



Accounting of Disclosures of Protected Health Information Policy

Policy #:	HP001.1
Policy Type:	University
Responsible Executive:	VP Academic Affairs
Responsible Office:	Academic Affairs
Originally Issued:	November 7, 2023
Latest Revision:	November 7, 2023
Effective Date:	November 7, 2023

I. Policy Statement

The University of Louisiana at Monroe’s Accounting of Disclosures of Protected Health Information Official Policy establishes the requirements to populate and provide an Accounting of Disclosures of Protected Health Information to all patients as required by the Health Insurance Portability and Accountability Act (HIPAA).

II. Purpose of Policy

To ensure that ULM, and their respective departments, understands the requirement to populate and provide an Accounting of Disclosures of Protected Health Information to all patients as required by the Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information (Privacy Standards), 45 CFR Parts 160 and 164, the Health Information Technology for Economic and Clinical Health Act (HITECH) component of the American Recovery and Reinvestment Act of 2009 (ARRA), and any and all other Federal regulations and interpretive guidelines promulgated thereunder.

III. Applicability

This policy is applicable to all faculty and staff.

IV. Definitions

Protected Health Information (sometimes referred to as “PHI”) – for purposes of this policy means individually identifiable health information, that relates to the past, present or future health care services provided to an individual. Examples of Protected Health Information include medical and billing records of the patient.

Authorization – A written document completed and signed by the individual that allows use and disclosure of PHI for purposes other than treatment, payment or health care operations.

Privacy Officer- person designated by ULM as the Privacy Officer

Disclosure or Release- the release, transfer, provision of access to, or divulging of information in any other manner outside ULM. The words “disclosure” and “release” have the same meaning for purposes of this policy.

V. Policy Procedure

Each ULM-affiliated facility must provide a written accounting of disclosures (AOD) of protected health information (PHI) to individuals that a facility has made during the six years prior to the date on which the accounting is requested. AODs do not need to be provided for any disclosures on or prior to April 13, 2003. Requests for an AOD must be made in writing or the verbal request must be documented.

A system must be in place for all departments, clinics and healthcare delivery locations associated with ULM to accurately and completely track all disclosures and have such information available for a minimum of six (6) years as required by the HIPAA Privacy Standards and this policy.

The right to request an AOD and the process for making a request must be outlined in the Notice of Privacy Practices.

PROCEDURE:

1.0 Rights of a Patient to an Accounting. A patient has the right to receive an accounting of the disclosures of Protected Health Information made by ULM for up to six (6) years prior to the date on which the accounting is requested, except for the following disclosures:

- To carry out treatment, payment and health care operations;
- To individuals of Protected Health Information about them;
- Incident to another permissible or required use or disclosure of PHI (e.g. overheard conversations)
- Pursuant to a valid HIPAA authorization;
- For a hospital's or health care facilities' directory;
- To persons involved in the patient's care;
- For national security or intelligence purposes;
- For notification purposes such as identifying or locating a family member, or personal representative to inform them of the patient's location, general condition or death;
- To correctional institutions or law enforcement officials as allowed in the HIPAA Privacy Regulations;
- As part of a limited data set;
- If the Protected Health Information was disclosed prior to the HIPAA compliance date, of April 14, 2003.
- Pursuant to and in compliance with a valid HIPAA authorization to disclose psychotherapy notes or PHI for marketing;

2.0 Suspension of Accounting.

2.1 Written Suspension:

ULM must temporarily suspend a patient's right to receive an accounting of disclosures to a health oversight agency or law enforcement official, for the time specified by such agency or official, if such agency or official provides ULM with a written statement that such an accounting to the individual would be reasonably likely to impede the agency's activities and specifying the time for which such a suspension is required.

2.2 Oral Suspension:

If ULM should receive the request orally, the Privacy Officer should:

- 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
- Limit the temporary suspension to no longer than 30 days from the date of the oral statement, unless a written statement is submitted during that time.

3.0 Content of the Accounting. The content of the accounting must be in writing and unless specific for a shorter time period, cover six (6) years prior to the date of the request, including to or by business associates of ULM. The accounting must include for each disclosure the following:

- The date of the disclosure;
- The name of the entity or person who receive 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 patient of their personal representative of the basis for the disclosure or, in lieu of such statement, a copy of the written request for disclosure, if any.

4.0 Multiple Disclosures. If, during the period covered by the accounting, ULM has made multiple disclosures or PHI to the same person or entity for a single purpose, the accounting may, with respect to such multiple disclosures, provide:

- The information listed in 3.0;
- The frequency, periodicity, or number of the disclosures made during the accounting period; and
- The date of the last such disclosure during the accounting period.

5.0 Research Disclosures. If, during the period covered by the accounting, ULM has made disclosures of PHI for a particular research purpose for 50 or more individuals, the accounting may, with respect to such disclosures for which the PHI about the individual may have been included, provide:

- The name of the protocol other research activity;
- A plain language description of the research protocol or other research activity, including the purpose of the research and the criteria for selecting particular records;
- A brief description of the type of PHI that was disclosed;
- 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;
- 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 patient may or may not have been disclosed for a particular protocol or other research activity.

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

6.0 Time Period for Responding to Accounting Requests. ULM shall provide the patient the requested accounting within 60 days from the date of receipt of such request or if ULM is unable to provide the accounting within this time frame they shall provide a written statement of the reasons for the delay and the date by which ULM shall provide the accounting. ULM can have only one such extension of time and can be no more than 30 days.

7.0 Fees for Second Accounting in Same Calendar Year. ULM must provide the first accounting to an individual in any 12 month period without charge. ULM 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 ULM inform the patient in advance of the fee and provide the patient with an opportunity to withdraw or modify the request for a subsequent accounting in order to avoid or reduce the fee.

VI. Enforcement

The Vice President of Academic Affairs will be responsible for enforcement of this policy.

VII. Policy Management

The Vice President of Academic Affairs will be responsible for management of this policy.

VIII. Exclusions

Any circumstances that might apply to excuse conformance with the policy.

IX. Effective Date

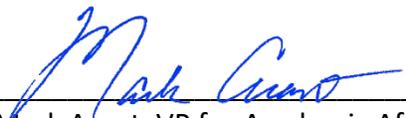
This policy will be in effect upon the date signed by the University President.

X. Adoption

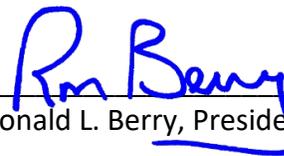
This policy is hereby adopted on this 7th day of November 2023.

Recommended for Approval by:

Approved by:



Dr. Mark Arant, VP for Academic Affairs



Dr. Ronald L. Berry, President

XI. Appendices, References and Related Materials

Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information (45 CFR Parts 160 and 164)
American Recovery and Reinvestment Act of 2009, Title XIII, Subtitles A&D

XII. Revision History

Original adoption date: November 7, 2023