Confidentiality, Privilege, and HIPAA

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Disclosures

Neither I nor my spouse/partner has a relevant financial relationship with a commercial interest to disclose.
Confidentiality

• Professional’s duty to keep matters revealed in confidence from third parties
Circle of Knowing Model

- Lawyer
- Police
- Outside MD or Therapist

- Family
- Former MD or Therapist

Patient
Co-treaters
Staff
Consultants
Supervisors
Facility accepting in transfer
Exceptions to Confidentiality

- Emergency
- Waiver
- Incompetence
- Civil commitment
- Statutory reporting requirements
- Statutory exceptions, e.g., imminent risk of harm to the patient (suicide)
- Other legal requirements, e.g., duty to protect third parties
Tarasoff and the Duty to Protect Third Parties

• No common law duty to take action to protect others from harm except where a special relationship exists between the parties.

• Special relationships imposing duty to control the actor
  − Parent and child, doctor and patient, parole officer and parolee
  − Actor must be able, or have right, to control
  − Harm must be foreseeable

• Origins: the duty to disclose infectious diseases:
  − To family members, close contacts
  − To public authorities

• Jurisdictions differ: Duty to protect third parties rejected in FL, IL, NC, TX, VA
Evolving Duties to Third Parties

• The driving cases: liability for failure to warn a patient of side effects that are causally related to an injury to a third party

• Expanded duty: Volk v. DeMeerlerr (Washington, 2016)
  – Treating psychiatrist (Ashby) could be liable for murders/attempted murder committed by patient
  – Special relationship existed that imposed a duty of reasonable care to protect foreseeable victims
  – Forseeability is a question to be answered by the trier of fact
Evolving Duties to Third Parties

- **Volk v. DeMeerlerr (cont’d)**
  - Patient of 9 years with bipolar disorder/psychosis
    - Long history of suicidal & homicidal/destructive ideation; revenge thoughts and grudges
    - No specific threats to decedent Schiering (his girlfriend) or other victims (her children)
    - Poor compliance
  - Last visit in April 2010; Schiering had moved out
    - Pt reported begin stable but with SI
    - Ashby noted unstable mood
  - Schiering ends relationship on July 16; Ashby not aware
  - Murders/attempted murder of Schiering and sons on July 17
Evolving Duties to Third Parties

- Volk v. DeMeerlerr (cont’d)
  - Summary judgment for defendants based on lack of proof of specific threat and absence of a duty to the third parties
  - Summary judgment reversed, in part, on intermediate appeal
  - Washington Supreme Court
    - Distinction between medical malpractice (duty owed to patient) and medical negligence (Restatement of Torts §315-duty to third parties arising out of special relationship)
    - Special relationship existed between Ashby and DeMeerleer
    - No duty to control necessary
Privilege

• Patient’s right to have matters revealed to a professional held in confidence
• Testimonial privilege
• State and federal
• Exceptions:
  • Same as for confidentiality
  • Dangerous patient exception
HIPAA: Health Insurance Portability and Accountability Act

• Primary purposes
  – Ensure portability of health insurance when changing employers
  – Prevent unauthorized disclosures of medical information
  – Facilitate the exchange of medical information to improve the efficiency of care

• Civil and criminal penalties

• Pre-empted by more protective state law
The HIPAA Bogeyman

• Growing list of litigated cases
• Sets minimum protections; higher protections control
• Only applies to
  – Health Plans
  – Health Care Clearinghouses
  – Health Care Providers Performing Certain Electronic Transactions
    • Claims, enrollment, eligibility
    • Payment, premiums
    • Referrals, certifications, authorizations
• Where state law provides a higher level of privacy protection, it preempts HIPAA
Protected Health Information (PHI) Under the Privacy Rule

• Identifying information
  – Name
  – Address
  – SSN
• Past, present, or future condition
  – Mental
  – Physical
• Services/ treatment provided
• Payment
HIPAA: The End of Civilization as We Know It?
“It’s a baby. Federal regulations prohibit our mentioning its race, age, or gender.”
Privacy Rule Allows Disclosure Without Consent for the Public Good (§164.512)

1. Where required by law, e.g. judicial and administrative proceedings, mandated reporting (No Minimum Necessary Req.)
2. To public health authority, e.g. reporting STDs
3. Child abuse and neglect
Disclosure for the Public Good

4. Other victims of abuse, neglect, or domestic violence, where agency is authorized to receive information and

– Disclosure is required by law, and in accordance with law, or
– Individual agrees to disclosure, or
– Disclosure expressly authorized by statute/regulation and
  • The practitioner “in the exercise of clinical judgment” believes the disclosure is necessary to prevent serious harm to the individual or other potential victims, or
  • If individual is unable to agree because of incapacity, LE or other official represents that the info is not intended for use against the individual and failure to release would materially and adversely affect and immediate enforcement action
5. FDA reporting of adverse events, etc.
6. Report communicable disease to a person who may have been exposed, so long as authorized by other law
Disclosure for the Public Good

