

## **CONFLICTS BETWEEN AUTHORIZATIONS AND RESTRICTIONS POLICY**

**RESPONSIBILITY:** Privacy Official or Designee(s)

### **BACKGROUND:**

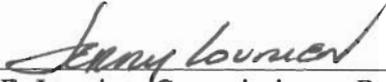
Bureau for Behavioral Health and Health Facilities may occasionally obtain a signed authorization from an individual that is inconsistent with another document from the same individual, or inconsistent with a restriction requested by the individual to which the organization has agreed, regarding the use or disclosure of protected health information [see PATIENT REQUESTS TO RESTRICT THE USE OR DISCLOSURE OF PROTECTED HEALTH INFORMATION]. If this occurs, the requirements of the most recent document will be followed unless clarification can be obtained from the individual.

### **POLICY:**

1. When a conflict exists between two documents that authorize the use or disclosure of protected health information (PHI) pertaining to the same patient, the Bureau for Behavioral Health and Health Facilities will honor the terms of the more recent document, based on the date of the signature. The later document will be interpreted as an amendment of the former document.
2. When an authorization to use or disclose PHI conflicts with a restriction on the use or disclosure of PHI to which the Bureau for Behavioral Health and Health Facilities has previously agreed, the Bureau for Behavioral Health and Health Facilities will honor the terms of the authorization.
3. When the Bureau for Behavioral Health and Health Facilities agrees to a restriction on the use or disclosure of PHI [see PATIENT REQUESTS TO RESTRICT THE USE OR DISCLOSURE OF PROTECTED HEALTH INFORMATION], the restriction will take precedence over any prior authorization to use or disclose the PHI to which the restriction applies.
4. When the patient's intent is not clear, the Bureau for Behavioral Health and Health Facilities will attempt to resolve the conflict by communicating with the patient, either in writing or orally or by obtaining a new authorization or restriction.
5. If the communication is oral, it must be recorded in written form. Written records of such communication will be retained until the date superceded by a subsequent document or other instruction from the patient, plus six years or longer if required by state law or regulation.

Effective Date: 4/14/03

Dates Revised:



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Jerome E. Lovrien, Commissioner, Bureau for Behavioral Health and Health Facilities