

University of Colorado Health Sciences Center
HIPAA Policy

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I. Purpose, Reference, and Responsibility

A. Purpose

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

B. Reference

45 C.F.R. § 164.502(a) and § 164.506.

C. Responsibility

It is the responsibility of anyone who uses or discloses PHI in any capacity at UCHSC to follow this policy. This includes faculty, staff, students, trainees, volunteers, etc.

II. Applicability and Definitions

A. Applicability

This policy applies to uses and disclosures of PHI at UCHSC.

B. Definitions

Covered Entity (CE)
Health Care Operations
Health Care Provider
Health Insurance Portability and Accountability Act (HIPAA)
Organized Health Care Arrangement (OHCA)
Payment
Protected Health Information (PHI)
Treatment
University of Colorado Hospital (UCH)
University Physicians, Inc. (UPI)

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III. Policy

- A. Permitted Uses or Disclosures of Protected Health Information (PHI)
UCHSC faculty, employees, students, trainees, or volunteers are not permitted to use or disclose protected health information (PHI) except in the following circumstances:
- The individual who is the subject of the PHI, requests his/her own information;
 - For the treatment, payment or health care operations of UCHSC;
 - For the treatment activities of a health care provider (other than UCHSC); or,
 - For the payment activities of another covered entity or health care provider (other than UCHSC).
 - For activities listed below, if the covered entity (CE) and the UCHSC each have or had a relationship with the individual whose information is being used or disclosed to the CE and the information pertains to the relationship described above:
 - Use or disclosure is for the purpose of health care fraud and abuse detection or compliance;
 - Conducting quality assessment and improvement activities, including:
 - Outcomes evaluation and development of clinical guidelines, provided that the obtaining of generalizable knowledge is not the primary purpose of any studies resulting from such activities;
 - Population-based activities relating to:
 - Improving health or reducing health care costs
 - Protocol development
 - Case management and care coordination
 - Contacting of health care providers and patients with information about treatment alternatives;

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- Reviewing the competence or qualifications of health care professionals;
 - Evaluating practitioner and provider performance and health plan performance;
 - Conducting training programs in which students, trainees, or practitioners in areas of health care learn under supervision to practice or improve their skills as health care providers;
 - Training of non-health care professionals;
 - Accreditation;
 - Certification;
 - Licensing; or
 - Credentialing Activities
- Incidental disclosures that are incident to a use or disclosure otherwise permitted or required by this policy and provided that the UCHSC faculty, employee, trainee, student or volunteer has complied with the requirements of the [Minimum Necessary](#) and [Safeguard Policies](#).
 - Pursuant to a valid authorization from the individual who is the subject of the PHI to use or disclose the PHI and the use or disclosure is in accordance with the valid authorization
 - Pursuant to [Permitted Disclosures](#) Policy
 - As permitted by other applicable policies, including:
 - Uses or disclosures that do not require authorization or advance communication to the individual;
 - Uses or disclosures involving [limited data sets](#);
 - Uses or disclosures of PHI for [fundraising](#);
 - Uses or disclosures for underwriting and related purposes.
 - To UCH or UPI for any health care operations of the organized health care arrangement (OHCA)

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B. Required Disclosures of Protected Health Information (PHI)

The UCHSC is required to disclose protected health information to --

- An individual who is the subject of the PHI, when his or her request complies with [Right to Access and Copy](#) and [Right to an Accounting](#).
- The Secretary of Health and Human Services for purposes of investigating or determining the UCHSC's compliance with HIPAA privacy requirements.