HIPAA AND LAW

ENFORCEMENT

GUIDELINES FOR RELEASE OF PROTECTED HEALTH INFORMATION (PHI)

* DRAFT –
* For Example Purposes Only-

HIPAA and Law Enforcement:

Guidelines for Release of Protected Health Information

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# HIPAA and Law Enforcement:

**Guidelines for Release of Protected Health Information**

# \_\_\_\_ Hospital

### INTRODUCTION

A hospital’s first obligation to all patients is caring for their medical needs. When a patient is also involved in a criminal investigation, either as a suspect, witness or victim, that obligation remains the priority. Law enforcement officials, however, also have an important job to do that often involves seeking access to patients, their medical information or other evidence held by the hospital. These guidelines are established to help hospitals (health care practitioners) and law enforcement officials understand the patient access and information a hospital may provide to law enforcement, and in what circumstances.

The HIPAA Privacy Regulations govern how hospitals use and disclose patient information. This guide acknowledges the shared responsibility among hospitals and law enforcement officials to protect the public and allow for the proper investigation of criminal conduct while disclosing patient information only in a manner that is consistent with state and federal law.

This document provides general guidance only and does not imply agreement on all points, does not create any legal obligations not otherwise existing at law, and is not legal advice. Hospitals may choose to implement different policies and procedures as necessary to meet their unique circumstances. Hospitals that do so should communicate these policies and procedures to their local law enforcement community. This document reflects state and federal laws existing as of January 2020, which may change from time to time.

### HIPAA Pathways: A Summary of Allowable Disclosures to Law Enforcement

Subject to requirements that are discussed in this document, the HIPAA Privacy Regulations permit disclosure of protected health information to law enforcement in the following circumstances:

1. **On the request of Law Enforcement**. You may disclose patient information to law enforcement on the request of law enforcement in the following situations:
	* Law enforcement asks about the patient by name: disclosure is limited directory information (minimal condition and location information) and allowed only if the patient has not opted out of such disclosures.
	* Law Enforcement presents a court order, grand-jury subpoena, HIPAA-compliant subpoena, search warrant, summons or other legal process.
	* Law enforcement seeks to identify or locate a suspect, fugitive, material witness or missing person (only limited information may be disclosed). (See FAQ 1 g)
	* Law enforcement seeks information about a patient who has been a victim of a crime. (See FAQ 1 h)
	* Law Enforcement presents a HIPAA-compliant authorization.
	* Law enforcement seeks information about a patient who is in law enforcement custody (patient under arrest or an inmate). (See FAQ 1 f)
2. **Mandatory Reporting to Law Enforcement**. You must disclose patient information to law enforcement in the following situations:
	* Driver involved in an MVA with lab test results indicating blood alcohol level that meets or exceeds legal limit, or presence of a controlled substance.
	* Suspected child abuse and neglect, suspected abuse and neglect of the elderly.
	* Suspected abuse of mentally disabled persons.
	* Physical injury caused by a knife, gun, pistol or other deadly weapon.
	* Death believed to be the result of criminal conduct.
3. **Permitted Reporting to Law Enforcement**. You may initiate a disclosure to law enforcement in the following situations:
	* To report criminal conduct occurring at the facility.
	* In emergency circumstances occurring off the premises of the hospital to report a crime, the location of the crime or victims, or the identity, description or location of the person who committed the crime.
	* As necessary to avert a serious and imminent threat to a person or the public.

Is disclosure needed for: Provision of health care?

Health and safety of patient, officers or those transporting?

