

Kenosha Radiology Center, LLC's Accounting For Disclosure Policy

PURPOSE: To ensure that each employee understands the requirement to populate and provide an Accounting of Disclosures of Protected Health Information (PHI) to all patients as required by the Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information (Privacy Standards), 45 CFR Parts 160 and 164, and any and all other Federal regulations and interpretive guidelines promulgated thereunder.

POLICY: KRC must provide a written accounting of disclosures (AOD) of PHI to authorized individuals made during the six years prior to the date on which the accounting is requested. AODs do not need to be provided for any disclosures on or prior to April 13, 2003. Requests for an AOD must be made in writing by the patient.

A system must be in place to accurately and completely track all disclosures and have such information available for a minimum of six years as required by the HIPAA Privacy Standards and this policy.

The right to request an AOD and the process for making a request must be outlined in Kenosha Radiology Center, LLC's Privacy Policy & Terms of Use.

PROCEDURE: A patient has a right to receive an accounting of disclosures of PHI made in the six years prior to the date on which the accounting is requested; **except for the following disclosures** (the HIPAA Privacy Standards Section is included after each exception):

1. To carry out treatment, payment and health care operations (§164.506);
2. To patients of PHI about them (§164.502);
3. Pursuant to an authorization (§164.508);
4. For KRC's directory or to persons involved in the patient's care or other notification purposes (§164.510);
5. For national security or intelligence purposes (§164.512(K)(2));
6. To correctional institutions or law enforcement agencies that have lawful custody of an inmate (§164.512(K)(2));
7. As part of a limited data set (§164.514(e));
8. That occurred prior to the compliance date for the covered entity; or
9. Incident to a use or disclosure otherwise permitted or required (§164.502).

The accounting must include the following for each disclosure:

1. The date of the disclosure;
2. The name of the entity or person who received the PHI and, if known, the address of such entity or person;
3. A brief description of the PHI disclosed; and
4. A brief statement of the purpose of the disclosure that reasonably informs the patient of the basis for the disclosure; or, in lieu of such statement, a copy of a written request for a disclosure.

Research -Waiver of Authorization

If the covered entity has made disclosures of PHI for a particular research purpose in accordance with the HIPAA Privacy Standards §164.512(i) for 50 or more patients, the accounting may provide:

1. The name of the protocol or other research activity;

2. A description, in plain language, of the research protocol or other research activity, including the purpose of the research and the criteria for selecting particular records;
3. A brief description of the type of PHI that was disclosed;
4. The date or period of time during which such disclosure occurred, or may have occurred, including the date of the last such disclosure during the accounting period;
5. The name, address, and telephone number of the entity that sponsored the research and of the researcher to whom the information was disclosed; and
6. A statement that the PHI of the patient may or may not have been disclosed for a particular research protocol or other research activity.

If the covered entity provides an accounting for research disclosures in accordance with the Research section noted above and at the request of the patient, the covered entity may assist in contacting the entity that sponsored the research and the researcher if it is reasonably likely that the PHI of the patient was disclosed for research protocol or activity.

If the covered entity has made disclosures of PHI for a particular research purpose in accordance with the HIPAA Privacy Standards §164.512(i) for less than 50 patients, an AOD is required for each patient that includes the date of the disclosure; the name of the entity or person who received the PHI and, if known, the address of such entity or person; a brief description of the PHI disclosed; and a brief statement of the purpose of the disclosure that reasonably informs the patient of the basis for the disclosure; or, in lieu of such statement, a copy of a written request for a disclosure.

Provision of the accounting.

1. KRC must act on the patient's written request for an accounting no later than 60 days after receipt of such a request, as follows:
 - a. KRC must provide the patient with the accounting requested; or
 - b. If KRC is unable to provide the accounting within the time required, then KRC may extend the time to provide the accounting by no more than 30 days, provided that:
 - i. KRC, within the time limit set, provides the patient with a written statement of the reasons for the delay and the date by which KRC will provide the accounting; and
 - ii. KRC may have only one such extension of time for action on a request for an accounting.
2. KRC must provide the first accounting in any 12-month period to a patient free of charge. KRC may impose a reasonable, cost-based fee for each subsequent request for an accounting by the same patient within the 12 month period, provided that KRC informs the patient in advance of the fee and provides the patient with an opportunity to withdraw or modify the request for a subsequent accounting in order to avoid or reduce the fee.

Documentation.

KRC must document the following and retain the documentation for six years:

1. The information required to be included in an accounting;
2. The written accounting that is provided to the patient which should be stored with the designated record set; and
3. The titles of the persons responsible for receiving and processing requests for an accounting by patients.

Suspend right of accounting to health oversight or law enforcement.

KRC must temporarily suspend a patient's right to receive an accounting of disclosures to a health oversight agency or law enforcement for the time specified by such agency or official, if such agency or official provides KRC with a written statement that such an accounting to the patient would be reasonably likely to impede the agency's activities and specifying the time for which such a suspension is required.

If the agency or official statement is made orally, KRC must:

- a. Document the statement, including the identity of the agency or official making the statement;
- b. Temporarily suspend the patient's right to an accounting of disclosures subject to the statement; **and**
- c. Limit the temporary suspension to no longer than 30 days from the date of the oral statement, unless a written statement pursuant to above paragraph is submitted during that time.

List of Types of Disclosures that must be tracked for the purposes of accounting:

1. Required by law
2. Public health activities
3. Victims of abuse, neglect, or domestic violence unless the Covered Entity (CE), in exercising professional judgment, believes informing the patient may cause serious harm or if the CE believes the patient is responsible for the abuse, neglect, or injury.
4. Health oversight activities
5. Judicial and administrative proceedings
6. Law enforcement purposes
7. Decedents:
 - Coroners and medical examiners
 - Funeral directors
8. Cadaveric organ, eye, or tissue donation purposes
9. Research purposes where a waiver of authorization was provided by the Institutional Review Board or preparatory reviews for research purposes
10. In order to avert a serious threat to health or safety
11. Specialized government functions:
 - Military and veterans activities
 - Protective services for the President and others
12. Worker's compensation disclosures necessary to comply with laws relating to worker's compensation programs (**not** including disclosures related to payment).