Rule Compliance
PAGE: 1 of 5	**REPLACES POLICY DATED:** 4/1/21
EFFECTIVE DATE: February 1, 2024	**REFERENCE NUMBER:** IP.GEN.006
APPROVED BY: Ethics and Compliance Policy Committee	

SCOPE: This Policy applies to HCA Holdings, Inc. (the "**Company**") and all of its Affiliates operating in the United States ("**HCA Affiliates**"), including Affiliates that constitute Actors for purposes of the Information Blocking Rules (45 CFR Part 171).

Other capitalized terms used in this policy and not otherwise defined have the meaning given to them in the Definitions section of the policy.

PURPOSE: To provide direction for compliance with the Information Blocking Rules, 45 CFR Part 171, promulgated by the Office of the National Coordinator for Health Information Technology (**"ONC"**) in order to implement Section 4004 of the 21st Century Cures Act of 2016.

POLICY:

The Information Blocking Rules are intended to promote the sharing of Electronic Health information (EHI) by requiring Actors to refrain from Practices that are likely to Interfere with the Access, Exchange or Use of EHI, except when the Practices are required by law (including HIPAA and state privacy requirements) or meet an Information Blocking Exception. In other words, when a disclosure of EHI is permitted by applicable law, including HIPAA and state privacy requirements, the Information Blocking Rules require the disclosure unless an Information Blocking Exception applies or the Actor can otherwise demonstrate that the Practice complies with the Information Blocking Rules (such as a Practice by a Health Care Provider that is reasonable or a Practice that the Health Care Provider did not know would Interfere with the Access, Exchange or Use of EHI).

A Practice that does not meet all of the requirements of an Information Blocking Exception does not automatically constitute Information Blocking. Rather, such Practices are subject to evaluation by the ONC on a case-by-case basis to determine whether Information Blocking has occurred.

The Information Blocking Rules apply not only to how Actors respond to requests from third parties for EHI, but also to other acts and omissions that Interfere with the Access, Exchange or Use of EHI. Examples of Practices that must be structured to comply with the rules include charging fees in connection with the Exchange of EHI, negotiating contract and license terms in order to Exchange EHI, and responding to researcher or other third party requests to receive EHI.

"Information Blocking" means a Practice that

1. Except as required by law or covered by an Information Blocking Exception, is likely to interfere with Access, Exchange or Use of EHI; and
2. If conducted by
   A. A *Health Care Provider*, such provider knows that such Practice is unreasonable and is likely to interfere with Access, Exchange or Use of EHI; or
   B. A *Health IT Developer of Certified Health IT or a Health Information Exchange (HIE)/Health Information Network (HIN)*, such developer or HIE/HIN knows, or should know, that such Practice is likely to Interfere with Access, Exchange or Use of EHI.

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The term "**Information Blocking Exception"** refers to each of the following exceptions:

1. Preventing Harm Exception (for Practices that substantially reduce a risk of harm to a patient or another natural person);
2. Privacy Exception (for Practices intended to protect an individual's privacy, such as obtaining an authorization that complies with HIPAA or applicable state law or honoring a patient's wishes not to share Protected Health Information);
3. Security Exception (for Practices to protect the security of EHI);
4. Infeasibility Exception (for Practices that are due to a request for EHI being infeasible, such as due to a disaster, an inability to segment data or factors such as cost);
5. Health IT Performance Exception (for Practices implemented to perform maintenance or improvements to health IT or to address a third-party application that is negatively impacting the health IT's performance);
6. Content and Manner Exception (for Practices tied to providing EHI in the manner requested or through an alternative);
7. Fees Exception (for Practices involving charging fees in connection with exchanging EHI); and
8. Licensing Exception (for Practices involving licensing interoperability elements needed to exchange EHI).

The Company and HCA Affiliates are committed to exchanging and making EHI available and usable for authorized and permitted purposes in accordance with applicable law. Accordingly, the Company and HCA Affiliates shall seek to not engage in Practices that are likely to Interfere with the Access, Exchange or Use of EHI except as required by law, permitted by an Information Blocking Exception, or otherwise permitted by the Information Blocking Rules (such as Practices by Health Care Providers operated by HCA Affiliates that are reasonable).

When a request for EHI is not being fully met or HCA Affiliates are otherwise engaging in Practices that may be viewed as Interfering with the Access, Exchange or Use of EHI, HCA Affiliates will strive to meet an Information Blocking Exception. Depending on the facts, meeting an Information Blocking Exception may require HCA Affiliates to document the reasons for the Practice, provide additional information or forms to the affected third party or otherwise take steps beyond simply declining to Exchange EHI. These steps are outlined in guidance available from the Company. HCA Affiliates will consult such Company guidance when considering or implementing a Practice that may Interfere with the Access, Exchange or Use of EHI. For example, Practices that may impact the sharing of EHI are permitted if they are necessary to comply with other Company compliance policies, such as the Company Information Protection and Security Policies, but Company guidance should be consulted to confirm the request is responded to in manner that demonstrates compliance with an Information Blocking Exception or otherwise complies with the rules.