No

Yes

Patient agrees to disclosure

Yes

Unable

Limit disclosure to minimum necessary

Subpoena, court order or warrant

Seeking to identify or locate suspect, fugitive, material witness or missing person

Asks for patient by name

Signed HIPAA compliant authorization

Seeking

information about a person in custody

Law Enforcement requesting patient information

Disclose

directory information only

Disclose authorized PHI

Victim of a crime

Do not disclose PHI without authorization

Follow established guidelines for subpoenas and court orders

Disclose authorized PHI

Or emergency circumstances

All three conditions are met:

1. Information not used against the patient
2. Waiting adversely affect outcome.
3. Provider determines in best interest of patient

Log the Accounting of Disclosure

Disclose only: Name and address, date of birth, SS number, blood type and RH factor, type of injury, date and time of treatment, physical description

Driver in a MVA with elevated blood alcohol and/or presence of a controlled substance

Injuries caused by deadly weapons or suspicious dealth:: gun, knife

Mandatory reporting to law enforcement

Report to medical examiner or designee (law enforcement

Do not disclose PHI without authorization

Suspected abuse or neglect of: Child, elderly, disabled, Incapacitated, mentally ill,

Or developmentally disabled

No Yes

No

Yes

Limit disclosure

of PHI to minimum necessary

Elevated Blood

alcohol or controlled substance

Do not disclose PHI without authorization

Log the Accounting of Disclosure

Information needed to investigate crime

Patient discloses he/she participated in violent crime

As necessary to

avert a serious and imminent threat

Suspected crime on premises

Permitted reporting to law enforcement

Limit disclosure of patient information to minimum necessary

Log the Accounting of Disclosure

May disclose: Name and address, date of birth, SS number, blood type and rh factor, type of injury, date and time of treatment, physical description

### Frequently Asked Questions Regarding Allowable Disclosures

1. **Disclosures allowed on the request of Law Enforcement**.
	1. May the hospital release patient health information in response to subpoena, court order, search warrant or grand jury subpoena?

**Answer:** Yes. HIPAA does not change these requirements and hospitals should continue to follow their existing procedures. Remember, however, that law enforcement subpoenas seeking records or testimony for trial must be compliant with the Montana Rule of Civil Procedure 45.

* 1. If a law enforcement officer presents a patient authorization to obtain the patient’s records, must that authorization take a particular form?

**Answer:** Yes. Authorization forms used by law enforcement must be HIPAA compliant. HIPAA compliant authorization forms are different than the releases law enforcement may have been using in the past. Note also that an authorization should not be combined with other forms, such as a consent to treat form. Direct law enforcement to your hospital’s authorization form or the model authorization form contained in the Sample Forms section of this document.

* 1. What may a hospital disclose if a law enforcement officer asks if a particular person has been admitted to the hospital?

**Answer:** The hospital may confirm that the person is a patient if:

* + - The officer asks for the patient by name;
		- The patient has had the opportunity to opt out of such disclosures and has not done so; or
		- If the patient could not opt out due to incapacity, the hospital believes it is in the best interest of the patient to disclose to law enforcement that the patient has been admitted.

The hospital may disclose the patient’s presence in the facility, general condition, and location.

* 1. If law enforcement asks about a patient who was previously in the hospital but has been discharged or died, may the hospital acknowledge that the patient had been in the hospital? **Answer:** Yes. If the officer asks about the patient by name, the hospital may indicate that the patient was previously “treated and released,” or died.
	2. Law enforcement wants to arrest a patient upon discharge. May the health care facility disclose actual or anticipated discharge date?

**Answer:** Not unless disclosure is made to avert a serious and imminent threat to a person or the

public. For example, if law enforcement represents that a patient has a warrant for a violent crime, the facility may make those disclosures necessary to avert the threat.

* 1. If a patient is under arrest or in lawful custody during the hospitalization may the hospital disclose PHI to the law enforcement officer with custody of the patient?

**Answer:** Yes. For the following purposes:

* + - The provision of health care to the patient;
		- The health and safety of the patient, others in custody, officers, or persons transporting patient;
		- Law enforcement activities on the premises of the correctional institution; or
		- The safety, security, and good order of the correctional institution.
	1. What information can the hospital give to law enforcement about suspects, material witnesses, fugitives, or missing persons?

