

**Polk County Wisconsin
IDENTITY VERIFICATION**

Policy 601.H

Effective Date: April 15, 2003

Current Revision Date:

Purpose

To obtain proper identification of all individuals, including clients, prior to allowing access to protected health information.

Policy

Maintain client confidentiality by obtaining identity verification of persons requesting the use and/or disclosure of protected health information as per the HIPAA standards, Section 164.512(h).

State Preemption Issues: Section 146.82(1) Wis. Stats. states that client health care records may only be released to the persons designated in this section or to other persons with the consent of the client or person authorized by the client. Section 146.83 Wis. Stats. requires a statement of informed consent, which verifies the requestor is the client (or authorized by the client) to use and or disclose PHI. Finally, Section 146.84 Wis. Stat. establishes penalties for both negligent and knowing breach of confidentiality. These statutes imply verification of identity prior to use and/or disclosure of protected health information.

Procedures

1. After verifying the identity of the person, refer to the Access Policies to determine access rights to the requested protected health information.
2. Verify the identity of persons requesting any protected health information prior to allowing access to it by following one of the verification steps outlined below.
3. Consult Polk County's Human Resources Manager before making any disclosure if uncertain whether or not sufficient verification has been obtained.

Person to Identify	In-Person Encounter	Telephone Encounter	Request in Writing (Fax, mail, hand-delivered)
Attorney	Presents with business card and photo identification (i.e. drivers license or organization ID badge), and: Presents with an authorization for release of information signed by the client or personal representative; or Presents with a warrant, court order, or other legal process issued by a grand jury or a judicial or administrative tribunal	Previously provided a signed authorization for release of information signed by the client or personal representative; or Previously provided a warrant, court order, or other legal process issued by a grand jury or a judicial or administrative tribunal	Presents with business card and photo identification (i.e. drivers license or organization ID badge), and: Presents with a authorization for release of information signed by the client or personal representative; or Presents with a warrant, court order, or other legal process issued by a grand jury or a judicial or administrative tribunal
1. Facility directory: Requestor of information in it (164.510(a))	No identity verification required if client agreed to be on directory;	No identity verification required if client agreed to be on directory;	No identity verification required if client agreed to be on directory;
2. Client	Client provides name, address, and date of birth and/or social security number; or Acquainted with client	Client provides name, address, and date of birth and/or social security number; or Acquainted with client	Client provides name, address, and date of birth and/or social security number. Next verify the client's signature with signature on file or on driver's license.

Person to Identify	In-Person Encounter	Telephone Encounter	Request in Writing (Fax, mail, hand-delivered)
Personal Representative (legal guardian) for the Client	Personal Representative provides client's name, address, and date of birth and/or social security number, and verifies (via appropriate legal documentation) own relationship to client; or Acquainted with personal representative as being such	Personal Representative provides client's name, address, and date of birth and/or social security number, and verifies (via appropriate legal documentation) own relationship to client; or Acquainted with personal representative as being such	Personal Representative provides client's name, address, and date of birth and/or social security number. Next verify the personal representative's signature with signature on file or on driver's license.
3. Persons involved in the client's immediate care (PHI relevant only to the client's current care (164.510(b)) blood relative, spouse, domestic partner, roommate, boy/ girl friend, neighbor, colleague	Client actively involves this person in his/her care; or In your best professional judgment, the disclosure is in the client's best interest	Client actively involves this person in his/her care; or In your best professional judgment, the disclosure is in the client's best interest	N/A
4. Power of Attorney for the Client	Presents with a photo ID and a copy of the POA. Verify the client's signature with one on file Acquainted with power of attorney as being such	Previously obtained a copy of the POA and verified the client's signature with one on file Acquainted with power of attorney as being such	Obtain a copy of the POA and verify the client's signature with one on file

Person to Identify	In-Person Encounter	Telephone Encounter	Request in Writing (Fax, mail, hand-delivered)
5. Provider from another facility	Acquainted with provider as a treatment provider; Provider is wearing a photo badge from his/her facility; or Client/personal representative introduces provider to you	Acquainted with provider as a treatment provider; or Call the requestor back through the main switchboard number at that facility (instead of through the direct number)	Recognize name of facility and address on letterhead as a treatment facility; or Call the requestor through the main switchboard number at that facility (instead of through the direct number)
6. Public Official CIA, Court Order, FBI, Law Enforcement Officer, OCR, OIG, Public Health, Agency Official	Presents an agency identification badge; Presents with a written statement of legal authority; Presents with a written statement of appointment on appropriate government letterhead; Presents with a warrant, court order, or other legal process issued by a grand jury or a judicial or administrative tribunal; Presents with a contract for services or purchase order; or Official states release is necessary to prevent or lessen the threat to the health or safety of a person/public	<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Official states release is necessary to prevent or lessen the threat to the health or safety of a person/public 	<ul style="list-style-type: none"> ▶ <input type="checkbox"/> Written statement of legal authority; ▶ <input type="checkbox"/> Written statement of appointment on appropriate government; ▶ <input type="checkbox"/> Warrant, court order, or other legal process issued by a grand jury or a judicial or administrative tribunal; or ▶ <input type="checkbox"/> Contract for services or purchase order
7. Vendor who helps <ORG> with	▶ <input type="checkbox"/> Recognize requestor/	▶ <input type="checkbox"/> Recognize requestor/	▶ <input type="checkbox"/> Recognize requestor/

Person to Identify	In-Person Encounter	Telephone Encounter	Request in Writing (Fax, mail, hand-delivered)
<p>treatment, payment, or health care operations. Examples include, but are not limited to the following:</p> <ul style="list-style-type: none"> , Accreditation organization , DME companies , Insurance company , Pharmacy vendor with whom <ORG> has a rebate agreement with , Software vendor , Statement vendor 	<p>organization; or</p> <ul style="list-style-type: none"> ▸ <input type="checkbox"/> Photo identification with organization 	<p>organization</p>	<p>organization; or</p> <ul style="list-style-type: none"> ▸ <input type="checkbox"/> Call the requestor through the main switchboard number at that facility (instead of through the direct number)
<p>8. Workforce Member of <ORG></p>	<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Acquainted with individual as an <ORG> workforce member; or ▸ <input type="checkbox"/> Workforce member is wearing a <ORG> id badge 	<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Acquainted with individual as an <ORG> workforce member; or ▸ <input type="checkbox"/> Workforce member is calling from an in-house extension 	<ul style="list-style-type: none"> ▸ <input type="checkbox"/> Request is sent from/through <ORG> computer system; or ▸ <input type="checkbox"/> Request is on <ORG> letterhead

References

- 45 CFR 164.512(h).
- HIPAA Privacy Staff Trainer “Verifying the Identity and Authority of Outsiders Seeking Disclosure of a Client’s PHI”, Brownstone Publishers, Inc., September 2002.
- Ruth Heitz, Wisconsin Medical Society, October 30, 2002.

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