

## Texas Tech University Health Sciences Center El Paso HIPAA Privacy Policy

<b>Policy:</b> Accounting of Disclosures of Protected Health Information (PHI)	<b>Policy #:</b> HPP 1.6
<b>Effective Date:</b> January 15, 2015	<b>Last Revision Date:</b> March 25, 2025
<b>References:</b> <a href="https://www.hhs.gov/hipaa/index.html">https://www.hhs.gov/hipaa/index.html</a>	
<b>TTUHSC El Paso HIPAA Privacy and Security Website:</b> <a href="https://ttuhscep.edu/hipaa/">https://ttuhscep.edu/hipaa/</a>	

### **Policy Statement**

Health Insurance Portability and Accountability Act (HIPAA) provides that individuals have the right to receive an accounting of certain instances when PHI (protected health information) about them is disclosed by a covered entity. This requirement is subject to exceptions for disclosures made to the individual for treatment, payment, health care operations, or authorized by the individual, as well as certain time-limited exceptions for disclosures to law enforcement and oversight agencies. Texas Tech University Health Sciences Center (TTUHSC El Paso) has developed policies and procedures to address instances when an accounting of disclosures of PHI must be provided.

### **Scope**

This policy applies to all health care clinical areas owned and/or operated by TTUHSC El Paso.

### **Policy**

1. Individuals have a right to receive an accounting of disclosures made by TTUHSC El Paso and its business associates of their protected health information.
2. When an individual requesting an accounting is also an employee, that individual must comply as outlined below. Employees should not access their family member's PHI. See HPP 1.5 (Access to Inspect).
3. The accounting for disclosures will include all instances where protected health information is disclosed, except:
  - Disclosures that were made for purposes of treatment, payment, and operations;
  - Disclosures that were incidental to a permissible use or disclosure;
  - Disclosures that were for the purposes of a limited data set;
  - Disclosures that were for a facility directory or to persons involved in the individual's care (disclosures that require an opportunity for the individual to agree or object);
  - Disclosures that were provided for national security or other intelligence purposes;
  - Disclosures to a correctional institution or made in a law enforcement custodial situation;
  - Disclosures that were made as a result of an authorization signed by the individual;
  - Disclosures that were made to the individual;
  - Protected health information that is (1) Subject to Clinical Laboratory Improvement Amendments of 1988, 42 USC §263a, to the extent the provision of

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access to the individual would be prohibited by law; or (2) Exempt from the Clinical Laboratory Improvement Amendments of 1988, pursuant to 42 CFR §493(a)(2).

4. For research disclosures- If the covered entity has made disclosures of PHI for a particular research purpose in accordance with the HIPAA Privacy Standards §164.512(i) (Specifically under the provisions for Waiver of Authorization by an Institutional Review Board or Privacy Board, Reviews Preparatory to Research, or Research on Decedents information) for 50 or more individuals, the accounting may provide:
- The name of the protocol or other research activity;
  - A description, in plain language, of the research protocol or other research activity, including the purpose of the research and the criteria for selecting particulars;
  - A brief description of the type of PHI that was disclosed;
  - The date or period during which such disclosure occurred, or may have occurred, including the date of last such disclosure during the accounting period;
  - The name, address, and telephone number of the entity that sponsored the research and of the researcher to whom the information was disclosed and;
  - A statement that the PHI of the individual may or may not have been disclosed for a particular research protocol or other research activity.

If the covered entity has made disclosures of PHI for a particular research purpose in accordance with HIPAA Privacy Standards §164.521(i) for less than 50 individuals, an accounting of disclosure is required for each patient that includes the date of the disclosure; the name of the entity or person who received the PHI and, if known, the address of such entity or person; a brief description of the PHI disclosed; and a brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure; or in lieu of a statement, a copy of a written request for a disclosure.

If the Institutional Review Board has authorized disclosures of greater than 50 persons for a study conducted under a waiver of authorization, a partial waiver of authorization, or the preparatory to research provisions and the “rule of 50” for the accounting of disclosures procedure(s) is not utilized, an accounting of disclosures is required for each patient whose records were accessed under the waiver of authorization, the partial waiver of authorization or the preparatory to research provisions.

If the rule of 50 is utilized, then the Office of Research must provide the individual a list of the approved studies in which his/her information may have been disclosed.