**Answer:** The fact that a patient is a criminal suspect does not give law enforcement access to unlimited information about the patient. HIPAA does provide, however, for disclosure of specific information. Even if law enforcement does not have the patient name, if the officer 1) initiates the inquiry, 2) identifies the person as a suspect, material witness, fugitive or missing person; and 3) indicates that the purpose of the inquiry is only to identify or locate the person, the facility may disclose the following information:

* + - Name and address;
		- Date and place of birth;
		- Social security number:
		- ABO blood type and RH factor;
		- Type of injury;
		- Date and time of treatment (does not include future discharge date and time);
		- Date and time of death, if applicable; and
		- A description of distinguishing physical characteristics, including height, weight, gender, race, hair and eye color, presence or absence of facial hair, scars, and tattoos.

The Law Enforcement Request for Information form is useful in eliciting the required statements from law enforcement. See the Law Enforcement Request for Information form in the Sample Forms section of this document.

* 1. May the hospital disclose information about crime victims?

**Answer:** Yes. Protected Health information (PHI) may be disclosed to law enforcement officials in response to a law enforcement official’s request, for such information about an individual who is or is suspected to be a victim of a crime, if:

* + - The patient agrees to the disclosure; or
		- If the patient is unable to agree to disclosure because of incapacity or other emergency circumstances, and all three of the following conditions are met:
			* The law enforcement official represents that the information is needed to determine whether the violation has occurred and that the information is not intended to be used against the victim;
			* The law enforcement official represents that immediate law enforcement activity that depends upon the disclosure would be materially and adversely affected by waiting until the individual is able to agree to the disclosure; and
			* The patient’s provider determines in the exercise of his or her professional judgment that the disclosure is in the best interests of the patient.

The Law Enforcement Request for Information form may be useful to elicit and document the necessary information. See the Law Enforcement Request for Information form in the Sample Forms section of this document.

* 1. What information may the hospital provide to law enforcement over the telephone?

**Answer:** Hospitals may provide the same information to law enforcement over the telephone that they may provide in person provided the hospital engages in appropriate verification that the caller is actually a law enforcement officer. This verification procedure may include such steps as establishing a telephone call-back list or requiring the officer to send a fax that includes appropriate identifying information and call-back telephone number.

### Mandatory Reports of Patient Information to Law Enforcement

* 1. When must I disclose blood alcohol content (BAC) or the presence of a controlled substance in the patient’s blood to law enforcement?

**Answer:** Montana law does not require reporting of BAC or the presence of a controlled substance to law enforcement absent a lawful subpoena or patient consent under the Implied Consent statute.

The 4th Amendment of the U.S. Constitution and Article 2 §11 of the Montana Constitution both protect against unreasonable search and seizures. Searches and seizures are lawful when performed pursuant to a warrant issued by an impartial magistrate and based on probably cause. Prior to 2011 law enforcement in Montana was prohibited from obtaining a warrant for blood of a DUI suspect based on probably cause if the suspect refused to provide a sample under the Implied Consent law. The 2011 Legislature changed the law and now search warrants to obtain blood of DUI suspects are allowed under certain circumstances. The new Montana Law, Mont. Code Ann. Section 61-8-402 allows a warrant in DUI cases that meet the criteria below.

**Criteria for warrant to obtain blood from DUI suspect:**

1. Patient has refused to provide a breath or blood test after being read the Implied Consent Advisory, and
2. Patient has been advised of the right to an independent blood draw (also part of the Implied Consent Advisory), and
	1. Patient has a prior refusal (breathalyzer or blood)
	2. Patient has a prior conviction or pending charge for one of the following offenses in Montana or other states:
		1. DUI: §61-8-401
		2. DUI (Per se), above .08 §61-8-406
		3. Vehicular Homicide §45-5-106
		4. Negligent Vehicular Assault §45-5-205
		5. Negligent Homicide §45-5-104

Remember that a report of blood alcohol content or presence of controlled substances to law enforcement must be included in an Accounting of Disclosures required by HIPAA.

