

PRIVACY 10.0

DISCLOSURES TO CLERGY

Scope: All [workforce](#) members (employees and non-employees), including employed medical staff, management, and others who have direct or indirect [access](#) to patient [protected health information \(PHI\)](#) of any subsidiaries of Universal Health Services, Inc., including facilities and UHS of Delaware Inc. (collectively, “UHS”), including UHS [covered entities](#) (“Facilities”).

Purpose: Identifies when [PHI](#) may be [disclosed](#) to members of the clergy (“Clergy”).

Definitions:

Terms not defined in this Policy or the *HIPAA Terms and Definitions* maintained by the UHS Compliance Office will have the meaning as defined in any related State or Federal privacy law including the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”) and regulations promulgated thereunder by the U.S. Department of Health and Human Services (“HHS”) at 45 CFR Part 160 and 164, Subparts A and E (“Privacy Regulations” or “Privacy Rule”) and Subparts A and C (“Security Regulations” or “Security Rule”), the Health Information Technology for Economic and Clinical Health Act (“HITECH”) privacy and security provisions of the American Recovery and Reinvestment Act (Stimulus Act) for Long Term Care, Public Law 111-5, the American Recovery and Reinvestment Act of 2009 (“ARRA”), Title XIII and related regulations.

Policy:

Clergy may review information in a Facility patient directory, if a Facility maintains a patient directory in accordance with UHS Privacy 12.0 *Patient Directories*, but will not be entitled to additional [PHI](#). Information on patients in behavioral health Facilities, in behavioral health or psychiatric departments, or in alcohol or substance/drug abuse programs will not be included in a patient directory.

Procedure:

Review of Patient Directory by Clergy

If a Facility maintains a patient directory, members of the Clergy may review the directory to identify those patients that may want to be seen by the member of the Clergy provided that the patient (or their authorized personal representative, as applicable) (“individual”) has been informed of this [use](#) and [disclosure](#) and does not object. Members of the Clergy are not entitled to any additional [PHI](#). (The patient directory contains [PHI](#) because it provides certain health-related information about a patient -- for example, the fact they are admitted to a medical surgical floor).

Patient Entitled to Restrict Information in a Directory:

The Facility will inform individuals about the PHI that may be included in a patient directory and that such information may be used by or disclosed to members of the Clergy, using the process described in UHS Privacy 12.0 *Patient Directories*. The individual will be provided the opportunity to restrict or prohibit Clergy from reviewing PHI in a patient directory.

References:

45 C.F.R. §164.510(a)

Related UHS Policies:

UHS Privacy 12.0 *Patient Directories*

UHS Privacy 25.0 *Use and Disclosure Requiring an Opportunity to Agree/Object*

**Revision Dates: 10-12-2017; 11-16-2015;
07-22-2013**

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Reviewed and Approved by:

UHS Compliance Committee