The accounting of disclosures will include; the name of the entity or person who received the PHI and, if known, the address of such entity or person; a brief description of the PHI disclosed; and a brief statement of the purpose of the

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disclosure that reasonably informs the individual of the basis for the disclosure; or in lieu of a statement, a copy of a written request for a disclosure.

5. **Suspension of Right to an Accounting:** An individual's right to an accounting disclosure of PHI may be suspended where a health oversight agency or a law enforcement official provides a statement that an accounting of disclosure to such agency or official would be "reasonably likely" to impede their activities. The suspension will only last for 30 days if the statement is made orally. A written statement is required for a longer time frame.
6. In cases of domestic or child abuse, if the request is by the individual's personal representative, and a reasonable belief is held that such person may be the abuser or accounting to such person could endanger the individual, TTUHSC EL Paso has the discretion to decline the request.
7. TTUHSC El Paso is not required to include an accounting of disclosures that were made incidental to another use or disclosure that is permissible under 45CFR part 164; however, to minimize incidental disclosures, TTUHSC El Paso will:
  - Take precautions to reasonably safeguard PHI as required by 45CFR§164.530(c)(1); and
  - Disclose only the minimum amount of PHI necessary to accomplish the intended purpose of the disclosure.

Example: Sign-in sheets and calling out names in waiting rooms are permitted; so long as the information disclosed is appropriately limited (e.g., the reason for the visit or patient diagnosis are not used).

8. **Request for Accounting Procedure.** An individual shall make the request for an accounting in writing to the Medical Record Department. The request should be made using a "Request for an Accounting of Certain Disclosures" form, which can be accessed by going to the HIPAA website at <http://elpaso.ttuhsc.edu/hipaa/forms.aspx>. TTUHSC El Paso will retain this request, along with a copy of the written accounting provided to the individual, as well as the name/departments responsible for completing the accounting. An individual will be able to request an accounting of disclosures six years prior to the date on which the accounting is requested, but not before April 14, 2003.
  - a. Upon receipt of the request for an accounting of disclosure the Medical Records Department will query the following departments to obtain any disclosure they may have made:
    - i. MPIP,
    - ii. Research,
    - iii. Any business associate that has been authorized to disclose records on our behalf, and
    - iv. The data warehouse group.
  - b. Information obtained from these areas will be included with the disclosures made by the medical records dep

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9. TTUHSC El Paso will act on the individual's request for an accounting not later than 60 days after receipt of the request by:
  - Providing the individual with the accounting requested no later than 60 days after receipt of the request; or
  - By informing the individual of an extension of time to provide the accounting of no more than 90 days after the receipt of the request.
10. Should an extension of time be needed to provide the accounting for disclosures of protected health information, TTUHSC El Paso will provide the individual with a written statement of the reason for the delay and the date by which the accounting will be provided. TTUHSC El Paso will not extend the time to provide the accounting more than once.
11. The covered entity must include disclosures of protected health information that occurred during the period requested by the individual, including disclosures to or by business associates.
12. For each disclosure, the accounting must provide the following:
  - Date;
  - Name and address (if known) of the entity or person receiving the protected health information;
  - A brief discussion of the PHI disclosed; and
  - A brief statement of the purpose of the disclosure that reasonably informs the individuals of the basis of the disclosure or in lieu of such statement:
    - A copy of the written authorization to use or disclose the PHI; or
    - A copy of a written request for disclosure is required from the Health and Human Services Secretary.
13. The first accounting to an individual in any 12-month period will be without charge. TTUHSC El Paso may impose a reasonable fee for each subsequent request for an accounting by the same individual within the 12-month period. Upon imposing a fee, TTUHSC El Paso will inform the individual in advance of the fee and provide the individual with an opportunity to withdraw or modify the request for subsequent accounting, in order to avoid or reduce the fee.

TTUHSC El Paso will document and retain the following for a period of at least six years, or from the date of its creation or the date when it was last in effect, whichever is later:

- The information required to be included in an accounting;
- The written accounting that is provided to the individual;
- The title of the persons or officer responsible for receiving and processing requests for an accounting by an individual.

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

### **Frequency of Review**

This policy will be reviewed each odd-numbered year (ONY) by the Institutional Privacy Officer, and the HIPAA Privacy and Security Committee, but it may be amended or terminated at any time.

Questions regarding this policy may be addressed to the Institutional Privacy Officer or Institutional Compliance Officer.

**Review Date:** 1/28/2025

**Revision Date:** 9/30/2016, 3/19/2019, 1/19/2021, 1/17/2023, 3/25/2025