

Women's Health

SPECIALISTS

Category: Medical Records	Page(s): 2
Department(s): Billing/Front desk/Medical Records	Title: Request for restrictions for patient payment
Distribution: Intranet/Binder	Origination Date:08/23/13

Background: HIPAA Omnibus Rule (2013) § 164.522(a)(1)(vi) states a patient may request a restriction on their protected health information (PHI) for their health insurance carrier if the patient elects to pay all of the cost of care out-of-pocket.

Definitions: Protected Health Information (PHI): Patient's medical/health information contained in the EMR.

Protocol:

1. If a patient requests to pay all of their visit out-of-pocket to any member of WHS:
 - a. Give the patient the "Request for Restriction Due to Patient Payment" form.
 - b. Collect the full cost of the visit before they leave the clinic otherwise we will have to bill the insurance.
 - c. Flag the chart with the flag "INSURANCE RELEASE RESTRICTION" under Financial category.
 - d. Give the patient the signed request (on bright paper) and explain to the patient they must tell the MA that screens them about the restriction for testing purposes. Explain to the patient they will be responsible for full price lab testing.
 - e. If the patient has questions about the restriction, please see the privacy officer.
2. PROTOCOL FOR RELEASING PHI TO THE INSURANCE CARRIER:
 - a. If you bring up the patient's chart and the flag "INSURANCE RELEASE RESTRICTION" look under "View Patient's Documents".
 - b. Make sure you do not release to any insurance company the dates of service the patient has requested to be restricted.
 - c. This restriction is only for insurance companies and not for any other PHI release.
3. MEDICAL ASSISTANT PROTOCOL: If the patient discloses they have an insurance restriction, ask them if that includes any pathology/testing for the visit. If so, do not send insurance card/information to the lab. Explain to the patient they will be responsible for full price lab fees.
4. SCRIPT FAQs:
 - a. The restriction is only for the specified dates of service and only for WHS. Be certain the patient understands they must notify the lab and pharmacy not to bill their insurance if they do not want the insurer to know. They should do this BEFORE tests are done and BEFORE a prescription is e-prescribed.