

WEBER HUMAN SERVICES	Policy & Procedure	NUMBER 08
	HIPAA / PRIVACY ACCOUNTING OF DISCLOSURES OF PHI	APPROVED 2/21/2014
		REVIEWED 5/11/2017
		REVISED

PURPOSE:

Clients have the right to receive an accounting of the disclosures of their Protected Health Information (“PHI”) maintained in their Designated Record Set. The following is the process for responding to a client’s request for an accounting of disclosures of their PHI made by the Facility.

POLICY:

Each client may request and receive an accounting of trackable disclosures of PHI made by the Facility. The potential areas where accounting of disclosures applies are listed in the *Notice of Privacy Practices*. The Facility will provide such an accounting, in accordance with the HIPAA Privacy Rule, when requested by a client or a client’s personal representative. The requested information will not include PHI released or disclosed on or prior to April 13, 2003.

Records of disclosures are retained for a six-year period.

PROCEDURE:

1. Upon receiving an inquiry from a client, the Privacy Officer provides the client or personal representative with a copy of a *Request for an Accounting of Disclosures of PHI (“Request”)* form. (See sample *Request* form following this Policy.) Requests are not evaluated until the *Request* form is completed and signed by the client or personal representative.
2. The Privacy Officer, or designee reviews and processes the request.
3. The Facility provides a written accounting no later than 60 days after receipt. If the Facility is unable to meet the 60-day time frame, the Facility may extend the time once by no more than 30 days as long as the individual is provided with a written statement of the reasons for the delay and the date by which the Facility will provide the accounting.
4. A written accounting is provided to the requestor using the *Accounting of Disclosures* log.
 - a. The accounting will include disclosures during the period specified by the client or personal representative in the request. The specified period may be up to six years prior to the date of the request. Disclosures made on or before April 13, 2003 will not be included in the accounting.

- b. The Facility will include known disclosures made by its Business Associates, if aware of any such disclosures required to be included in an accounting.
 - c. For each disclosure, the accounting will include:
 - i. Date the request for disclosure was received;
 - ii. Name of entity requesting disclosure and, if known, the address of such person or entity;
 - iii. A brief description of the PHI that was disclosed; and
 - iv. A brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure.
 - d. If there are multiple disclosures for health oversight or law enforcement officials for a single purpose, the Facility may provide:
 - i. The first disclosure during the accounting period;
 - ii. The frequency, or number of disclosures made during the accounting period;
 - iii. The date of the last such disclosure during the accounting period.
5. For disclosures of PHI for research purposes in a project consisting of fifty or more individuals, the accounting may provide:
- a. Name of protocol or other research activity;
 - b. Description and purpose of research, criteria for selecting particular records;
 - c. Brief description of the type of PHI disclosed;
 - d. Date or period of time during which disclosure(s) occurred, including date of last disclosure during accounting period;
 - e. Name, address, telephone number of entity that sponsored the research and of the researcher to whom the information was disclosed;
 - f. Statement that PHI of the client may or may not have been disclosed for a particular protocol or the research activity.
6. The Facility will provide the first accounting to a client or personal representative within a 12-month period without charge. However, the Facility may impose a reasonable, cost-based fee for each subsequent request for an accounting by the same party within the 12-month period, provided the Facility has informed the requesting party of the charges in advance, giving the party the opportunity to withdraw or modify the request.
7. The Facility may exclude those disclosures that qualify as an exception.
8. The Facility must document and retain for six years from the date of the accounting:
- a. The information required to be included in the accounting, and
 - b. The written accounting provided to the requesting party.

**SAMPLE
REQUEST FOR AN ACCOUNTING OF DISCLOSURES
OF PROTECTED HEALTH INFORMATION**

Client's Name: _____ Medical Record Number: _____

Facility's Name: _____ Facility Number: _____

Date Range to be Included

I would like an accounting of disclosures of my Protected Health Information (PHI) for the following time frames.

(Please note the maximum time frame that can be requested is six years prior to the date of this request.)

From Date _____	To Date _____
From Date _____	To Date _____
From Date _____	To Date _____

Fees

First request in a 12-month period:	Free
Subsequent Requests:	(Cost-based fee per entity)

I understand that there may be a fee for this accounting and wish to proceed. I also understand that the accounting will be provided to me within 60 days unless I am notified in writing that an extension of up to 30 days is needed.

Qualified Exceptions to the Accounting

I understand that, by law, the Facility is not required to account for disclosures that meet the following criteria:

- The disclosure was necessary to carry out treatment, payment, and health care operations.
- The disclosure was to the client for which the PHI was created or obtained.
- The disclosure was pursuant to a signed authorization by the client or personal representative.
- The disclosure was for the Facility's directory or to persons involved in the client's care or other notification purposes.
- The disclosure was for national security or intelligence purposes.
- The disclosure was to a correctional institution or law enforcement official.
- The disclosure occurred prior to April 13, 2003.

Signature of Client or Personal Representative

Date