

Privacy - MODEL Facility Policy

POLICY NAME: Community Clergy Access to Patient Listings Under the HIPAA Privacy Standards

DATE: (facility to insert date here)

NUMBER: (facility to insert number here)

Purpose: To facilitate compliance with the Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information (Privacy Standards), 45 CFR Parts 160 and 164, and all Federal regulations and interpretive guidelines promulgated thereunder. To establish guidelines regarding community clergy access to facility directory information.

Policy: The following are requirements for releases of directory information and patient listings to community clergy under the HIPAA Privacy Standards (§164.510).

Health care providers are required to inform an individual of the protected health information (PHI) that it may include in their facility directory, those persons to whom it may disclose such information, and provide the individual with the opportunity to restrict or prohibit all of the uses or disclosures. This includes disclosures of directory information, including religious affiliation, to community clergy.

Providing directory information to community clergy is completely voluntary, and is a decision made by the facility. Facilities that choose to provide their facility directory information to members of the community clergy must implement a mechanism to verify, in good faith, the requestor is actually a member of the clergy.

State laws concerning clergy access to patient directory information should be followed if more stringent than HIPAA.

Community clergy and staff chaplains are not synonymous terms under HIPAA.

Refer to the HIPAA Privacy Standards, 45 CFR Parts 160.101 and 164.501, and HIM.PRI.001, the Patient Privacy Program Requirements Policy, for definitions.

Procedure:

1. Verification of Community Clergy Members

- a. A process must be put into place to verify that each community member of the clergy is indeed an actual member of the clergy.
- b. Community clergy should each be given a badge or other identification from the facility once the facility has verified his or her clergy membership.

- c. Each clergy member must be asked to show the facility ID badge or other identification before being given access to any patient lists.

2. Releases to Community Clergy Members

The HIPAA Privacy rule permits facilities to disclose the facility directory; including the individual's name, location (room number, bed number, department), condition in general terms and religious affiliation (if captured) to members of the clergy. Best practice is for the directory to be divided by religious affiliation and only the portion of the directory related to that community clergy's religious affiliation be given. The names of patients who have "opted out" of the facility directory must not be included in the listing given to the community clergy. Example: Only release facility directory information of Catholics to a Catholic priest. He would not receive facility directory information on patients with religious affiliations of Protestant, Judaism, etc. Community clergy do not need to ask for the patient by name to receive the directory information. Each patient must be notified of his or her right to opt out of being listed in the facility directory via the Notice of Privacy Practices. To invoke this right, the patient will need to request to opt out consistent with the facility's Directory Policy. When a patient opts out of the directory, he or she must be suppressed from any general clergy listings released.

4. If the patient, during the nursing assessment, asks for his or her clergy to be notified, the nursing staff should handle notification according to the facility's current process.

References:

Patient Privacy Program Requirements Policy, HIM.PRI.001

Patients' Right to Opt Out of Being Listed in Facility Directory Model Policy