* 1. May the hospital continue to report child abuse, elder abuse and other abuse of vulnerable adults to law enforcement?

**Answer:** Yes. Montana law requires healthcare providers to notify law enforcement of certain incidents involving possible criminal activity. The following statutes apply to mandatory reporting of abuse or neglect:

**MCA**  §41-3-201 requires reporting of cases involving suspected chile abuse (Requirements in Attachment)

**MCA**  §52-3-811 requires reporting of cases involving suspected abuse of elderly or the developmentally disabled (Requirements in Attachment)

* 1. May hospitals continue to report injuries caused by a deadly weapon, or suspicious death? **Answer:** Hospitals are required to report certain types of injuries to law enforcement. Montana law requires physicians, nurses or “other person[s] licensed to practice a health profession” to report to law enforcement a gunshot wound or stabbing. MCA §37-2-302 The report must be made as “soon as is practicable” and “by the fastest possible means”.

**Note:** Outside of the special circumstances of gunshot, stabbing or possible child, elder and vulnerable adult abuse, other crimes (including sexual assault) DO NOT require mandatory reporting. Victims of these crimes should be strongly encouraged to report the incident to law enforcement but ultimately, in Montana, it is their decision to make.

### Permitted Reports of Patient Information to Law Enforcement

* 1. If hospital personnel believe that a patient has engaged or intends to engage in conduct that presents a serious and imminent threat to a person or the public, may the hospital notify law enforcement and or the intended victim?

**Answer:** Yes, if hospital personnel reasonably believe the disclosure to law enforcement is necessary to prevent or lessen the threat. If law enforcement is not aware of the intended victim or potential crime, the hospital may disclose information to law enforcement on its own initiative if the disclosure is necessary to avert a serious and imminent threat to a person or the public. The hospital may also disclose to the intended target/victim.

* 1. Hospital personnel see a patient or visitor attempt to drive away from the hospital while intoxicated. May the hospital on its own initiative disclose that information to law enforcement? **Answer:** Yes. The HIPAA Privacy Regulations allow a hospital to notify law enforcement of the patient’s actions if notification is necessary to avert a serious and immediate threat to the health and safety of the public. The notice shall consist of the name and physical description of the person and the fact that the health care provider believes the person is intoxicated and is about to drive a motor vehicle. Notifying law enforcement about similar actions by a visitor to the hospital is allowed because the disclosure does not involve protected health information (the visitor is not a patient).

Remember that reporting that a patient is attempting to drive while intoxicated must be included in an Accounting of Disclosures required by HIPAA.

* 1. The hospital believes a patient has escaped from a correctional institution. May the hospital alert law enforcement?

**Answer:** Yes. HIPAA allows a hospital on its own initiative to disclose protected health information to law enforcement as necessary for law enforcement to identify or apprehend an individual who has escaped from a correctional institution or from lawful custody.

* 1. A patient is out of control and requires containment. May the hospital call law enforcement? **Answer:** Yes. Call 911 if the person poses an immediate threat to health care facility patients or staff. If a patient is behaving in a way that would threaten the health and safety of others, a hospital may call law enforcement if it believes that doing so will prevent or lessen further harm to an individual or the public.
	2. If a patient discloses to hospital personnel that he/she has participated in a violent crime that may have caused serious injury to someone, may the hospital notify law enforcement for the purpose of identifying or apprehending an individual?

**Answer:** In certain circumstances, yes. The hospital may disclose the information allowed regarding suspects discussed above in Section 1 g. However, a hospital may not disclose this information, if the patient made the disclosure during treatment intended to affect the propensity to commit the criminal conduct or during counseling or therapy or through a patient request to initiate such counseling or therapy.

