I. 11.2.6 Uses and Disclosures of Protected Health Information to or from Personal Representatives

Chapter 11 - Patient Privacy	Original Effective Date: April 2003
Section: 11.2 Uses and Disclosures of Protected Health Information	Date Last Reviewed: September 2026
Responsible Entity: Chief Compliance and Privacy Officer	Date Last Revised: September 2026

II. Purpose

To outline requirements to authorize the use and disclosure of protected health information to or from a patient's designated Personal Representative.

III. Scope

This policy applies to all Workforce Members—including faculty, staff, students, healthcare providers, contractors, and researchers—who have direct or indirect access to Protected Health Information (PHI). This includes all PHI maintained by UT Health San Antonio and its controlled affiliates, such as clinics, hospitals, and research facilities. This policy does not address who may consent for treatment of a minor, see Institutional Handbook of Operating Procedures (IHOP) policy 11.1.9 Consent for Treatment of a Minor for guidance.

IV. Policy

As a general rule, minors, incapacitated and deceased patients must have a personal representative identified in order to provide authorization for use and disclosure of PHI.

A. Personal Representatives for Emancipated and Unemancipated Minors

1. If a patient is an emancipated minor, they do not require the consent of an adult and may consent to treatment and may provide authorization for release of their PHI (Court order of emancipation is required; see policy 11.1.9 Consent for Treatment of Minor).
2. If a patient is an unemancipated minor, a parent, guardian, or other person with legal authority will generally make health care related decisions for the patient. UT Health San Antonio must recognize such persons as the patient's personal representative.
3. However, if the parent, guardian or other person approves an agreement of confidentiality between UT Health San Antonio and the minor, UT Health is no

longer required to treat the parent, guardian or other person as the patient's personal representative.

4. If the minor does not require the consent of an adult and may consent to treatment, the minor will be treated as an individual and may provide authorization for release of PHI, if:
    a. The minor consents to such health care service; no other consent to such health care service is required by law, regardless of whether the consent of another person has also been obtained; and the minor has not requested that such person be treated as the personal representative;
    b. The minor may lawfully obtain such health care service without the consent of a parent, guardian, or other person who has the authority by law to act on the behalf of the individual, and the minor, a court, or another person authorized by law consents to such health care service.

B. Disclosure to Parent, Guardian, or Other Authorized Person

1. To the extent permitted by state or other law, UT Health San Antonio may disclose or provide access to PHI about an unemancipated minor to a parent, guardian, or other person who has the authority to act on behalf of the patient.
2. To the extent prohibited by state or other law, UT Health San Antonio may not disclose or provide access to PHI about an unemancipated minor to a parent, guardian, or other person who has the authority to act on behalf of the patient.
3. If the parent, guardian, or other person who has authority to act on behalf of the patient is not the individual's personal representative and if state or other law does not permit access, UT Health San Antonio may provide or deny access to such person, provided that such decision is made by a licensed health professional in the exercise of professional judgment.
4. See IHOP policy 11.3.6 Access of Individual to Protected Health Information for additional guidance.

C. Deceased Patients

Under applicable law, PHI generated during the life of a deceased patient may be used or disclosed to persons such as, an executor, administrator, or other person who has authority to act on behalf of a deceased patient or of the patient's estate. A covered entity must treat such person as a personal representative, unless doing so is inconsistent with any prior expressed preference of the patient that is known to UT Health San Antonio.

D. Abuse, Neglect, Endangerment Situations

UT Health San Antonio is not obligated to recognize an individual as the patient's representative if it believes that it is not in the best interest of the patient, and one of the following conditions exist:

1. The patient has been or may be subject to domestic violence, abuse, neglect by a parent, guardian or patient representative; or,

2. Treating such a person as the patient's representative could endanger the patient.

V. Definitions

Terms used in this document have the meaning set forth in the Patient Privacy Policies Glossary *unless a different meaning is required by context.*

VI. Related References

For questions regarding this policy, contact the Privacy Program Director at 210-567-2014 or compliance@uthscsa.edu.

VII. Review and Approval History

The approving authority of this policy is the University Executive Committee.

Effective Date	Action Taken	Approved By	Approved Date
04/2003	Policy Origination		
02/2016	Policy Revision		
01/2023	Policy Review	ICPO	01/04/2023
09/2026	Policy Revision	Executive Committee	09/21/2026