Where documentation is required or is otherwise created to demonstrate compliance with an Information Blocking Exception, such documentation will be retained for a minimum of six years in

accordance with the retention schedule established for similar records series included within the scope of the Records Management Policy, EC.014.

PROCEDURE:

1. When considering requests for EHI or other Practices impacting the Access, Use or Exchange of EHI, the Company, through its Health Information Management ("**HIM**") personnel or other authorized individuals, shall confirm that the Practice complies with applicable law and applicable Company privacy and security policies.
   a. For example, requests for EHI must comply with HIPAA, including the minimum necessary standard, where applicable.
   b. Most single-patient and multi-patient EHI requests will follow Company HIPAA procedures for receipt and processing of third-party requests for Protected Health Information. For example, patients and patients' Personal Representatives can access much of their EHI (including USCDI Data Elements) in electronic format using patient portals made available by the Company or they may submit HIPAA access requests through other methods supported by the Company.
   c. Requests for EHI must be handled by persons whose assigned job responsibilities include the disclosure, Access or Transmittal of the Protected Health Information at issue (e.g., HIM, Release of Information personnel).

2. Requests to Access, Use or Exchange EHI must be evaluated promptly. For example, if responding to a request is infeasible, to meet the Infeasibility Exception, a written explanation of the reason(s) why the request is infeasible must be provided to the requestor within ten business days of receipt of the request.

3. Third parties requesting to Access, Use or Exchange EHI may be asked to clarify the content, manner, and/or purpose of the request to assist HCA Affiliates with confirming:
   a. That the potential Access, Use or Exchange is permitted by law;
   b. Whether HCA Affiliates can furnish the requested EHI content; and
   c. Whether HCA Affiliates can provide the EHI in the manner requested. Alternatives to the content and/or manner requested will be identified and offered when necessary in accordance with Company guidance.

   Note: Item 3 does not apply to patient access requests under HIPAA to the extent such requests for clarification would be inconsistent with Policy IP.PRI.004 (Patients' Right to Access) or applicable law governing the right of individuals to access their medical information.

4. Any Practice that may Interfere with the Access, Use or Exchange of EHI should be structured, when feasible, to meet an Information Blocking Exception. If an Information Blocking Exception does not apply or cannot fully be met, the Practice should be referred to the operational owners of the applicable business unit, in consultation with legal counsel, to confirm the Practice is consistent with the Information Blocking Rules and consistent with Company guidance. The

operational owner may convene a subset of executive sponsors and subject matter experts to review the scenario and provide more specific guidance for satisfying the request, meeting an Information Blocking Exception or otherwise complying with the Information Blocking Rules.

5. Investigations from the Office of Inspector General (OIG) involving alleged violations of Information Blocking must be reported to CORP.CIREGS mailbox within three (3) business days in accordance with EC.025.

DEFINITIONS:

Certain defined terms used in this Policy are as follows:

Access means the ability or means necessary to make EHI available for Exchange or Use.

Actor means a Health Care Provider, HIE/HIN or Health IT Developer of Certified Health IT.

Affiliate means any person or entity Controlling, Controlled by or under common Control with another person or entity.

Control means the direct or indirect power to govern the management and policies of an entity; or the power or authority through a management agreement or otherwise to approve an entity's transactions (includes **Controlled, Controlling**).

Electronic Health Information (EHI) means electronic Protected Health Information to the extent that it would be included in a Designated Record Set, regardless of whether the group of records are used or maintained by or for a Covered Entity, but EHI does not include: (1) Psychotherapy Notes; or (2) information compiled in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding. EHI excludes de-identified information (as defined in the model policy attached to the Patient Privacy Program Requirements Policy, IP.PRI.001). Examples of EHI include electronic Protected Health Information found in medical records, billing records and other information used to make decisions about patients.

As used herein, the following terms have the meanings specified in Patient Privacy Program Requirements Policy, IP.PRI.001: **Covered Entity**, **Designated Record Set**, **Protected Health Information**, and **Psychotherapy Notes**.

Exchange means the ability for EHI to be transmitted between and among different technologies, systems, platforms or networks.

Health Care Provider means any hospital, health care clinic, physician, practitioner, home health agency or other long term care facility, ambulatory surgery center, imaging and oncology center, blood center, emergency medical services provider, group practice, skilled nursing facility, nursing facility, home renal dialysis center, community mental health center, federally qualified health center, pharmacist, pharmacy, laboratory, rural health clinic, therapist or Indian Health Service or tribe provider.

