



11.3.1 Accounting of Disclosures of Protected Health Information

Chapter 11 - Patient Privacy	Original Effective Date: April 2003
Section: 11.3 Individual Rights in Regard to Privacy of Protected Health Information	Date Last Reviewed: January 2023
Responsible Entity: Chief Compliance and Privacy Officer	Date Last Revised: January 2023

I. Purpose

Individuals shall have the right to review an accounting of protected health information disclosures made by UT Health San Antonio during the six (6) years prior to a request, except for disclosures for treatment, payment and health care operations, disclosures based on a patient authorization and as required by law.

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. Requirements for Providing an Accounting of Disclosure

1. UT Health San Antonio workforce members designated by individual schools or clinics as a medical record custodian are responsible for receiving, processing and documenting any request for an accounting of disclosures of PHI.
2. The designated medical record custodian must document disclosures either in written format or if the capability exists, electronically. See copy of [Accounting of Disclosures of Protected Health Information form](#) for details. A copy should be filed in the patient's health record.
3. UT Health San Antonio must provide the requesting individual with a written accounting that meets the following requirements except as otherwise provided:
 - a. The accounting must include disclosures of PHI that occurred during the six (6) years (or shorter time period if requested) prior to the date of the request.
 - b. The accounting for each disclosure must include:

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- i. The date of disclosure;
 - ii. The name of the entity or person who received the PHI and, if known, the address of such entity or person;
 - iii. A brief description of the PHI disclosed; and,
 - iv. A brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or in lieu of such statement, a copy of a written request for disclosure, if any.
- c. If UT Health San Antonio has made multiple disclosures of PHI to the same person or entity for a single purpose, the accounting may, with respect to such multiple disclosures, provide:
- i. The information required above;
 - ii. The frequency, time frames, or number of disclosures made during the accounting period; and,
 - iii. The date of the last such disclosure during the accounting period.

B. Exceptions to the Right of Accounting of Disclosures

1. In accounting for disclosures of PHI, UT Health San Antonio must temporarily suspend an individual's right to receive an accounting of disclosures to a health oversight agency or law enforcement official if such agency or official provides UT Health San Antonio with a written statement that such an accounting to the individual would be reasonably likely to impede the agency's activities. The written statement must specify the time for which such a suspension is required.
2. If the agency or official suspends an individual's right to receive an accounting of disclosures, and the statement is made orally, UT Health San Antonio must:
 - a. Document the statement in the patient's medical record, including the identity of the agency or official making the statement;
 - b. Temporarily suspend the individual'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 from the suspending agency or official is submitted during the time period.
3. UT Health San Antonio is NOT required to account for the following disclosures
 - a. To carry out treatment, payment, and health care operations on paper health records;
 - b. To individuals of PHI about themselves;
 - c. Pursuant to a patient authorization;
 - d. For the facility's directory or to persons involved in the individual's care or other notification purposes;
 - e. Incidental disclosures;

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- f. For national security or intelligence purposes;
- g. To correctional institutions or law enforcement custodial officials; and,
- h. As part of a limited data set.

C. Disclosures for Research

1. If, during the period covered by the accounting, UT Health San Antonio has made disclosures of PHI for a particular research purpose for 50 or more individuals, the accounting may, with respect to such disclosures for which PHI about the individual may have been included, provide:
 - a. The name of the protocol or other research activity;
 - b. 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;
 - c. A brief description of the type of PHI that was disclosed;
 - d. The date or period of time during which such disclosures occurred, or may have occurred, including the date of the last such disclosure during the accounting period;
 - e. The name, address, and telephone number of the entity that sponsored the research and of the researcher to whom the information was disclosed; and,
 - f. A statement that the PHI of the individual may or may not have been disclosed for a particular protocol or other research activity.
2. If a covered entity, other than UT Health San Antonio, provides an accounting for research disclosures, in accordance with this Policy, and it is reasonably likely that the PHI of the individual was disclosed for such research protocol or activity, UT Health San Antonio shall, at the request of the individual, assist in contacting the entity that sponsored the research and the researcher.

D. Compliance Standards

When an individual submits a [Request for Accounting of Disclosures form](#), UT Health San Antonio must act on the individual's request for an accounting, no later than 60 days after receipt of such a request, as follows:

1. Provide the individual with the accounting requested; or
2. If unable to provide the accounting within the time required above, UT Health San Antonio may extend the time to provide the accounting by no more than 30 days, provided that:
 - a. Within the time limit of 60 days, UT Health San Antonio provides the individual with a written statement of the reasons for the delay and the date by which it will provide the accounting; and,
 - b. UT Health San Antonio may have only one such extension of time for action on a request for an accounting.

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3. UT Health San Antonio must provide the first accounting of disclosures to an individual in a 12-month period without charge. UT Health San Antonio may impose a reasonable, cost-based fee for each subsequent request for an accounting by the same individual within the 12-month period, provided that UT Health San Antonio informs the individual in advance of the fee and provides the individual with an opportunity to withdraw or modify the request for a subsequent accounting in order to avoid or reduce the fee. UT Health San Antonio reserves the right to determine reasonable fees for subsequent requests.

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 at 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		
09/2013	Policy Revision		
02/2016	Policy Revision		
01/2023	Policy Review	ICPO	01/20/23