Accounting for Disclosures

Yale must account for all known disclosures of protected health information outside the covered entity with certain exceptions.

Disclosure Exceptions

An accounting is not required for disclosures:

- made to carry out treatment, payment, or operations
- to the patient or the patient’s personal representative
- that are incidental disclosures made in connection with a use or disclosure otherwise permitted or required by HIPAA
- made to persons involved in a patient’s care or as part of an inpatient directory
- pursuant to an authorization for release of information signed by the patient or patient’s personal representative
- for national security or intelligence purposes
- to correctional institutions or law enforcement officials under certain circumstances
- as part of a limited data set, when the recipient has executed a data use agreement, disclosed for research, public health, or certain health care operations purposes
- that occurred prior to April 14, 2003

Under Connecticut law, a requested accounting of all disclosures of HIV-related information must be provided to the patient or personal representative, except those disclosures that are made to:

- A federal, state, or local health officer when required or permitted by law.
- Persons reviewing information or records in the ordinary course of ensuring that a health facility is in compliance with applicable quality of care standards, program evaluation, program monitoring or service review.
- Life and health insurers, government payers and health care centers in connection with underwriting and claim activity for life, health, and disability benefits.

Disclosures that Commonly Qualify for Accounting

An accounting is required if the disclosure is made and no authorization from the patient or patient’s personal representative is obtained:

- In response to a subpoena or other judicial or administrative proceeding if not accompanied by a patient authorization.
• For public health activities, including reports of vital events, public health surveillance, and investigations; communicable disease; adult and child abuse, neglect, or domestic violence; information associated with an FDA-regulated product or activity; and disclosures to an employer to conduct an evaluation relating to medical surveillance of the workplace or to evaluate whether the individual has a work-related illness or injury (and in addition, the employer needs such information to comply with federal or state law, and notice has been given to the individual at the time care is provided or there is a notice at the work site.

• For health oversight activities or law enforcement purposes unless the health oversight or law enforcement agency has provided an official statement to temporarily suspend the individual’s right to receive an accounting for a specified period of time during which such an accounting would impede the agency’s activities.

• To coroners, medical examiners, funeral directors, and for cadaveric organ donation purposes.

• To avert a serious threat to health or safety and for specialized government functions except national security and intelligence activities and correctional institutions or other law enforcement custodial situations.

• For workers’ compensation purposes pertaining to treatment of potential work-related injuries.

• For research purposes on decedents

• For research purposes if a waiver of authorization has been obtained from an IRB

• In error as a result of a misdirected fax, e-mail, postal mail, etc.

• By a Business Associate who has notified Yale of the disclosure event.

Logging Disclosures

Disclosures that qualify for accounting must be logged as they occur in the Accounting of Disclosures Log (Exhibit 5003 EX.A) that is filed in the patient’s medical record if paper and/or an electronic equivalent, e.g. Central Database or Epic disclosure log. Logs may be email to hipaa@yale.edu for entry into the centralized database. Disclosure made through Epic should be logged in Epic as described in the Epic Quick Disclosure Workflow Bulletin (attached).

In the event an accounting of disclosures is requested in writing by the patient or their Personal representative, Yale must provide an accurate accounting of all disclosures that qualify and that fit the criteria the patient has indicated in their request, i.e. date range.

Multiple Disclosures to the Same Person or Entity for a Single Purpose

If, during the relevant accounting period, multiple disclosures of the patient’s PHI have been made (1) to HHS for the purpose of determining Yale’s compliance with the Privacy Rule or (2) to the same person or entity for a single purpose, and the purpose is:

• Required by law
• For a public health or health oversight activity
• To report abuse, neglect or domestic violence
• For judicial and administrative proceedings
• For law enforcement purposes
• To a medical examiner or funeral director
• For organ and tissue donation
• For research that does not require individual Authorization
• To avert a serious threat to health or safety
• For specialized government functions; or
• To comply with laws relating to workers’ compensation;

Then the Accounting for Disclosures Log and Response forms may provide:

• For the first such disclosure, the date of the disclosure, the name and address of the organization or person to whom the disclosure was made, a brief description of the PHI disclosed and the purpose of the disclosure.
• The frequency, periodicity or number of additional disclosures made during the accounting period and the date of the last such disclosure during the accounting period.

**Disclosures of PHI of 50 or More Individuals for a Particular Research Purpose**

If, during the relevant accounting period, Yale has disclosed, for a particular research purpose which does not require individual Authorization, the PHI of fifty or more individuals, and PHI about the patient may have been included in the disclosure(s):

- The Accounting for Disclosures Log and Response forms may provide the name of the protocol or other research activity, a description of the research protocol or activity (including the purpose of the research and the criteria for selecting particular records), a description of the type of PHI disclosed, the date or period of time during which the disclosures occurred (including the date of the last disclosure during the accounting period), the name, address and telephone number of the research sponsor and of the researcher, and a statement that the PHI of the patient may or may not have been disclosed for a particular research protocol or activity.

- If it is reasonably likely that the patient’s PHI was disclosed for the research protocol or activity, Yale will, at the patient’s request, assist in contacting the research sponsor and the researcher.

**Request for Accounting of Disclosures**

Patients (or their Personal Representatives – see Yale Policy 5038 - Personal Representatives) may request an accounting of disclosures by submitting a request in writing using the Request for Accounting of Disclosures of Protected Health Information form, or other sufficient written documentation requesting the information, to their treating department or to the HIPAA Privacy Office.

