

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

<b>Policy:</b> Designated Record Set	<b>Policy #:</b> HPP 1.8
<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**

To identify components of the patient's designated record set as required by the Privacy Regulations of the Health Insurance Portability and Accountability Act (HIPAA) as outlined in 45 CFR Parts, 160 and 164. The patient's designated record set will serve the underlying purpose of HIPAA, which is to provide the patient access to information on which care or payment decisions are being used. The designated record set will include records kept in any medium, i.e., paper or electronic.

### **Scope**

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

### **Policy**

TTUHSC El Paso has designated the following as components of its Designated Record Set:

#### 1. **Primary Medical Record**

Primary medical records are defined as the information needed for patient care, the unbiased chronological report of the patient's direct care/treatment in the health care facility generated by or at the request of a physician or other health care provider at TTUHSC El Paso, including but not limited to:

- Reports of relevant physical examination;
- Diagnostic and therapeutic orders;
- Clinical observations;
- Reports of procedures, tests, and results;
- Conclusions/plans at the termination of evaluation/treatment;
- Correspondence to or from health care providers;
- Prescription information.
- Other records that are used, in whole or in part, by or for the covered entity to make decisions about individuals.

#### 2. **Billing Records**

Billing records are defined as the information TTUHSC El Paso maintains in its electronic billing system, which relates to the activities conducted by TTUHSC El Paso to receive payment for the health care services it provides.

#### 3. **Exclusions from the Designated Record Set**

Secondary records are defined as information that is not part of the designated record set but may be filed in the physical medical record folder for convenience.

The records include, but are not limited to:

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- a. Copies of medical records/reports from another health care provider or institution that were sent to TTUHSC El Paso for consultation services (unless the records or reports were used to make decisions about the individual's care) or;
- b. Letters to and from the individual;
- c. Requests and correspondence from insurance companies not responsible for the payment of the individual's account;
- d. Correspondence to and from an attorney or record service;
- e. Correspondence/reports generated by clinic personnel sent out on behalf of and at the request of the individual;
- f. Audit, survey, or research information;
- g. Peer review information
- h. All other entries that are not part of the official health record, specifically that do not contain details of direct patient care/treatment made by TTUHSC El Paso workforce members in the regular course of business at or near the time treatment was provided.

This policy and procedure will be documented and retained for 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 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 on each odd-numbered year (ONY) by the Institutional Privacy Officer, and the HIPAA Privacy and Security Committee, but 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:** 3/14/2025

**Revision Date:** 5/1/2015, 9/30/2016, 4/15/2019, 1/19/2021, 3/21/2023, 3/25/2025