Uses and Disclosures of PHI Involving Family, Friends, and Others

1. If the patient is present and has health care decision-making capacity, UConn Health may discuss the patient’s health information with a family member, friend, or other person if the patient agrees or, when given the opportunity, does not object. UConn Health also may share information with these persons if, using professional judgment, it is determined that the patient does not object. In either case, UConn Health may discuss only the information that the family member or other person needs to know about the patient’s care or payment for the patient’s care.

2. UConn Health may decide not to share information with a family member, friend, or other individual if, using professional judgment, it is determined that it is not in the best interests of the patient.

3. Form [HCH 1397: Permission to Communicate Health Information and Use Alternative Communication Methods](#) (the “Form”) may be used to document a patient’s agreement to communicate about their care with a family member, friend, or other individual. The Form is completed as follows:
   a. **Inpatient (excludes Inpatient Psychiatry):**
      i. Completed upon admission, for each admission.
   b. **UMG and JDH outpatient clinics (excluding outpatient psychiatry):**
      i. Completed upon initial visit.
      ii. Updated annually and otherwise at the individual’s request.
   c. **Outpatient Psychiatry:**
      i. Completed upon initial visit at each outpatient psychiatry location, and at other times upon the patient’s request.
   d. **Dental Clinic/University Dentists locations:**
      i. Completed upon initial visit and reviewed for changes with the individual at each subsequent visit. May be updated at any time upon patient request.
   e. **Inpatient Psychiatry:**
      i. Patients sign the “Authorization to Obtain and/or Disclose Health Information Form” (HCH 551) upon admission to permit communications with family, friends or other individuals.

4. When the patient is not present or is incapacitated, or in emergency circumstances, the decision whether or not to disclose relevant information will be consistent with the patient’s prior preference, if known, and in any instance will be based on professional judgment and the patient’s best interests. For example, UConn Health may leave messages for patients with a family member or other person who answers the phone when the patient is not present. However, UConn Health should use professional judgment to assure that such disclosures are in the best interest of the individual and limit the information disclosed.
5. Unless a patient has requested that UConn Health communicate with them by alternative means (see 2003-15: Patient Right to Request Alternative Methods of Communications), UConn Health may leave messages for patients on their voicemail or answering machine. However, to reasonably safeguard the patient’s privacy, information left on voicemail messages to patients should generally be limited to the staff’s name and call back number unless the patient has requested or agreed to receive a detailed message.

6. UConn Health may use professional judgment and experience to decide if it is in the patient’s best interest to allow another person to pick up a prescription, medical supplies, or other similar forms of information for the patient. For example, the fact that a relative or friend arrives at a pharmacy and asks to pick up a specific prescription for a patient effectively verifies that he or she is involved in the patient’s care and UConn Health may give the filled prescription to the relative or friend. The patient does not need to provide the pharmacist with their names in advance.

7. The designation as an individual with permission to communicate does not confer the rights of a personal or legal representative on that individual (see 2012-05 Legal Representative for Health Care Decisions).

8. There are specific circumstances under which limited PHI may be disclosed to notify, or assist in the notification of (including identifying or locating), a family member, a personal representative of the patient, or another person responsible for the care of the patient of the patient’s location, general condition, or death. Contact the Office of Healthcare Compliance and Privacy or the Office of the General Counsel prior to disclosing PHI for notification purposes.