



SAINT LOUIS UNIVERSITY

ACCOUNTING FOR DISCLOSURES

Policy Number: OUC-032

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Effective Date: 04/14/2003

Responsible University Official: Privacy Officer

Approved By: Executive Staff

Legal and Compliance Committee

1.0 INTRODUCTION

Saint Louis University (hereinafter the "University") is committed to provide services in compliance with all state and federal laws governing its operations, incorporating the highest levels of business and professional ethics. HIPAA's Privacy Rule includes a right to an "accounting of disclosures" listing of all disclosures of an individual's protected health information (PHI) made by the covered entity or its business associates for up to six years preceding the request. It may exclude disclosures made by the covered entity to carry out treatment, payment and health care operations.

2.0 PURPOSE

The purpose of this policy is to explain the procedures involved in HIPAA accounting for disclosures of patient protected health information.

3.0 PERSONNEL AFFECTED

This policy applies to all regular full-time and part-time faculty and staff and volunteers within all divisions of the University, including employees, professional staff members, residents, agents, representatives and consultants responsible for access to patients' protected health information.

4.0 DEFINITIONS

Authorization: A document that gives permission for a specific disclosure of protected health information. Authorizations typically include the name of the person or entity authorized to disclose, name of the person or entity authorized for use or disclosure, purpose of the disclosure, expiration of the authorization, and the patient's signature.

Protected Health Information (PHI): Any individually identifiable health information transmitted or maintained in any form or medium, including oral, written, and electronic. Individually identifiable health information relates to an individual's health status or condition, furnishing health services to an individual or paying or administering health care benefits to an individual. Information is considered PHI where there is a reasonable basis to believe the information can be used to identify an individual.

Treatment, Payment, and Health Care Operations (TPO): The functions of providing health care to patients. Treatment involves the administering, coordinating and management of health care services by the University for its patients. Payment includes any activities undertaken either by the University or a third party to obtain premiums, determine or fulfill its responsibility for coverage and the provision of benefits or to obtain or provide reimbursement for the provision of health care. Health Care Operations are activities related to the University's functions as a health care provider, including general administrative and business functions necessary for the University to remain a viable health care provider.

Workforce: Employees, volunteers, trainees, contractors, and other persons under the direct control of the covered entity, whether or not paid by the covered entity, who have access to confidential information.

5.0 POLICY

In general, patients have the right to receive an accounting of protected health information (PHI) disclosures made by Saint Louis University in the six years prior to the request. The University is not required to account for any disclosures that occurred prior to the compliance date of April 14, 2003. It must account for disclosures of PHI for occurrences other than Treatment, Payment or Health Care Operations (TPO). These require an authorization from either the patient or surrogate decision maker, however, referring physicians (physicians requesting consults or specialty procedures) will not require an authorization or accounting of disclosure of PHI. Disclosures for law enforcement purposes or required by statutory law do not need an authorization.

Overview

- (1) Patients have a right to receive an accounting of disclosures made for purposes other than treatment, payment, and health care operations, including disclosures by business associates. This right applies to disclosures that have been made up to 6 years prior to the date of a request for an accounting
- (2) For multiple disclosures to the same recipient pursuant to a single authorization under or for a single purpose, a summary may be provided of the series of disclosures of information required for the first disclosure in the series during the accounting period; the frequency, periodicity, or number of disclosures made during the accounting period; and the date of the most recent disclosure in the series.
- (3) In lieu of the statement of purpose, a copy of the individual's authorization or a copy of a written request for disclosure, if any, is sufficient.
- (4) Saint Louis University must provide a copy of an accounting of disclosure to the individual no later than 60 days after receipt of the request. Entries may be redacted from the disclosure log indicating disclosures to a professional liability carrier, health oversight agencies or law enforcement officials (for the time period specified by the

applicable agency or official if the agency or official makes such a request and provides the required statement).

