

**Texas Tech University Health Sciences Center El Paso  
HIPAA Privacy Policies**

<b>Administration</b>	<b>Policy 7.4</b>
<b>Personal Representative Request</b>	<b>Effective Date: May 1, 2016</b>
<b>References:</b> <a href="http://www.hhs.gov/ocr/hipaa">http://www.hhs.gov/ocr/hipaa</a> TTUHSC El Paso HIPAA website: <a href="http://elpaso.ttuhscc.edu/hipaa/">http://elpaso.ttuhscc.edu/hipaa/</a>	

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**Policy Statement**

Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) recognizes that individual rights are a critical aspect of maintaining quality care and service and is committed to allowing individuals to exercise rights under the HIPAA Privacy Rule, and other applicable federal state and/or local laws and regulations. To support this commitment, TTUHSC El Paso will maintain and update, as appropriate, written policies and procedures to provide guidance on employee and organizational responsibilities regarding the rights of patients to identify/authorize individuals, telephone numbers, email addresses to receive verbal health information and/or to use for leaving messages regarding appointments and other general information regarding TTUHSC El Paso.

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**Scope and Distribution**

This policy applies to all health care clinical service areas owned and/or operated by TTUHSC El Paso. It does not apply to inmates seen or treated by TTUHSC El Paso.

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**Definitions**

Refer to [HPP 1.1](#) for Glossary of HIPAA Terms

See [Old/New HIPAA Policy Number Cross Reference Chart](#)

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**Procedure**

Patients will complete the TTUHSC El Paso [Personal Representative Request](#) (form (attachment A English and attachment B Spanish) at their initial visit to identify individuals to whom the patient is granting permission to receive protected health information (PHI) regarding the patient. Patients are not required to re-submit the form unless they are requesting changes to their information or the form has been updated.

Medical providers who are involved in the patient's care are not listed on this form.

Except as otherwise stated in 45 CFR 164.502(g), the Privacy Rule requires covered entities to treat an individual's personal representative as the individual with respect to uses and disclosures of the individual's protected health information as well as the individual's rights under the Rule. . Departments may release selected portions of the patient's medical record directly to the patient or authorized individual as requested by the provider (Ambulatory Care Policy 5.11 *Release of Health Record Information*).

## **Texas Tech University Health Sciences Center El Paso HIPAA Privacy Policies**

When requesting patient information, including appointment information, the identified individual(s) must be listed on the Personal Representative Request form and provide at least one of the following in order to verify relationship with the patient: patient's address, patient's date of birth, last four digits of the patients' Social Security number. Appointment information includes disclosure of an appointment or scheduling an appointment.

On the Person Representative Request form , the patient will also list telephone number(s) for which to leave messages (appointment information), as well as e-mail address(s) for the purpose of providing information about the on-line patient portal and general information about TTUHSC El Paso.

TTUHSC El Paso does not allow leaving PHI on telephone answering machines. See HPP 4.3 if a patient requests their PHI be sent via email and HPP 4.4 for leaving PHI on telephone messages.

This policy and procedure will be documented and retained for a period of 6 years from the date of its creation or the date when it last was in effect, whichever is later.

Knowledge of a violation or potential violation of this policy must be reported directly to the Institutional Privacy Officer or to the employee Compliance Hotline at (866) 294-9352 or [www.ethicspoint.com](http://www.ethicspoint.com) under Texas Tech University System.

### **Approval Authority**

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The TTUHSC El Paso Privacy and Security Committee have authority for HIPAA policy approval.

### **Responsibility and Revisions**

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Questions regarding this policy may be addressed to the [Institutional Privacy Officer](#), or the [Institutional Compliance Officer](#).

This policy may be amended or terminated at any time.

Attachment A: HPP 7.4 PRR English

Attachment B: HPP 7.4 PRR Spanish

Review Date: Sept. 30, 2016

Revision Date: July 5, 2016