* 1. When may emergency medical providers disclose patient information to law enforcement? **Answer:** The HIPAA privacy regulations allow an emergency medical provider to disclose patient information to law enforcement if the disclosure appears necessary to alert law enforcement to the commission of a crime, the location of the crime, the victim of the crime, and the identity, location, and description of the perpetrator. Note, however, that this provision does not apply to emergency care provided on the premises of the hospital, so does not apply to hospital Emergency Department personnel. The most likely application of this provision will be to Emergency Medical Technicians providing care outside the hospital.
	2. If a hospital believes a patient has committed a crime on its premises, may it notify law enforcement?

**Answer:** Yes, a hospital may disclose evidence of a crime occurring on the premises of the facility. If a person is disruptive and the hospital has asked the person to leave and they refuse, that likely qualifies as trespassing and the police may be called.

* 1. If a person attempts to obtain services using a false identity or presents fraudulent documents, may the police be notified?

**Answer:** Yes. This may constitute identity theft or theft of services and may be considered a crime on the premises of the hospital, therefore law enforcement may be contacted.

* 1. The hospital finds illegal drugs on the patient. May the hospital on its own initiative provide this information to law enforcement?

**Answer:** Yes. A person found with illegal drugs on the premises of the hospital is committing a crime on the premises of the hospital. As such, the facility may contact law enforcement.

* 1. May the hospital disclose patient information for national security activities?

**Answer:** Yes. A health care facility may disclose protected health information to authorized federal officials for the conduct of lawful intelligence, counter-intelligence, and other national security activities authorized by the National Security Act (50 U.S.C. 401). The hospital may also disclose protected health information to authorized federal officials for the provision of protective services to the President or other persons authorized by 18 U.S.C. 3056 or to foreign heads of state or other persons authorized by 22 U.S. C. 209(a)(3) or for the conduct of investigations authorized by 18

U.S.C. 871 and 879. The HIPAA privacy regulations do not define who qualifies as an authorized federal official. Typically, however, this will be FBI, Secret Service or representatives of the U.S. Attorney’s office.

### Additional Issues Regarding Disclosures of Patient Information to Law Enforcement

1. **Law Enforcement Access to the Patient/Hospital**
	1. May law enforcement officers be present in the hospital to provide security for the patient or to prevent the patient from fleeing?

**Answer:** Yes. Law enforcement may be present in the hospital as necessary for security of patients and hospital staff and to prevent flight. Remember, however, that the hospital must take all appropriate steps to limit disclosure of protected health information to law enforcement acting in this capacity. For example, it may not always be necessary for the officer to be in the patient’s room; remaining immediately outside may be sufficient.

* 1. If a law enforcement officer asks to go to the patient’s room to talk to or question the patient, must the hospital allow the officer to go to the room?

**Answer:** Not necessarily. Hospitals generally should not allow law enforcement access to the patient without the patient’s permission. Hospitals should cooperate fully, however, in seeking the necessary patient permission.

* 1. Law enforcement comes to the hospital to serve a restraining order or to arrest a patient. May the hospital allow the officer to go to the patient’s room without patient permission?

**Answer:** Generally, if the officer has a court ordered warrant, restraining order or other order of the court, hospitals should allow the officer to serve the order if the patient’s medical condition allows.

* 1. May a law enforcement officer accompany a patient into the Emergency Department while the patient is being treated?

**Answer:** Yes, provided that the purpose of law enforcement accompanying the patient is for a legitimate law enforcement activity (i.e. requesting a blood draw or other specimen, viewing and gathering evidence from a patient) as an extension of a criminal investigation related to the patient. The hospital should take reasonable steps to limit disclosure of protected health information as much as possible. Law enforcement should not be allowed to wander through the emergency department or be exposed to or gain access to other patients’ protected health information.

### Disclosure of Patient Property to Law Enforcement

1. The hospital has patient clothing, weapons or other possible evidence of a crime that law enforcement needs for its investigation. May the hospital provide it?

