

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

<b>Policy:</b> Minimum Necessary Standard	<b>Policy #:</b> HPP 4.1
<b>Effective Date:</b> June 25, 2016	<b>Last Revision Date:</b> July 15, 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://my.ttuhscep.edu/elpaso/hipaa/">https://my.ttuhscep.edu/elpaso/hipaa/</a>	

### **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 their 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 guide employees on organizational responsibilities regarding using, disclosing, or requesting PHI to make reasonable efforts to limit PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure or request.

### **Scope**

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

### **Policy**

When using or disclosing PHI or when requesting PHI from another covered entity, TTUHSC El Paso will make reasonable efforts to limit to the minimum necessary to accomplish the intended purpose of the use, disclosure or request.

At TTUHSC El Paso, disclosure of PHI to the workforce shall be limited based on the workforce member's need to access PHI as required to perform their duties and responsibilities at TTUHSC El Paso. All access to PHI, whether it be electronic or hardcopy, must be limited to individuals who have a legitimate clinical or business need-to-know the information. Accessing or using more than is necessary to perform one's job responsibilities is prohibited.

Examples of minimizing use and disclosure:

- Computer screens should have privacy screens or facing away from unauthorized individuals;
- All lab and x-ray logs and documents should be stored in areas that are not visible or accessible to unauthorized individuals. Documents should be secured when not in use.

The Minimum necessary standard does NOT apply to the following:

1. Disclosures to or requests by a health care provider for treatment purposes;
2. Uses or disclosures made to the individual for treatment, payment or health care operations or as properly requested by the individual;

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3. Uses or disclosures made pursuant to an individual's authorization;
4. Disclosures made to the Department of Health and Human Services when disclosure of information is required under the privacy rule for enforcement purposes;
5. Uses or disclosures required by law or for compliance with other policies herein.

See HIPAA Minimum Necessary Standards 45 CFR 164.502(b), CFR 164.512, 164.514(d)

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 (ONY) by the Institutional Privacy Officer, and the HIPAA Privacy and Security Committee, but may be amended at any time.

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

**Review Date:** 7/9/2025

**Revision Date:** 3/21/2017, 11/19/2019, 3/16/2021, 5/16/2023, 7/15/2025