Health IT Developer of Certified Health IT means any Company business unit that develops or offers health information technology (**"IT"**) that has one or more modules certified under a voluntary

certification program recognized under the ONC Health IT Certification Program. This defined term does NOT include any health IT self-developed by Company Health Care Providers for their own use.

Health Information Exchange (HIE)/Health Information Network (HIN) means any Company business unit that determines, or has the discretion to administer any requirement, policy, or agreement that permits, enables, or requires the use of any technology or services for Access, Exchange or Use of EHI (1) among more than two unaffiliated individuals or entities (other than the individual or entity to which this definition might apply) that are enabled to exchange with each other; and (2) that is for a Treatment, Payment, or Health Care Operations purpose, as such terms are defined in the Patient Privacy Program Requirements Policy, IP.PRI.001.

HIPAA means the Health Insurance Portability and Accountability Act of 1996 and implementing regulations (45 CFR Parts 160—164).

Interfere with or **Interference** means to prevent, materially discourage or otherwise inhibit.

Personal Representatives has the meaning specified in the Patient Privacy Program Requirements Policy, IP.PRI.001.

Practice means an act or omission by an Actor.

United States Core Data for Interoperability (USCDI) means the standardized set of health data classes and constituent data elements set forth at www.healthit.gov/USCDI.

USCDI Data Elements means the data elements represented in the USCDI standard and set forth on **Exhibit A**.

Use means the ability for EHI, once Accessed or Exchanged, to be understood and acted upon.

REFERENCES:

1. 21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program, 45 CFR Parts 170 and 171
2. Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information, 45 CFR Parts 160 and 164
3. Records Management Policy, EC.014
4. Patient Privacy Program Requirements Policy, IP.PRI.001
5. Designated Record Set, IP.PRI.001 (Model Policy)
6. Verification of External Requestors, IP.PRI.001 (Model Policy)
7. Minimum Necessary, IP.PRI.003
8. Patients' Right to Access, IP.PRI.004
9. Authorization for Uses and Disclosures of Protected Health Information, IP.PRI.010
10. Reporting Compliance Issues and Occurrences to the Corporate Office, EC.025

Exhibit A

USCDI v4 Data Elements (organized by data class)

As of October 6, 2022, EHI will now include all information in the Designated Record Set, as defined under HIPAA and not just limited to the USCDI data elements and data classes set forth below.

Allergies and Intolerances
- Substance (Medication)
- Substance (Drug Class)
- Substance(Non-Medication)
- Reaction

Care Team Member(s)
- Care Team Member Name
- Care Team Member Identifier
- Care Team Member Role
- Care Team Member Location
- Care Team Member Telecom

Clinical Notes
- Consultation Note
- Discharge Summary Note
- History & Physical
- Procedure Note
- Progress Note

Clinical Tests
- Clinical Test
- Clinical Test Result/Report

Diagnostic Imaging
- Diagnostic Imaging Test
- Diagnostic Imaging Report

Encounter Information
- Encounter Type
- Encounter Identifier
- Encounter Diagnosis
- Encounter Time
- Encounter Location
- Encounter Disposition

Facility Information
- Facility Identifier
- Facility Type
- Facility Name

Goals and Preferences
- Patient Goals
- SDOH Goals
- Treatment Intervention Preference
- Care Experience Preference

Health Insurance Information
- Coverage Status
- Coverage Type
- Relationship to Subscriber
- Member Identifier
- Subscriber Identifier
- Group Identifier
- Payer Identifier

Health Status Assessment
- Health Concerns
- Functional Status
- Disability Status
- Mental/Cognitive Status
- Pregnancy Status
- Alcohol Use
- Substance Use
- Physical Activity
- SDOH Assessment
- Smoking Status

Immunizations
- Immunizations

Laboratory
- Tests
- Values/Results
- Specimen Type
- Result Status
- Result Unit of Measure
- Result Reference Range
- Result Interpretation
- Specimen Source Site
- Specimen Identifier
- Specimen Condition Acceptability

Medical Devices
- Unique Device Identifier – Implantable

Medications
- Medications
- Dose
- Dose Unit of Measure
- Indication
- Fill Status
- Medication Instructions
- Medication Adherence

Patient Demographics/Info
- First Name
- Last Name
- Middle Name (Including middle initial)
- Name Suffix

Exhibit A

USCDI v4 Data Elements (organized by data class)

Vital Signs
- Systolic Blood Pressure
- Diastolic Blood Pressure
- Average Blood Pressure
- Heart Rate
- Respiratory Rate
- Body Temperature
- Body Height
- Body Weight
- Pulse Oximetry
- Inhaled Oxygen Concentration
- BMI Percentile (2 – 20 years)
- Weight-for-length Percentile (Birth – 24 Months)
- Head Occipital-frontal Circumference Percentile (Birth – 36 Months)

- Previous Name