Do You Have a Job-Related Need to Know? When is it OK to view a patient’s chart?
You should only look at a patient’s chart for:
• Treatment, which includes preparing for a patient as well as continuity of care
• Payment
• Operations, i.e. research, credentialing, auditing, etc.

The question to ask yourself before viewing a patient’s chart is “do I have a need to know to perform my job and would my manager agree?” If the answer is no, don’t open the patient’s chart.

If the only reason you know something about a patient is because you work in a physician’s office and/or have access to PowerChart – do NOT repeat it. Information learned from a chart or while at work is protected. Information learned from a friend outside of work, from Facebook, or announced at church, is not protected.

Curiosity or concern is NEVER a legitimate reason to view a patient’s record, if there is no job-related need.

It’s People. Not Paper. How often should we have our patients update the list of people with whom they permit us to share their health information, i.e. spouse, sibling, parent, child, etc.? Ideally, a patient should update those who can access his/her record at least once a year.

Privacy questions such as “who is authorized to access your medical record?” can be included when updating a patient’s address and contact numbers during an office visit.

Who Gets What? Who can access a patient’s chart after the patient has died?
A deceased patient’s chart can only be released to the legal executor of the estate. For example, a spouse or adult child may not have a copy unless they are appointed the legal executor by Probate Court, or if they meet one of the other HIPAA disclosure exceptions.

I’m not sure how to handle a request for a patient’s chart/information – what should I do? Whenever you have a situation where a patient’s privacy may be affected, here is a guideline for decision making:
1. Use common sense. When in doubt, obtain a signed release from the patient, or at least verbal permission from patient, which you should document. Most complaints originate when the patient has been “surprised” by the release of information. Don’t surprise the patient.
2. Refer to your office’s HIPAA policy; there are many exceptions and explanations.
3. Ask knowledgeable others, such as your privacy officer, manager, or another physician practice.
4. For complex or persistent privacy issues, please contact Rochelle Steimel, Munson’s HIPAA Privacy Officer, at (231) 935-5765, or rsteimel@mhc.net.
5. Only share the minimum information necessary.

6. ALWAYS put the patient’s safety and best interests first when deciding when and how to share information. The patient should be at the center of all decision making.

Put Yourself in the Patient’s Shoes. How should I act when I run into a patient outside the office?
If the patient pretends not to know you, follow suit. However, if the patient says hello, feel free to respond. Just be careful not to say how you know the patient when others are present unless the patient chooses to share that information. In general, follow the patient’s lead in any interactions outside the practice.

Better Safe Than Sorry. Should I log out of the electronic medical record (EMR) every time I leave the room?
Yes. Log out or lock. Do not leave a computer unattended where a patient or other staff can access it. Turn the computer off or lock it when leaving the room. Although patients have a right to access their charts, they need a doctor or nurse to interpret the contents accurately.

What About Me? I have PowerChart access. Is it OK for me to look at my OWN record? Yes, Munson policy allows for all staff to access their own medical record in PowerChart for any reason at any time, with no policy violation.

For HIPAA questions or privacy concerns, contact Rochelle Steimel, Munson Privacy Officer, at (231) 935-5765 or rsteimel@mhc.net.

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