- (5) If the 60-day deadline cannot be met, the deadline may be extended, by no more than 30 days, by informing the individual in writing, within the standard 60-day deadline, of the reason for the delay and the date by which the request will be provided. (The deadline may only be extended one time per request for accounting.)
- (6) Each accounting provided to a patient shall be tracked by indicating on a Disclosure Log the date of the accounting and the purpose of the disclosure.
- (7) The first accounting to an individual in any 12-month period must be provided without charge. After that, a reasonable cost-based fee may be charged if the patient is informed of the fee in advance and given an opportunity to withdraw or modify the request in order to avoid or reduce the fee.

6.0 PROCEDURES

Right to Accounting of Disclosure of PHI

Saint Louis University must provide the individual with a written accounting that meets the following requirements:

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.

Content Standards for the Accounting of Disclosure of PHI

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;
 - i. A copy of the individual's written authorization; or
 - ii. A copy of a written request for a disclosure if any
2. If Saint Louis University has made multiple disclosures of PHI to the same person or entity for a single purpose, or pursuant to a single authorization, the accounting may, with respect to such multiple disclosure, provide:
 - a. The information required above;

- b. The frequency or number of disclosures made during the accounting period; and
- c. The date of the last such disclosure during the accounting period

Compliance Standards

1. Saint Louis University 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 the University is unable to provide the accounting within the time required above, it may extend the time to provide the accounting by no more than 30 days, provided that:
 - i. Within the time limit of 60 days, it provides the individual with a written statement of the reasons for the delay and the date by which it will provide the accounting; and
 - ii. Only one such extension of time for action on a request for an accounting.
2. Saint Louis University must provide the first accounting to an individual in any 12-month period without charge. A reasonable charge may be imposed as a cost-based fee for each subsequent request for an accounting by the same individual within the 12-month period, provided that the University 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.

Documentation for Accounting of Disclosures

Saint Louis University personnel need to account for disclosures of PHI by documenting any such disclosures. The University will be responsible for receiving and processing requests for an accounting of disclosures and 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 above 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.

Exceptions to the Right of Accounting of Disclosures

1. In accounting for disclosures of PHI:

- a. Saint Louis University must temporarily suspend an individual's right to receive an accounting of disclosures to a health oversight agency or law enforcement official if such agency or official provides the University 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.
 - b. If the agency or official suspends an individual's right to receive an accounting of disclosures and the statement is made orally, Saint Louis University must:
 1. Document the statement, including the identity of the agency or official making the statement;
 2. Temporarily suspend the individual's right to an accounting of disclosures subject to the statement; and
 3. 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.
2. The University is not required to account for the following disclosures:
- a. To carry out TPO;
 - b. To individuals requesting their own PHI;
 - c. For the facility's directory or to persons involved in the individual's care or other notification purposes;
 - d. For national security or intelligence purposes;
 - e. To correctional institutions or law enforcement officials; or
 - f. That occurred prior to the compliance date of April 14, 2003.

8.0 SANCTIONS

Individuals who fail to comply with this policy and the procedures associated with it will be subject to disciplinary actions guided by the University's Staff Performance Management Policy, Faculty Manual, or Student Guidelines.

Non-compliance in this Policy can result in disciplinary action, including but not limited to, restricted incentive payments, suspension or termination. It may also result in the enforcement of a corrective action plan, as well as notification of the suspected misconduct and/or violation to government regulatory agencies.

This Policy does not limit the University's ability to impose greater sanctions or impose immediate action against serious violations. Disciplinary actions appropriate to the severity of the infraction will be carried out as needed.

9.0 CHANGES TO THIS POLICY

Changes to this policy may be necessary from time to time. At a minimum, the policy and all other program policies, procedures and guidelines will be reviewed on an annual basis.

REVISION HISTORY

EFFECTIVE DATE	VERSION NUMBER	MODIFICATION
4/14/2003	1.0	New Policy
7/01/2008	1.1	Review & Format Change
2/27/2015	1.2	Review & Format Change
	2.0	Ownership Shifted from Provost to General Counsel