

PATHWAYS CMH

PROCEDURE TITLE: Authorization Procedure – Appendix 4 of Privacy Policy	CATEGORY: Recipient Rights
EFFECTIVE DATE: April 14, 2003	BOARD APPROVAL DATE: April 14, 2003
REVIEWED DATE: June 2013; July 11, 2014; May 5, 2015; April 22, 2016; April 15, 2017	REVISION(S) TO PROCEDURE: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RESPONSIBLE PARTY/APPROVAL: Recipient Rights Supervisor or Designee/ Mary J. Swift, CEO	

PURPOSE:

To protect the rights of recipients.

PROCEDURES:

1. An authorization for use or disclosure of PHI may not be combined with any other document to create a compound authorization.
2. Pathways may condition the provision of healthcare that is solely for the purpose of creating PHI for disclosure to a third party, on an authorization for the disclosure of PHI to such third party.
3. An individual may revoke an authorization at any time provided that their revocation is in writing except to the extent that Pathways has taken action in reliance thereon.
4. Pathways must document and retain any signed authorization. The authorizations will be filed in the medical record under the release section of the chart.
5. A valid authorization under this section must contain at least the following elements:
 - a. A description of the information to be used or disclosed that identifies the information in a specific and meaningful fashion.
 - b. The name or other specific identification of the person(s) or class of persons authorized to make requested use or disclosure.
 - c. The name or other specific identification of the person(s) or class of persons to whom the covered entity may make the requested use or disclosure.
 - d. An expiration date or expiration event that relates to the individual or the purpose of the use or disclosure.
 - e. A complete description of each purpose of the requested use or disclosure.

- f. A statement of the individual's right to revoke authorization in writing and the exceptions to the right to revoke, together with a description of how the individual may revoke the authorization.
 - g. A statement that information used or disclosed pursuant to the authorization may be subject to re-disclosure by the recipient and no longer be protected by this rule.
 - h. Signature of the individual and date.
 - i. If the authorization is signed by a personal representative of the individual, a description of such representative's authority to act for the individual.
 - j. A statement that Pathways will not condition treatment, payment, enrollment or eligibility for benefits on the recipient signing the authorization, except as referred in Section 2.
6. The authorization must be written in plain language.
7. Any use or disclosure of psychotherapy notes requires a valid authorization except:
- a. Use by the originator of the psychotherapy notes for treatment.
 - b. Use or disclosure by Pathways for its own internal training programs.
 - c. Use or disclosure by Pathways to defend itself in a legal action or other proceeding brought by the recipient.
 - d. To the recipient.
 - e. Uses and disclosures required by law.
 - f. Uses and disclosures for health oversight of the originator.
 - g. If necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
8. Pathways will not consider an authorization valid if:
- a. The expiration date has passed or the expiration event is known by Pathways.
 - b. The authorization is not filled out completely.
 - c. Pathways knows that the authorization has been revoked.
 - d. The authorization is combined with another document.
 - e. Treatment, payment, enrollment or eligibility is conditioned upon the receipt of a signed authorization from the recipient.
 - f. Pathways knows that material information in the authorization is false.

9. Pathways will provide the recipient with a copy of any authorization.
10. For Individuals receiving co-occurring services, see the Confidentiality and Disclosure Policy Co-occurring.

Information disclosed pursuant this authorization may be subject to re-disclosure by the recipient and no longer protected by federal or state law.

REFERENCES:

Act 258 of the Public Acts of 1974, as amended (Michigan Mental Health Code) Section 748, 748 (a), and 750.
45 CFR Part 164 section 508.
42 CFR Part 2 subpart C section 2.31.