

**LOUISIANA STATE UNIVERSITY
HEALTH CARE SERVICES DIVISION
BATON ROUGE, LA**

POLICY NUMBER: 7513-25

CATEGORY: HIPAA Policies

CONTENT: Use and Disclosure of Protected Health Information for Treatment, Payment, and Health Care Operations

APPLICABILITY: This policy to the Health Care Services Division Administration and Lallie Kemp Medical Center to include employees, physicians, practitioner practices, vendors, agencies, business associates, and affiliates.

EFFECTIVE DATE:

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INQUIRIES TO: HCSD
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Note: Approval signatures/titles are on the last page

**LSU HEALTH CARE SERVICES DIVISION
USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION FOR
TREATMENT, PAYMENT, AND HEALTH CARE OPERATIONS**

I. STATEMENT OF POLICY

All facilities and providers of the LSU Health Care Services Division (HCSD) should follow the requirements of the HIPAA Privacy Regulations when using or disclosing Protected Health Information as outlined in this policy to carry out treatment, obtain payment for services, or to conduct certain health care operations.

Note: Any reference herein to HCSD also applies and pertains to Lallie Kemp Medical Center.

II. PURPOSE

To provide guidance to the health care facilities and providers affiliated with HCSD regarding the requirements of the Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information (HIPAA Privacy Regulations), and any other applicable state or Federal laws or regulations for using and disclosing Protected Health Information to carry out treatment, obtain payment or conduct health care operations.

III. IMPLEMENTATION

This policy and subsequent revisions to the policy shall become effective upon approval and signature of the HCSD Chief Executive Officer (CEO) or Designee.

IV. DEFINITIONS

- A. **Protected Health Information (sometime referred to as “PHI”)** – for purposes of this policy means individually identifiable health information held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. Includes demographic data that relates to:
1. The individual’s past, present or future physical or mental health or condition;
 2. The provision of health care to the individual; or
 3. The past, present, or future payment for the provision of health care to the individual, and that identified the individual or for which there is a reasonable basis to believe it can be used to identify the individual. PHI includes many common identifiers such as name, address, birth date, social security number, etc.

- B. **Covered Entity** – A health care provider, health care clearinghouse, or health plan.
- C. **Organized Health Care Arrangement (OHCA)** – A clinically integrated care setting in which individuals typically receive health care from more than one health care provider. An example is a hospital setting where physicians are on staff at the hospital.
- D. **Designated Record Set** – A group of records maintained by or for the Facility that is:
1. The medical records and billing records about individuals maintained by or for the Facility;
 2. Any records used, in whole or part, by or for the Facility to make decisions about individuals; or
 3. Any record which meets this definition of Designated Record Set and which is held by a HIPAA Business Associate of the Facility is part of the Designated Record Set.
 - a. The term *record means* any item, collection, or grouping of information that includes PHI and is maintained, collected, used or disseminated by or for the Facility.
 - b. The term *record* also includes patient information originated by another health care provider and used by the Facility to make decisions about a patient.
 - c. The term *record* includes tracings, photographs, and videotapes, digital and other images that may be recorded to document care of the patient.
- E. **Psychotherapy Notes** – means notes recorded by a health care provider who is a mental health professional documenting or analyzing the contents of a conversation during a private counseling session or a group, joint or family counseling session and that are separated from the rest of the individual's record. Psychotherapy notes does not include medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests, and any summary of the following items: diagnosis; functional status; the treatment plan; symptoms; prognosis; and progress to date.
- F. **Privacy Officer** – Person designated by the Facility as the Privacy Officer.

V. PROCEDURE

The Facility may use and disclose PHI in the following scenarios **without** an individual's signed authorization.

- A. The Facility may use or disclose a patient’s PHI for its own treatment, payment, or health care operations.
- B. The Facility may disclose PHI for **treatment** activities of a health care provider [Note: The health care provider need not be considered a “covered entity” under HIPAA].
- C. The Facility may disclose PHI to another Covered Entity or a health care provider for the **payment** activities of the entity that receives the information.
- D. The Facility may disclose PHI to another Covered Entity for **Health Care Operations** activities of the entity that receives the information, if:
 - 1. Each entity either has or had a relationship with the patient who is the subject of the PHI being requested;
 - 2. The PHI pertains to such relationship;
 - 3. The disclosure is for the following health care operations purposes only
 - a. 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; and related functions that do not include treatment or
 - b. Reviewing the competence or qualifications of health care professionals, evaluating practitioner and provider performance, 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; and
 - 4. The disclosure is for the purpose of health care fraud and abuse detection or compliance.
- E. If the Facility participates in an Organized Health Care Arrangement (OHCA) the Facility may disclose PHI about an individual to another covered entity that participates in the OHCA for any health care operations activities of the OHCA. The restrictions noted in Section V(D)(3) do not apply.

- F. The uses and disclosures included in Section V(A-E), for purposes of Payment and Health Care Operations, above are subject to the Minimum Necessary Standard.
- G. The Facility must have appropriate administrative, technical, and physical safeguards in place to protect the privacy of PHI from any intentional or unintentional use or disclosure that is in violation of the HIPAA Privacy Regulations.
- H. The Facility must reasonably safeguard PHI to limit incidental uses and disclosures made pursuant to an otherwise permitted or required use or disclosure.

VI. EXCEPTION

The HCSD CEO or designee may waive, suspend, change or otherwise deviate from any provision of this policy he or she deem necessary to meet the needs of the agency as long as it does not violate the intent of this policy, state and/or federal laws, Civil Service Rules and Regulations, LSU Policies/Memoranda, or any governing body's regulations.

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