



11.2.10 Use and Disclosure for Judicial or Administrative Proceedings

Chapter 11 - Patient Privacy	Original Effective Date: April 2003
Section: 11.2 Uses and Disclosures of Protected Health Information	Date Last Reviewed: January 2023
Responsible Entity: Chief Compliance and Privacy Officer	Date Last Revised: January 2023

I. Purpose

To outline requirements that must be met in order to disclose protected health information without authorization for judicial and administrative proceedings.

II. Scope

This policy applies to all faculty, staff, students, residents, healthcare providers, researchers, contractors, or any other individual (collectively, Workforce Member, including employees and non-employees) who has direct or indirect access to patient protected health information (PHI) created, held or maintained by any UT Health San Antonio controlled affiliate, including, but not limited to its clinics, hospitals, and research operations.

III. Policy

- A. Protected health information may be disclosed without authorization for judicial and administrative proceedings as described in this Policy.
- B. Requirements
 1. UT Health San Antonio workforce members may disclose PHI without authorization for judicial and administrative proceedings if it is:
 - a. In response to an order of a court or administrative tribunal, provided that the workforce member discloses only the PHI expressly authorized by such order; or,
 - b. In response to a subpoena, discovery request, or other lawful process, which is not accompanied by an order of a court or administrative tribunal, if:
 - i. The workforce member receives satisfactory assurance from the party seeking the information that reasonable efforts have been made by such

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- party to ensure that the individual who is the subject of the PHI that has been requested has been given notice of the request; or,
- ii. receives satisfactory assurance from the party seeking the information that reasonable efforts have been made by such party to secure a qualified protective order that meets the requirements of this section.
- c. If satisfactory assurance is received from a party seeking PHI along with a written statement and accompanying documentation demonstrating that:
- i. The party requesting such information has made a good faith attempt to provide written notice to the individual (or, if the individual's location is unknown, to mail a notice to the individual's last known address);
 - ii. The notice included sufficient information about the litigation or proceeding in which the PHI is requested to permit the individual to raise an objection to the court or administrative tribunal; and,
 - iii. The time for the individual to raise objections to the court or administrative tribunal has elapsed, and:
 - (1) No objections were filed; or,
 - (2) All objections filed by the individual have been resolved by the court or the administrative tribunal and the disclosures being sought are consistent with such resolution.
 - iv. For the purposes of this section, if satisfactory assurance is received from a party seeking PHI including a written statement and accompanying documentation demonstrating that:
 - (1) The parties to the dispute giving rise to the request for information have agreed to a qualified protective order and have presented it to the court or administrative tribunal with jurisdiction over the dispute; or,
 - (2) The party seeking PHI has requested a qualified protective order from such court or administrative tribunal. For purposes of this policy, a "qualified protective order" means, with respect to PHI requested under this section, an order of a court or of an administrative tribunal or a stipulation by the parties to the litigation or administrative proceeding that:
 - (a) Prohibits the parties from using or disclosing PHI for any purpose other than the litigation of proceeding for which such information was requested; and,
 - (b) Requires the return to UT Health San Antonio or destruction of PHI (including all copies made) at the end of the litigation or proceeding.
 - v. Notwithstanding guidelines as described above, UT Health San Antonio may disclose PHI in response to lawful process without receiving full

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satisfactory assurance (as described above), if a UT Health San Antonio workforce member makes reasonable efforts to provide notice to the individual sufficient to meet the requirements of this section or to seek a qualified protective order.

IV. Definitions

Terms used in this document, have the meaning set forth in the [Patient Privacy Policies Glossary](#) unless a different meaning is required by context.

V. Related References

For questions regarding this policy, contact the Privacy Program Director at 210-567-2014 or compliance@uthscsa.edu.

Health Insurance Portability and Accountability Act (HIPAA) of 1996
HIPAA Privacy Rule, 45 CFR Part 160 and Subparts A and E of Part 164
HIPAA Security Rule, 45 CFR Part 160 and Subparts A and C of Part 164

VI. Review and Approval History

- A. The approving authority of this policy is the University Executive Committee.
- B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

Effective Date	Action Taken	Approved By	Date Approved
04/2003	Policy Origination		
03/2013	Policy Revision		
01/2023	Policy Review, discretionary edits	ICPO	01/04/23