

The University of Iowa  
HIPAA Privacy Rule  
Policies and Procedures

RESTRICTIONS ON USE AND DISCLOSURE OF PROTECTED  
HEALTH INFORMATION

Purpose: To define the process for responding to requests from patients or their legal representation to restrict uses and disclosures of their Protected Health Information (PHI); to provide direction to staff on how to respond to requests for restrictions on uses and disclosures of their PHI.

Policy: Patients and their legal representatives have the right to request restrictions on the uses and disclosures of PHI for: treatment, payment, health care operations, disclosures to a family member or other relative or close personal friend, or any other person identified by the patient.

Procedure: A patient or legal representative may request a restriction in writing on the attached form, directed to the Privacy Officer. A written response will be provided and all relevant documentation will be kept on file for 6 years.

Exceptions to restrictions include the following:

- The Office of DHHS,
- Where consent is not required for disclosure (required by law; public health; health oversight activities; abuse and neglect; law enforcement purposes; judicial and administrative proceedings; approved research; specialized government functions; organ donation; worker's compensation).
- To health care providers for emergency treatment.

Termination of restrictions: Restrictions will be terminated when the patient or legal representative asks that the restriction be ended. This request needs to be communicated to care providers and the HIPAA Privacy Officer.

Other restrictions: Patients may request restrictions on the disclosure of PHI to family members, friends or others. Care providers are to exercise professional judgment in each instance and advise the patient of their decision.

Reference: 45 CFR §164.522, §164.512