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may also request a restriction of use and disclosure of PHI to family members and others identified by the individual as well as to public or private agencies authorized to carry out disaster relief activities. Hybrid affiliated covered entities of the university of Toledo (UToledo hybrid and ACE) reserve the right to grant or deny a request for restriction except in the following situation

- (a) Disclosure to a health plan for the purpose of payment or healthcare operations
- (b) The PHI pertains solely to a healthcare service for which the patient or another person other than the health plan has paid out of pocket and in full on behalf of the patient.

An individual's request for restriction must be granted in this event unless the restriction is prohibited by law.

(2) How to request a restriction

The request for restriction must be made by completing and submitting, within three calendar days of service, request for restrictions of protected health information (PHI) to the privacy officer (see the privacy policy for more information).



Approved by:

/s/

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Gregory Postel, MD  
President

Date: September 13, 2023

Review/revision completed by:

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Policies superseded by this policy

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Original effective date:

Review/revision date:

Next review date: