

University Physicians Inc.



ACCESS, USE AND DISCLOSURE OF PHI POLICY

Latest Revision:

Original Effective Date: April 4, 2003

Purpose

The purpose of this policy is to outline the general circumstances under which a UPI employee may access, use or disclose protected health information (PHI) under the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA).

Policy

Access, use and disclosure of PHI will be permitted for the purpose of Treatment, Payment, and Healthcare Operations (TPO).

Additional permissions may include but are not limited to:

- Providing PHI to the individual who is the subject of the PHI.
- Disclosures for research (see Research Requests for PHI Policy).
- Release of PHI to public health authorities who are legally authorized to receive such reports for the purpose of preventing or controlling disease, injury, or disability.
- Disclosures of PHI pursuant to an individual's authorization.

The "Minimum Necessary" (see Minimum Necessary Policy) principle shall apply to all access, use and disclosures of PHI.

Procedure

Given business responsibilities of UPI, access, use and disclosure of PHI will occur daily for the purpose of TPO. Employees will be assigned a PHI access level dependent on their responsibilities within the organization. Corresponding PHI justifications will be maintained describing routine uses and disclosures for each position or grouping of positions.

It is the responsibility of employees and management to comply with the "Minimum Necessary" principle. Routine access, use and disclosure of PHI should be evaluated on an ongoing basis for compliance with this principle.

Non-routine access, use and disclosure not covered under the scope of TPO should be brought to the attention of the Privacy Officer. Non-routine access, use and disclosures will be evaluated on an individual basis to determine compliance with HIPAA regulations.

Definitions See glossary for key terms and acronyms used in this policy.
(On file with Privacy Officer)

Enforcement Enforcement of this policy will reside with the Privacy Officer or appropriate Management.

**Rationale/
Source** This policy complies with requirements of the following:
Health Insurance Portability and Accountability Act (HIPAA), Privacy Rule

**Cross
References** For additional information, refer to the following:

Document Name
PHI Justification Matrix
Minimum Necessary Policy
Research Requests for PHI Policy

**Review or
Revision Date** This policy is reviewed and approved annually, and as revised.

MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY

Governance Responsibility for adoption and/or implementation of this policy is as follows:

Approving Body		Executive Approval	
Privacy Officer:	04/04/03	Chief Operating Officer:	04/04/03
Signature on file.	Date	Signature on file.	Date