

	PCHP HIPAA Privacy and Confidentiality Piedmont Community Health Plan	
	Name:	PCHP.PV.113 Uses and Disclosures of PHI - Minimum Necessary
	ID Number:	PCHP.PV.113
	Start Date:	02/02/2016
	Approval Date:	07/16/2016
	Review Date:	07/16/2018
	Approved By:	Garland Morton/CentraNotes

Body

Policy Name: Uses and Disclosures of PHI – Minimum Necessary

Scope: Entire Piedmont workforce

Purpose: To ensure that Piedmont's uses and disclosures of Protected Health Information (PHI) are limited to the minimum necessary to accomplish the intended purpose.

Definitions & Acronyms:

CMS: Centers for Medicare & Medicaid

CFR: Code of Federal Regulations

PBM: Pharmacy Benefit Manager

HIPAA: Health Insurance Portability and Accountability Act of 1996

HITECH: Health Information Technology for Economic and Clinical Health Act

PHI: Protected Health Information

Piedmont: "Piedmont" collectively refers to Piedmont Community Health Plan (PCHP), Piedmont Community HealthCare (PCHC) and any future entities that are owned, affiliated with and/or operated by Piedmont

Policy & Procedure:

1. Piedmont must make reasonable efforts to use or disclose, or to request from another health care provider, the minimum amount of PHI required to achieve the particular use or disclosure, unless an exception applies.
 - A. **Exceptions to minimum necessary requirements:** Piedmont will release information without concern for the minimum necessary standard as follows:
 - 1). Disclosures to or requests by a health care provider for treatment.
 - 2). Disclosures made to the individual who is the subject of the PHI.
 - 3). Uses or disclosures made pursuant to an authorization signed by the individual.
 - 4). Disclosures made to the Secretary of the Department of Health and Human Services (federal government).
 - 5). Disclosures that are required by law.
 - 6). Uses and disclosures that are required for compliance with the HIPAA Privacy Rule.
 - B. **Piedmont requests for PHI from another covered entity:** Piedmont must limit its request for PHI from other covered entities to the amount reasonably necessary to accomplish the purpose for which the request is made.
 - 1). For requests that are made on a routine and recurring basis, Piedmont will take reasonable steps to ensure that the request is limited to the amount of PHI reasonably necessary to accomplish the purpose for which the request is made.

- 2). For requests that are not on a routine or recurring basis, Piedmont will evaluate the request according to the following criteria:
 - i. Is the purpose for the request stated with specificity?
 - ii. Is the amount of PHI to be disclosed limited to the intended purpose?
 - iii. Have the requirements for supporting documentation, statements, or representations been satisfied?
 - iv. Have all applicable requirements of the HIPAA Privacy Rule been satisfied with respect to the request?
- C. All requests for non-routine disclosures or requests that do not meet an exception will be reviewed on an individual basis using standard criteria taking into consideration:
 - 1). The purpose and importance;
 - 2). Who is requesting the information;
 - 3). The extent of additional persons with access to the PHI;
 - 4). Other factors and information specific to each request.
2. Piedmont will identify people or classes of people in its work force who need access to PHI to carry out their duties, the category or categories of PHI to which access is needed, and any conditions appropriate to access.
3. Piedmont may use or disclose an individual's entire Medical Record only when such use or disclosure is specifically justified as the amount that is reasonably necessary to accomplish the intended purpose or one of the exceptions noted above. Requests for entire Medical Records that are not covered by an exception will be reviewed using standard criteria.
4. **Reasonable Reliance:** In certain circumstances, covered entities are permitted to rely on the judgment of the party requesting the disclosure as to the minimum amount of information that is needed. Such reliance must be reasonable under the particular circumstances of the request. Piedmont may rely on a requested disclosure as minimum necessary for the stated purpose(s) when the request is made by:
 - A. A public official or agency who states that the information requested is the minimum necessary for the stated purpose(s).
 - B. Another covered entity (health care provider, clearing house or health plan).
 - C. A professional who is a member of Piedmont's workforce or is a Business Associate of Piedmont for the purpose of providing professional services to Piedmont, and who states that the information requested is the minimum necessary for the stated purpose.
 - D. A researcher with appropriate documentation from an Institutional Review Board (IRB) or Privacy Board.

Equipment: None

Forms and Letters: None

Reference(s): 45 CFR § 164.502(b), 164.514(d)

Interdisciplinary Review: None

Policy History:

Date	Revision No.	Reason for Change	Sections Affected
04/14/2003	NEW		All
09/23/2013	1.0	<ul style="list-style-type: none"> • Updated policy to new format. 	All

		<ul style="list-style-type: none"> • Provided more detailed clarification and included changes/updates from the HIPAA Omnibus Rule effective 9/23/13. 	
02/02/2016	1.1	<ul style="list-style-type: none"> • Converted to Centra Format 	
07/12/2016	2.0	<ul style="list-style-type: none"> • Reviewed for compliance with Phase 2 Audit Protocol • Moved the procedure language into the policy section. • Eliminated redundant sections 	

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