
HIPAA Policy 5003 Accounting for Disclosures

Responsible Office Office of the Provost
Responsible Official Privacy Officer

Effective Date April 14, 2003
Last Revision Feb 14, 2003

Scope

This policy applies to the University's Covered Components, designated as such for purposes of complying with the privacy provisions of the Health Insurance Portability and Accountability Act of 1996. The Covered Components are: (1) the Group Health Plan Component; and (2) the Covered Health Care Component, comprised of the School of Medicine, School of Nursing, Department of Psychology clinics and Yale University Health Services.

Policy Statement

The Yale Covered Components will keep an accounting of all disclosures made of individuals' protected health information except for disclosures made

- for treatment, payment, and operations
- pursuant to a signed authorization for the release of the information, or
- under other circumstances not required to be tracked, as set forth in related procedures.

The Yale Covered Components will provide an accounting of these disclosures to individuals who may request an accounting, as required by law.

Reason for the Policy

To afford Yale University (Yale) patients the right to request and receive an accounting of disclosures made concerning their protected health information.

Definitions

- [Confidential Communications](#)
- [Covered Entity](#)
- [Disclosure](#)
- [Legally Authorized Representative](#)
- [PHI \(Protected Health Information\)](#)
- [TPO \(Treatment, Payment, Operations\)](#)
- [Use of Information](#)

(See [HIPAA Glossary](#) for complete list of terms)

Procedures

[5003 PR.1](#) - Accounting for Disclosures

Forms and Exhibits

[Form 5003](#) - Accounting for Disclosures Response

[Form 5003](#) - Accounting of Disclosures Log

[Form 5003](#) - Request for Accounting of Disclosures of Protected Health Information

Contacts

Subject	Contact	Phone
HIPAA Compliance	Chief HIPAA Privacy Officer	436-3650
	Deputy Privacy Officer, YSM	737-6085
	Deputy Privacy Officer, YSN	737-5700
	Deputy Privacy Officer, Psychology	436-3650
	Deputy Privacy Officer, UHS	432-0076
Information Security	University Information Security Officer	432-1248
	YSM Information Security Officer	785-5204
Research Compliance	Human Investigation Committee (YSM)	785-4688
	Human Subjects Committee (FAS)	436-3650
	Human Subjects Research Review Committee (YSN)	737-2371

Roles and Responsibilities

Office of the Provost

responsible for University compliance issues including HIPAA

Office of General Counsel

interprets HIPAA regulations; reviews and approves all HIPAA related contracts including contracts with Business Associates or for research contracts

University Information Security Officer

individual responsible for overseeing information security and ensuring compliance with security requirements of HIPAA

Chief HIPAA Privacy Officer

individual responsible for overseeing and ensuring HIPAA compliance throughout Yale University; coordinates compliance related activities through the following deputies in each of the covered schools, departments, or other entities:

- Deputy Privacy Officer, School of Medicine
- Deputy Privacy Officer, School of Nursing
- Deputy Privacy Officer, Yale Health Services
- Deputy Privacy Officer, Yale Health Plan/Benefits Office
- Deputy Privacy Officer, Department of Psychology Clinics

Procurement Office

identifies Business Associates and ensures appropriate contracts in place

Grants & Contracts Administration

Responsible for negotiating data use agreements and research related contracts.

Institutional Review Boards (HIC, HSC, HSRRC)

Responsible for review and approval of waivers of authorization for research purposes.

Revision History

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.
