

Texas Tech University Health Sciences Center El Paso Institutional Compliance Procedure

Data Use Agreement Review	Policy: HPP 6.2 PRO
	Effective Date: June 15, 2016
References: 45 CFR 164.514(e)(3)(i), HPP 6.2 Data Use Agreement	
TTUHSC El Paso Institutional Compliance Website: http://elpaso.ttuhscc.edu/compliance/	

Procedure Statement

It is the policy of the Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) that all Data Use Agreements are reviewed by the Compliance Department prior to execution of the agreement.

In accordance with 45 CFR 164.514(e)(3)(i), TTUHSC El Paso will only use or disclose a limited data set for the purposes of research, public health, or health care operations.

Scope

This policy applies and will be distributed to all Texas Tech Physicians of El Paso (TTP El Paso) ambulatory clinics and research facilities.

Procedure

Definitions

Data Use Agreement: A Data Use Agreement (DUA) is a legal binding agreement between TTUHSC El Paso and an external entity (e.g., contractor, private industry, academic institution, other Federal government agency, or state agency), when an external entity requests the use of personal identifiable data that is covered by a legal authority, such as Health Insurance Portability and Accountability Act (HIPAA). The agreement delineates the confidentiality requirements of the relevant legal authority, security safeguards, and TTUHSC El Paso's data use policies and procedures. The DUA serves as both a means of informing data users of these requirements and a means of obtaining their agreement to abide by these requirements. An executed DUA is required prior to release of a limited data set.

Limited Data Set: A limited data set is protected health information that excludes the following direct identifiers of the individual or of relatives, employers, or household members of the individual.

Procedure

Prior to execution of a DUA, the responsible administrator will forward the agreement to the compliance department for review to ensure that the agreement is consistent with the rules described by the HIPAA.

It is the responsibility of the administrator responsible for the DUA to ensure compliance with all policy and procedure associated with the contract in process, i.e. HPP 6.2.

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The compliance department will review the agreement to ensure that the following elements are satisfactory described:

1. Establish the permitted uses and disclosures of such information by the limited data set recipient. The DUA may not authorize the limited data set recipient to use or further disclose the information in a manner that would violate the requirements of HIPAA;
2. Establish who is permitted to use or receive the limited data set; and
3. Provide that the limited data set recipient will:
 - a. Not use or further disclose the information other than as permitted by the data use agreement or as otherwise required by law;
 - b. Use appropriate safeguards to prevent use or disclosure of the information other than as provided for by the data use agreement;
 - c. Report any use or disclosure of the information not provided for by its data use agreement of which it becomes aware;
 - d. Ensure that any agents to whom it provides the limited data set agree to the same restrictions and conditions that apply to the limited data set recipient with respect to such information; and
 - e. Not identify the information or contact the individuals.
4. Assure that the limited data set excludes the following direct identifiers of the individual or of relatives, employers, or household members of the individual:
 - a. Names;
 - b. Postal address information, other than town or city, State, and zip code;
 - c. Telephone numbers;
 - d. Fax numbers;
 - e. Electronic mail addresses;
 - f. Social security numbers;
 - g. Medical record numbers;
 - h. Health plan beneficiary numbers;
 - i. Account numbers;
 - j. Certificate/license numbers;
 - k. Vehicle identifiers and serial numbers, including license plate numbers;
 - l. Device identifiers and serial numbers;
 - m. Web Universal Resource Locators (URLs);
 - n. Internet Protocol (IP) address numbers;
 - o. Biometric identifiers, including finger and voice prints; and
 - p. Full face photographic images and any comparable images.

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Upon completion of the review, the compliance department will provide a red lined and version to the responsible administrator and other involved persons.

Policy Number:	Original Approval Date:
Version Number:	Revision Date:
Signatory approval files by: Andrew G. Conkovich, MBA, CHC AVP – Institutional Compliance Officer Texas Tech University Health Sciences Center El Paso	

Frequency of Review

Review Date:

Revision Date: