Marsha Ford, MD, FACEP, FACMT  
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Dear Dr. Ford:

It has come to the Health Resources Services Administration’s (HRSA) attention that some confusion exists among health care providers as to whether health care providers who are covered entities under the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule may disclose certain protected health information to Poison Control Centers (PCCs), including HRSA PCC grantees. This letter seeks to provide assistance to HRSA PCC grantees by highlighting the HIPAA Privacy Rule provisions and preamble statements that directly address the issue of disclosing protected health information to PCCs for treatment activities.

Since the 1950s, PCCs have played a vital role in providing emergency phone consultations to the public and to health care providers. Through these consultations, they evaluate, triage, treat and monitor identified or questionable poisonings from newly-introduced household products, pesticides, pharmaceuticals, plants, insect bites, dietary supplements and many other sources. However, the PCCs cannot function adequately without the capacity to obtain patient information from health care providers. Since the HIPAA Privacy Rule went into effect, some PCCs have encountered problems with hospitals and health care providers who are unwilling to share protected patient information due to perceived barriers created by the HIPAA Privacy Rule.

The HIPAA Privacy Rule regulates how certain entities, called ‘covered entities,’ may use and disclose certain individually identifiable health information, called ‘protected health information.’ While covered entities generally need patient authorization before they can disclose protected health information, the Privacy Rule permits a covered entity to disclose protected health information for its own treatment purposes and for the treatment activities of another health care provider. (45 CFR § 164.506 (c)). Under the Privacy Rule, ‘treatment’ is defined broadly to include, ‘the provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider to another.’ (45 CFR § 164.501).

Further, the Preamble to the Privacy Rule specifically noted that ‘poison control centers are health care providers for purposes of the rule’ and that ‘counseling and follow-up consultations provided by poison control centers with individual providers regarding patient outcomes are considered to be treatment.’ (65 Fed. Reg. 82626 (Dec. 28, 2000)).
Thus, the HIPAA Privacy Rule permits covered entities to disclose protected health information to PCCs for treatment activities, including follow-up consultations.

Sincerely,

[Signature]

Joyce G. Somsak
Associate Administrator