

Section 3	Compliance Policies	00/00/03	- Effective
Subject 6.2	HIPAA: Privacy and Disclosure		- Revised
Policy 6.2.28	Accounting of Disclosures of PHI	Compliance Office	- Reviewed
			- Author

Accounting of Disclosures of PHI

Audience

The information in this document applies to all UTMB faculty, staff, students, volunteers, and any other contractors or agents granted access to Protected Health Information (PHI).

Policy

Upon request, UTMB shall provide individuals with an accounting of PHI disclosures made by UTMB in the six years prior to the request.

UTMB is not required to account for any disclosures that occurred prior to the compliance date of April 14, 2003.

UTMB must account for all disclosures of PHI, except for disclosures made for Treatment, Payment or health care Operations (TPO) or pursuant to a patient authorization. Additionally, UTMB will not account for disclosures made to referring physicians (physicians requesting consults or specialty procedures). Disclosures to referring physicians fall within the TPO exception.

Right to an Accounting of Disclosures

UTMB must provide the individual with a written accounting that meets the following requirements:

1. Except as otherwise provided, the accounting must include disclosures of PHI that occurred during the six years (or shorter time period if requested) prior to the date of the request. This includes disclosures to and by business associates for purposes other than TPO.
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Content Standards

1. The accounting for each disclosure must include:
 - a. The date of the disclosure;
 - b. The name of the entity or person who received the PHI and, if known, the address of such entity or person;
 - c. A brief description of the PHI disclosed; and
 - d. A brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure; or, in lieu of such statement a copy of a written request for a disclosure if any.
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Content for Research Disclosures

Disclosures for research purposes must be accounted for unless an authorization has been obtained from the individual. For research disclosures involving less than 50 individuals UTMB must account for the disclosure in accordance with the above requirements.

However, for larger research disclosures (more than 50 individuals) UTMB may provide a summary list of all protocols for which the patient's PHI may have been disclosed for research pursuant to a waiver of authorization. The summary list must provide:

1. The name of the protocol or other research activity;
2. A description, in plain language, of the research protocol or other research activity, including the purpose of the research and the criteria for selecting particular records;
3. A brief description of the type of PHI that was disclosed;
4. The date or period of time during which such disclosures occurred, or may have occurred, including the date of the last such disclosure during the accounting period;
5. The name, address, and telephone number of the entity that sponsored the research and of the researcher to whom the information was disclosed; and
6. A statement that the PHI of the individual may or may not have been disclosed for a particular protocol or other research activity.

If UTMB provides a summary accounting for research disclosures, and if it is reasonably likely that the PHI of the individual was disclosed for such research protocol or activity, UTMB shall, at the request of the individual, assist in contacting the entity that sponsored the research and the researcher.

Compliance Standards

1. UTMB must act on the individual's request for an accounting, no later than 60 days after receipt of such a request, as follows.
 - a. Provide the individual with the accounting requested; or
 - b. If UTMB is unable to provide the accounting within the time required above, UTMB may extend the time to provide the accounting by no more than 30 days, provided that:

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Compliance Standards (cont'd)

- A. UTMB, within the time limit of 60 days, provides the individual with a written statement of the reasons for the delay and the date by which UTMB will provide the accounting; and
- B. UTMB may have only one such extension of time for action on a request for an accounting.

UTMB must provide the first accounting to an individual in any 12-month period without charge. UTMB may impose a reasonable, cost-based fee for each subsequent request for an accounting by the same individual within the 12-month period, provided that UTMB informs the individual in advance of the fee and provides the individual with an opportunity to withdraw or modify the request for a subsequent accounting in order to avoid or reduce the fee. The fee schedule for these services is set by the State of Texas. To obtain the fee schedule contact [Health Information Management \(HIM\)](#).

Documentation for Accounting of Disclosures

UTMB personnel need to account for disclosures of PHI by documenting any such disclosures. Health Information Management (HIM) or its designee will account for disclosures in the release of information software.

HIM will be responsible for receiving and processing requests for an accounting of disclosures.

HIM must document and maintain a copy of the following:

1. The required information to be included in an accounting of disclosures, as outlined in the earlier section “Content Standards for the Accounting of Disclosure of PHI.”
2. The written accounting that is provided to the individual requesting an accounting of disclosures.

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Exceptions to the Right of Accounting of Disclosures

In accounting for disclosures of PHI, UTMB must temporarily suspend an individual’s right to receive an accounting of disclosures made to a health oversight agency or law enforcement official if such agency or official provides UTMB with a written statement that such an accounting to the individual would be reasonably likely to impede the agency's activities. The written statement must specify the time for which such a suspension is required.

If the agency or official suspends an individual’s right to receive an accounting of disclosures and the statement is made orally, UTMB must:

- Document the statement, including the identity of the agency or official making the statement;
- Temporarily suspend the individual’s right to an accounting of disclosures subject to the statement; and
- Limit the temporary suspension to no longer than 30 days from the date of the oral statement, unless a written statement from the suspending agency or official is submitted during the time period.

UTMB is not required to account for the following disclosures:

- To carry out TPO;
- To individuals requesting their own PHI;
- Incidental use or disclosure made during an otherwise permitted or required disclosure;
- Pursuant to an authorization;
- For a UTMB patient directory or to persons involved in the individual’s care or other notification purposes;
- For national security or intelligence purposes in accordance with IHOP 6.2.22;
- To correctional institutions or law enforcement officials in accordance with IHOP 6.2.23; or
- As part of a limited data set in accordance with IHOP 6.2.13.
- That occurred prior to the compliance date of April 14, 2003.

References

45 C.F.R. §164.528