HIPAA Forms and Health Information Access and Privacy - Overview

You have the right to privacy concerning information about your health, medical care, and how your care is paid for. This right comes from a federal law called HIPAA (Health Insurance Portability and Accountability Act). Although HIPAA regulates many other areas, the main impact it has on most people is the Privacy Rule, which determines how health care providers and health insurance companies can disclose Protected Health Information (PHI).

The Legal Aid Society has written an <u>article explaining the HIPAA Privacy Rule</u>, as well as answering many common questions about how it operates.

One of the most common situations in which people confront HIPAA is when they are trying to get a medical provider or health plan to disclose their Protected Health Information to another party. In order to do this, you generally need a HIPAA Release, which is a signed authorization from the patient. Some agencies and providers prefer to have a HIPAA release on their own specialized form, although this is not legally required. In fact, since November 2013, Managed Long Term Care, PACE, and Medicaid Advantage Plus plans have been REQUIRED to accept the NYS Office of Court Administration OC-960 form below. See <u>DOH MLTC Policy 13.24</u>

Right to Your Own Records -- This 2015 memo from the U.S. Health and Human Services Office of Civil Rights enumerates patients' rights to access their medical records. In part, it provides authority that members of managed care insurance plans -- including Medicaid plans - have a right to their records at any time, not only when a hearing or other appeal is pending. See also NYS DOH Managed Long Term Care Guide p. 17.

Here are some examples of organization-specific HIPAA forms:

1. New York State Office of Court Administration

OCA Form No. 960 - Authorization for Release of Health Information Pursuant to HIPAA

THIS FORM MUST BE ACCEPTED BY:

- Managed Long Term Care, PACE, and Medicaid Advantage Plus plans are REQUIRED to accept this form. See <u>DOH MLTC Policy 13.24</u>
- NYC Human Resources Administration, Medical Assistance Program (aka Medicaid)

OCA Form No. 960 - Authorization for Release of Health Information Pursuant to HIPAA (NYC HRA now requires use of the OCA-960. As of May 1, 2016 the previous form, MAP 751-D, will not be accepted).

2. New York State Department of Health

<u>DOH-2557 - HIPAA Compliant Authorization for Release of Medical Information and Confidential HIV Related Information</u> (English)

DOH-2557 - Autorizacion para divulgar informacion médica e informacion conï¬ dencial relativa al VIH conforme a la ley de Responsabilidad y Transferibilidad de Seguros Médicos (HIPAA) (Espanol)

Myths and Facts About HIPPA - and Other Resources

Advocates often find that although HIPAA was intended to protect consumers, the law is often abused by agency or health provider or insurance staff as a way to obstruct an individual's access to their own health information, or to refuse to provide even general information regarding agency practices.

- The <u>Center for Democracy and Technology</u> has posted two excellent articles debunking the many myths floating around about HIPAA:
 - ♦ Myths and Facts about HIPAA Part 1
 - ♦ Myths and Facts about HIPAA Part 2
- The <u>HIPPA website of the U.S. Dept. of Health of Health and Human Services</u> has various Q&As including:

Q: Does the Privacy Rule require that an authorization be notarized or include a witness signature?

A: The Privacy Rule does not require that a document be notarized or witnessed.

• It is possible for an individual to appoint an agent using a Power of Attorney (POA) to execute HIPAA releases on his or her behalf. The new Power of Attorney form in New York State contains a clause giving the agent the authority to examine, question, and pay medical bills on behalf of the principal, so long as the principal has executed a health care proxy. In addition, it is possible to execute a POA exclusively for purposes of executing HIPAA releases, known as a "Sklar POA."

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