The request should state the time period for which the accounting is to be supplied, which may not be longer than six years. If no time period is stated, Yale should contact the patient for clarification; or if the patient cannot be reached, assume that the time period for the request is six years from the date of the request.

The request should state whether the patient wishes to be sent the accounting via postal mail, fax or if they will pick it up in person.

**Suspensions of Accounting**

In some cases, a health oversight agency or law enforcement official may request that Yale suspend a patient’s right to receive an accounting of the disclosures made to that agency or official. Contact the Yale Privacy Officer to determine if a portion of or the entire medical record is under suspension. If no such suspension exists, continue with the procedures under Processing a Request for Accounting, otherwise, the following procedures must be followed.

**Written Suspension Request.**

The agency or official must present to Yale a statement, in writing, that providing the patient with an accounting of disclosures made to the agency or official would be reasonably likely to impede the agency or official’s activities. This statement must also specify how long the suspension will be required.

- During the period of suspension, Yale staff must prepare the accounting list requested by the patient, but exclude any disclosures that were made to the agency or official. Do not notify the patient that these disclosures were excluded.

- When the suspension period is over, Yale staff must record the disclosures made to the agency or official in an accounting for the patient in the Accounting of Disclosures Log.

**Oral Suspension Request.**

If the agency or official asserts that there is insufficient time to prepare a written statement, Yale staff may grant a suspension for 30 days based on the agency or official’s oral representation that suspension is needed for the reasons above (in person or on the telephone).

A Yale staff member must document that the agency or official in person or on the phone made these statements. The staff member must also record the identity of the agency or the official.
After 30 days, the Yale staff must record the disclosures made to the agency or official in an accounting for the patient in the Accounting of Disclosures Log, unless the agency or official has provided a written statement seeking further suspension. The agency’s written statement must meet the requirements explained above about why the suspension is necessary and how long it will last.

**Processing a Request for Accounting**

Contact the Yale Privacy Officer to determine if the patient's designated record set is under suspension, as described in the section on Suspensions of Accounting.

Contact the Yale Privacy Officer to determine if any other disclosures of the patient's designated records set were reported, e.g. University-wide or from Business Associates.

Review the Accounting of Disclosures Log and/or electronic equivalent to determine whether there are disclosures applicable to the time period for which an accounting is being requested.

Complete the Accounting for Disclosures Response form to supply:

- the date(s) of disclosure(s),
- the name(s) and address(es) of organizations or persons to whom the disclosure(s) were made,
- a brief description of the protected health information disclosed,
- the purpose of the disclosure(s),
- the name and title of the information privacy official responsible for receiving and processing requests for accounting of disclosures
- the date the Form was mailed.

The Accounting for Disclosures Response form must be sent to the patient within 60 days of receiving the request. If an extension is required, send the Accounting for Disclosures Response form to the patient indicating a 30 day extension is needed to complete the process. Indicate the date that the accounting will be sent and check off the reason for the delay. Use the same Form to record any extension request as well as the final accounting for that patient.

Distribute copies of the Accounting for Disclosures Response form as follows:

1. One copy is mailed to the patient or the patient's Personal Representative
2. Original is filed or scanned in the patient's medical record]

These documents must be retained for a period of six years from the later of the date each is created or was last in effect.

Notify the Yale Privacy Officer that a request for an Accounting of Disclosures was completed, and provide the patient's name.

Yale will provide the first accounting to a patient in any 12-month period without charge. For any subsequent request within the 12-month period, we will charge a reasonable, cost-based (i.e. supplies, labor, postage) fee. The patient must be informed of the fee in advance and provided with an opportunity to withdraw or modify the request for a subsequent accounting in order to avoid or reduce the fee.
Recording Disclosures of Patient Information

One of the significant advantages to MyChart is that a patient can access their own medical records. Information like immunization summaries and medication reports are easily accessible. However, there may be patients that are not using MyChart and may ask for information about their medical records while visiting for an appointment. You can quickly document releases of patient information using the Quick Disclosure activity. With just a few clicks a physician or nurse can document this request within Epic. This workflow also complies with HIPAA requirements and organizational policies regarding disclosures of patient information.

Before you start

1. Open the chart of the patient whose information you wish to release information on.
2. Once the chart is open, click the “Chart Review” activity from the left pane.
3. With the Chart Review activity open, you can select any of the tabs to display the specific items for that category that you wish to release. For example, if I wanted to release an Immunization Report, you could select the tab that reads “Misc Report” to display an option for an immunization summary to release.
4. Once you find that item that you wish to release, double-click on that item.
5. Double-clicking on the item will open it up in a “Report Viewer” activity. Click the print icon on the toolbar. The general print dialog will appear and then click the “Print” button.

Record a Disclosure

Following the steps above will launch the “Quick Disclosure” form that can be used to document the information that you are releasing.

1. In the Purpose field, select the reason for the release.
2. In the Info released field select the type of information that was released.
3. Indicate who the information was released to and fill in the **Name** and **Address** fields as necessary.

4. Indicate whether you received authorization. For example, if a patient requests her immunization records during a visit, you would click **Yes** because you received her verbal consent.

5. If necessary, you may make a comment to provide further explanation.

6. Click **Accept**

The official version of this information will only be maintained in an on-line web format. Any and all printed copies of this material are dated as of the print date. Please make certain to review the material on-line prior to placing reliance on a dated printed version.