**Answer:** The hospital may only provide it to law enforcement pursuant to a search warrant, court order, or patient authorization.

1. May the hospital provide fingernail scrapings, bullets, or other physical evidence taken from the patient?

**Answer:** The hospital may only provide it to law enforcement pursuant to a search warrant, court order, or patient authorization.

### Disclosure of Specially Protected Records

a. Law enforcement has submitted a subpoena requesting the patient’s medical records and the records contain HIV information. May the hospital disclose the entire record?

**Answer:** The HIPAA privacy regulations did not change Montana’s laws or other federal laws protecting certain medical records. Drug and alcohol records of a treatment facility or that relate to a referral for drug/alcohol treatment, HIV positive test results or diagnosis, genetic testing records, certain mental health records may be disclosed only with patient authorization specifically allowing such disclosure, or pursuant to a court order or court ordered warrant. Subpoenas are not generally sufficient to allow for disclosures of specially protected records. Hospitals should follow existing policies and procedures when releasing these records to law enforcement.

**Glossary:** For purposes of this Guide:

“**HIPAA privacy regulations**” means the privacy regulations implementing the Health Insurance Portability and Accountability Act, codified at 45 CFR 164.103, et. seq.

“**Individually identifiable health information**” is a subset of all health information collected from an individual that is:

* Created or received by a health care provider, health plan, employer, or health care clearinghouse; and
* Relates to the past, present or future physical or mental health condition of an individual, provision of health care to an individual or payment for the provision of health care to an individual; and
* Identifies the individual or could be used to identify the individual.

“**Law enforcement official**” means a sheriff, constable, marshal, municipal police officer, member of the Montana Highway Patrol, investigator of the Criminal Justice Division of the Department of Justice or investigator of a district attorney’s office and such other persons as may be designated by law.

“**Protected health information**” is individually identifiable health information that is transmitted or maintained by any electronic media or medium, or transmitted or maintained in any other form or medium.

“**Lawful custody**” a law enforcement officials' act of holding an accused or convicted person in criminal proceedings, beginning with the arrest of that person.

“**Identity theft**” When a person knowingly transfers or uses, without legal authority, a means of identification of another person with the intent to commit, or to aid and abet, any

unlawful activity that constitutes a violation under any applicable federal, state or local law. This includes attempts to assume the identity of another person through fraudulent means or false pretenses to obtain or attempt to obtain medical services or goods, or to make false claims for medical services or goods.

“**Serious and Imminent Threat**” is described as being "*instant, overwhelming, and leaving no choice of means, and no moment for deliberation”.*

### SAMPLE FORMS

***The following forms are provided for sample purposes only and may be updated from time to time.***

## Mandatory Reporting Requirements: The Elderly in Montana

## Montana Mandatory Reporting Requirements Regarding Children

## Authorization to Release Protected Health Information to Law Enforcement

## Law Enforcement Request for Information in Response to Serious and Imminent Threat

|  |
| --- |
| Montana Mandatory Reporting Requirements Regarding Children |
| *Who Must Report?* | Any of the following persons when acting as a result of information they receive in their professional or official capacity:* A physician, resident, intern, or member of a hospital’s staff

engaged in the admission, examination, care, or treatment of persons;* A nurse, osteopath, chiropractor, podiatrist, medical examiner, coroner, dentist, optometrist, or any other health or mental health professional;
* Religious healers;
* School teachers, other school officials, and employees who work during regular school hours;
* A social worker, operator or employee of any registered or licensed day-care or substitute care facility, staff of a resource and referral grant program organized under Montana state law or of a child and adult food care program, or an operator or employee of a child-care facility;
* A foster care, residential, or institutional worker;
* A peace officer or other law enforcement official;
* A member of the clergy;
* A guardian ad litem or a court-appointed advocate who is authorized to investigate a report of alleged abuse or neglect; and
* An employee of an entity that contracts with the department

