

University of Colorado Health Sciences Center
HIPAA Policy

Policy:	3.2	Latest Revision: 02/26/03
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I. Purpose, Reference, and Responsibility

A. Purpose

The purpose of this policy is to document the limited circumstances under which UCHSC may use or disclose an individual's PHI without first obtaining a valid authorization from that individual.

B. Reference

45 C.F.R. § 164.508.

C. Responsibility

It is the responsibility of every member of the UCHSC workforce who uses or discloses PHI to ensure that he or she has either obtained a valid authorization from the individual to do so or that the use or disclosure of the PHI falls under one of the activities outlined under this policy for which an authorization is not required.

II. Applicability and Definitions

A. Applicability

This policy shall apply to all members of the UCHSC workforce who use or disclose PHI for whatever purpose.

B. Definitions

Authorization
Health Care Operations
Payment
Protected Health Information (PHI)
Treatment

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Workforce

III. Policy

A. General

No member of the UCHSC workforce shall use or disclose an individual's PHI without first ensuring that a valid authorization permitting such use or disclosure has been obtained except as defined herein.

There are limited circumstances under which a valid authorization is not required and use or disclosure of PHI may occur without the written permission of the individual. These circumstances are limited to the following:

1. The PHI is being disclosed to the individual who is the subject of the PHI. (i.e. the patient may receive his or her own PHI without an authorization)
2. The PHI is being used or disclosed for the purpose of treatment, payment or health care operations;
3. An authorization, consent, or other legal permission was obtained prior to April 14, 2003;
4. The use of disclosure of PHI is:
 - a. Required by state or federal law or valid court order (a subpoena is insufficient);
 - b. For law enforcement purposes or specialized government functions that have been determined to be appropriate by the Office of University Counsel;

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- c. Relating to victims of crime, abuse, or domestic violence pursuant to UCHSC HIPAA policy;
- d. For judicial or administrative proceedings as long as such use or disclosure has been approved in advance by the Office of University Counsel;
- e. For Public Health Activities pursuant to UCHSC HIPAA policy;
- f. For Health Oversight Activities pursuant to UCHSC HIPAA policy;
- g. In order to assist disaster relief agencies pursuant to UCHSC HIPAA policy;
- h. About a decedent and is disclosed to coroners, medical examiners, funeral directors and organ procurement organizations;
- i. To avert a serious and imminent threat to health or safety;
- j. For Workers' Compensation;
- k. For research purposes that have been granted a waiver of authorization by COMIRB, or have been certified as appropriate under a review preparatory to research or a decedent research situation); or,
- l. As a limited data set pursuant to a data use agreement as provided in UCHSC HIPAA policy.