

**HACKETTSTOWN REGIONAL MEDICAL CENTER**

**Administrative Policy & Procedure  
Disclosures without Patient Authorization**

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<b>Effective Date:</b>	<b>April 2003</b>	<b>Policy No:</b>	<b>HIPAA-03</b>
<b>Cross Referenced:</b>		<b>Origin:</b>	<b>Compliance Officer</b>
<b>Reviewed Date:</b>	<b>10/08, 7/12</b>	<b>Authority:</b>	<b>Chief Operating Officer</b>
<b>Revised Date:</b>		<b>Page:</b>	<b>1 of 1</b>

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**PURPOSE:**

Under certain circumstances, Hackettstown Regional Medical Center (HRMC) uses and discloses a patient's PHI without first obtaining the patient's authorization. This policy does not apply to HRMC's uses and disclosures of HIV/AIDS Related Information, Genetic Information, Venereal Disease Information or Tuberculosis Information.

**POLICY:**

Hackettstown Regional Medical Center has adopted Adventist Health Care Inc. Policy AHC 4.5 <https://intranet.adventisthealthcare.com/policiesandprocedures/HRMC/Admin%20-%20Corporate/AHC%204.5%20HRMC.pdf>