

HEALTH INFORMATION PRIVACY POLICIES & PROCEDURES

3. Authorization

In some cases we must have proper, written **Authorization** from the patient (or the patient's personal representative) before we use or disclose a patient's PHI for any purpose (except for TPO purposes) or as permitted or required without consent or authorization (see Sections 3, 4, or 5).

Our dental office will use the **Authorization** form. We will always act in strict accordance with an **Authorization**.

- a) **Authorization Revocation** — A patient may revoke an authorization at any time by written notice. Our dental office will not rely on an **Authorization** we know has been revoked.
- b) **Authorization from Another Provider** — Our dental office will use or disclose PHI as permitted by a valid **Authorization** we receive from another healthcare provider.

Our dental office may rely on that covered entity to have requested only the minimum necessary protected PHI. Therefore, our dental office will not make our own "minimum necessary" determination, unless we know that the **Authorization** is incomplete, contains false information, has been revoked, or has expired.

- c) **Authorization Expiration** — Our dental office will not rely on an **Authorization** we know has expired.

4. Oral Agreement

Our dental office may use or disclose a patient's PHI with the patient's **Oral Agreement** or if the patient is unavailable subject to all applicable requirements.

Our dental office may use professional judgment and our experience with common practice to make reasonable inferences of the patient's best interest in allowing a person to act on behalf of the patient to pick up dental/medical supplies, X-rays, or other similar forms of PHI.

5. Permitted Without Acknowledgement, Consent Authorization or Oral Agreement

Our dental office may use or disclose a patient's PHI in certain situations, without **Authorization** or **Oral Agreement**. In our dental office, these disclosures are not likely to be frequent.

- a) **Verification of Identity** — Our dental office will always verify the identity of any patient, and the identity and authority of any patient's personal representative, government or law enforcement official, or other person, unknown to us, who requests PHI before we will disclose the PHI to that person.

Our dental office will obtain appropriate identification and, if the person is not the patient, evidence of authority. Examples of appropriate identification include photographic identification card, government identification card or badge, and appropriate document on government letterhead. Our dental office will document the incident and how we responded.