7. Employee Workplace Surveillance: may report PHI to employer if:
   • Physician is member of workforce or provides care (evaluation?) at the request of employer for medical surveillance or to evaluate for a work-related illness or injury; and
   • PHI consists of findings of work-related injury or illness; and
   • Employer needs the findings to comply with obligations under federal or state law (OSHA, Mine Safety); and
   • MD provides written notice to individual that it is disclosed to employer
Disclosure for the Public Good

8. Health Oversight Activities

- E.g., audits, civil and criminal investigations
- Not if the individual is subject of investigation, except if investigation relates to receipt of health care, claim for public benefit, qualification or receipt of public benefits, such as disability
Disclosure for the Public Good

9. Judicial and Administrative Proceedings
   • Court order
   • Subpoena or discovery request if
     • Requestor offers written statement with documentation that
       • There has been a good faith attempt to provide written notice to individual, and
       • Time to raise objections has lapsed and no objections filed
     • Qualified protective order
   • Provider notifies individual or seeks protective order
10. Law Enforcement

- Required by law, e.g. gunshot, other injury
- Warrant or process
- Administrative request for law enforcement
- Limited information for identification and location purposes, e.g. locating suspect, ID body
- Victims of crime, e.g. rape kit, if individual cannot consent
- Suspicious death
- Crime on premises of the practice
- Reporting crime in emergencies if necessary to alert LE to
  - Commission and nature of the crime,
  - Location of crime or victims, and
  - Identity, description, and location of perpetrator
Disclosure for the Public Good

11. Coroners and Funeral Directors
12. Cadaveric Organ, Eye, Tissue Donation
13. Research
Disclosure for the Public Good

14. Avert Serious & Imminent Health/Safety Threat

• May disclose or use PHI, consistent with applicable law and ethical standards, if good faith belief that it is necessary
  • To prevent or lessen serious and imminent threat to health or safety of a person or the public and disclosure is to a person/entity reasonably able to prevent or lessen the threat, including the target; or
  • For LE to identify or apprehend an individual (i) who escaped from lawful custody or (ii) statement by individual admitting participation in a violent crime reasonably believed to have caused serious harm to the victim

• Good faith of such disclosure is presumed
Disclosure for the Public Good

15. Specialized Government Functions
   • Military & veterans’ affairs
   • Separation and discharge from the military
   • National security and intelligence activities
   • Protective service for USSS protectees
   • State Department medical suitability determination
   • Medical care of inmates
   • Government programs providing public benefits, if expressly required or authorized by statute or regulation

16. Compliance with Workers’ Compensation Programs
HIPAA Violation Penalties

• No private cause of action (but might support other private action, including in state court)
• Enforcement by DHHS Office of Civil Rights
• Penalties
  – Civil (42 U.S.C. §1320d-5)
    • $100/violation; maximum $25,000 annually
    • No penalty if: punished criminally, lack of knowledge or reasonable diligence, result of reasonable cause rather than willful neglect and action taken within 30 days
HIPAA Violation Penalties

• Criminal penalties (42 U.S.C. §1320d-6)
  – Criminal Knowing violation by disclosure of PHI
    • Fine not more than $50,000, imprisonment not more than 1 year, or both.
    • If committed under false pretenses, fine of not more than $100,000, imprisonment for not more than 5 years, or both.
    • If with intent to sell, transfer, or use for commercial advantage, personal gain, or malicious harm: fine of not more than $250,000, imprisonment for not more than 10 years, or both.

• Implications for clinicians: beware what you do with your video and audio tapes.
State Statutes and Common Law

• Pettus v. Cole (57 Cal. Rptr.2d 46 (Cal.App. 1, 1996))
  – Employee sued employer and two psychiatrists who had examined employee re disability leave
  – Alleged:
    • Unauthorized release of medical information in violation of Confidentiality of Medical Information Act (CMIA)
    • Invasion of constitutional right of privacy
    • Breach of contract
    • Wrongful termination in violation of public policy
    • Unauthorized use of medical information
Pettus v. Cole (cont’d)

• Psychiatrists violated Confidentiality of Medical Information Act by giving employer (including supervisor) a detailed report of the psychiatric evaluation of an employee without the employee’s specific written authorization
Pettus v. Cole (cont’d)

• Employee raised a triable issue re violation of his right to privacy under the California Constitution by MDs

• Employer violated both the CMIA and the employee’s state constitutional rights to autonomy & privacy when it terminated his employment because of his refusal to comply with its demand that he enter an inpatient alcohol treatment program
So What Do We Do?

- HIPAA as setting minimal requirements
- Extension and acknowledgment of HIPAA standards likely
- Pay attention to jurisdictional requirements
- Prior to evaluating individuals
  - Know who will receive the report and adjust content accordingly
  - Oral warning and consent
  - Written permission to release report
  - Limit release of information on a “need to know” basis
Thank you!