1.0 PURPOSE

To guide University of Mississippi Medical Center (UMMC) employees in making reasonable efforts to limit disclosure of protected health information (PHI) to the minimum necessary to accomplish the intended purpose of the use, disclosure or request and to comply with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Regulations 45 CFR Part 164.502 and the Health Information Technology for Economic and Clinical Health (HITECH) Act.

2.0 SCOPE

The UMMC Minimum Necessary Uses and Disclosures of Protected Health Information Policy applies to any UMMC employee who releases PHI.

3.0 STANDARDS

When using or disclosing PHI or when requesting PHI from another healthcare provider, insurance plan or clearinghouse, UMMC will make reasonable efforts to limit PHI released or requested to the minimum necessary to accomplish the intended purpose, EXCEPT:

- Uses or disclosures made pursuant to an authorization are not subject to minimum necessary. However, the following types of authorizations are exceptions and are subject to minimum necessary:
  - Authorizations for UMMC’s own uses
  - Authorizations for UMMC’s request for use or disclosure by others
  - Authorizations for research related treatment
- Disclosures made to the Secretary of Health and Human Services as required by the HIPAA Privacy Regulation (are not subject to minimum necessary).
- Uses or disclosures that are required by law (are not subject to minimum necessary).
• Uses or disclosures that are required for compliance with the HIPAA Privacy Regulation (are not subject to minimum necessary).

Disclosures, uses, and requests will be limited to a limited data set, as defined by HIPAA, to the extent practicable, and comply with any other regulations or guidance defining the “minimum necessary” issued by the secretary.

The following standards have been created with regards to disclosures, uses, and requests made to Business Associates and other covered entities for the purposes of treatment and payment:

Business Associates

• PHI released to Business Associates will be held to the minimum necessary as stated in the Business Associate Contract.

Releases to Other Covered Entities for Treatment and Payment Purposes

• *Treatment - Request from Provider*
  UMMC has deemed all patient records requested by the treating provider, limited to one year prior to the request date, as the “minimum necessary” for continued patient treatment by the requestor. A patient/patient representative signed authorization must accompany any request for patient records greater than one year from the request date.

• *Payment - Request from Insurance Company*
  UMMC has deemed any requested medical record documentation for the date of service for which payment is pending as the “minimum necessary” in order to receive payment.
NOTE: *Restrictions – UMMC may not use or disclose PHI in violation of a restriction agreed to by UMMC. For more information on Restrictions, refer to Right to Request Restrictions Policy.

4.0 CONTACT INFORMATION

For questions about the UMMC Minimum Necessary Uses and Disclosures of PHI Policy or for more information, call the Office of Integrity and Compliance at 815-3944.