

UNIVERSITY OF PITTSBURGH POLICY 07-02-03

CATEGORY: PERSONNEL
SECTION: Confidentiality of Medical Information
SUBJECT: Minimum Necessary Standard for the Use and Disclosure of Protected Health Information
EFFECTIVE DATE: Revised September 23, 2013
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I. POLICY

It is the policy of the University of Pittsburgh to comply with the Health Insurance Portability and Accountability Act (HIPAA) rule, as amended, pertaining to minimum necessary standards and uses of PHI and any applicable related state laws that are not preempted by HIPAA. The HIPAA Privacy Regulations can be located at 45 CFR Parts 160 and 164 or at <http://aspe.hhs.gov/admsimp/final/PvsTxt01.htm>.

II. REQUIREMENTS

1. The University shall limit access and use of PHI to only those persons or classes of persons, as appropriate, who need such access to carry out or perform their job responsibilities.
2. Each Covered Component as defined and designated in Policy 07-02-01 within the University shall identify the category or categories of PHI which these individuals need access to along with any conditions appropriate to such access.
3. All disclosures of PHI shall be limited to the amount reasonably necessary to achieve the purpose of the disclosure.
4. The University shall be entitled to rely (if reasonable under the circumstances) on a requested disclosure as the minimum necessary for the stated purpose when:
 - a) making permitted disclosures to public officials if such official represents that the information requested is the minimum necessary;
 - b) the information is requested by another "Covered Entity" (as defined in the privacy regulations at 45 C.F.R. §160.103);
 - c) the information is requested by a professional or a University Business Associate for the purpose of providing professional services to the University, provided they represent the information being requested is the minimum necessary; or
 - d) representations that comply with the requirements of 45 C.F.R. §164.512(l) have been provided by a person requesting the information for research purposes.
5. The University shall only request information that is reasonably necessary to accomplish the purpose of the request.
6. The University shall use reasonably necessary efforts to secure and maintain the confidentiality of PHI, regardless of form or media.

III. RESPONSIBILITY

It shall be the responsibility of each Covered Component to implement processes and procedures to meet the requirements set forth in this policy based on the Component's unique systems and processes.

IV. NON-COMPLIANCE

An employee's failure to abide by this policy may result in disciplinary action up to and including termination of employment.