of public health and human services to provide direct services to children. |
| *Standard of Knowledge* | Knowledge or reasonable cause to suspect that a child is beingabused or neglected.Cause for suspicion should be based upon “a perceived present real harm or a perceived present imminent risk of harm. This perception need not always be based entirely upon current, culpable acts of those responsible for the child.” The suspicioncould be based on past acts, present acts, or both. *Gross v. Myer*s, 748 P.2d 459, 462 (Mont. 1987). |
| *Definition of Applicable**Victim* | A child is any person under 18 years of age. |
| *Reports Made To* | Child Abuse Hotline (1-866-820-5437) through the Departmentof Public Health and Human Services. |

**Authorization to Disclose Protected Health Information To Law Enforcement**

Patient Name: Med Rec #: Date of Birth:

Today’s Date:

Or attach patient Label

The information used or disclosed pursuant to this authorization may be subject to redisclosure and may no longer be protected under federal law.

Refusal to sign this authorization will not affect the patient’s ability to obtain health care services or reimbursement for services unless authorization is required to bill the patient’s insurance company.

To disclose protected health information to the following law enforcement agency and officer:

|  |  |  |
| --- | --- | --- |
| Officer Name: | Badge #: | Jurisdiction: |

Purpose of release (required):

If such information exists, I authorize the disclosure of □ the emergency treatment record or □ the following specified documents, dates of service, and/or information about the following injury / illness / disease:

Release of the following labeled specimen(s) to law enforcement **(initial all that apply)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Blood |  | Clothing |
|  | Urine |  | Other  |

The following items **must be initialed** to be included in the use and/or disclosure of medical information:

|  |  |  |  |
| --- | --- | --- | --- |
|  | HIV-positive test results and HIV diagnosis |  | Mental health information and/or records (OR only) |
|  | Genetic testing information and/or records (OR only) |  | Other sexually transmitted diseases (WA only) |
|  | Drug/alcohol diagnosis, treatment or referral information. Per Federal regulations, describe how much and what kind of information is to be disclosed: |

Federal or state law may restrict redisclosure of HIV-positive test results and HIV diagnosis, other sexually transmitted disease information, specially protected mental health information, genetic testing information, and drug/alcohol diagnosis treatment or referral information.

The person or entity I am authorizing to use and/or disclose the information may receive compensation for doing so.

The only circumstance when refusal to sign means the patient will not receive health care services is if the health care services are solely for the purpose of providing health information to someone else, and the authorization is necessary to make that disclosure. My refusal to sign this authorization will not adversely affect my enrollment in a health plan or eligibility for health benefits unless the authorized information is necessary to determine if I am eligible to enroll in the health plan.

I may revoke this authorization in writing at any time, except to the extent that action has been taken in reliance upon this authorization. If I revoke my authorization, the information described above may no longer be used or disclosed for the purpose described in this authorization. Unless revoked earlier, this authorization will expire on the earlier of 1 year from the date of signing or on .

Signature of Patient or Patient’s Legal Representative Date

**LAW ENFORCEMENT REQUEST FOR INFORMATION IN RESPONSE TO**

### SERIOUS AND IMMINENT THREAT

Date**: \_**

Based on information obtained by

(name of law enforcement agency)

I, **/** , attest that (print officer’s name) (DPSST)

 , poses a serious and imminent threat to a (print patient’s name)

person or the public. Therefore, I am requesting a disclosure of the estimated future discharge date and time of the above named individual, who is presently a patient at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

|  |  |  |
| --- | --- | --- |
|  |  **/**  |  |
| (signature of requesting officer) | (date / time)Case # | (officer’s title)  |

(officer’s law enforcement agency / precinct)

VCAD #

Additional patient identifiers, if available (birth date, physical characteristics, etc):

=============================================================================

Hospital Staff releasing information:

(signature / date and time of signing) Estimated date / time of patient discharge: