Included in this newsletter is guidance on various HIPAA-related topics that impact your everyday work life. Hopefully, it will help answer some of your questions about how HIPAA relates to your work.

Joan Vaughan
Purdue University Student Health Center

From the Director

I would like to use this opportunity to thank all of the HIPAA liaisons for all of their hard work in helping to ensure that Purdue is compliant with the HIPAA regulations. It is a thankless job and requires much time and effort. I appreciate your patience and positive attitudes. I wish you all a safe and relaxing holiday and look forward to working with you in 2007.

Disclosures to Law Enforcement

Derived from information provided by the Office for Civil Rights [http://www.hhs.gov/ocr/hipaa/]

There may be a time when law enforcement contacts your area requesting health information associated with a patient or employee. Although we want to be helpful, the Privacy Rule is specific about the situations in which you can disclose protected health information to law enforcement and what information can be disclosed.

The Privacy Rule is balanced to protect an individual’s privacy while allowing important law enforcement functions to continue. The Rule permits covered entities to disclose protected health information (PHI) to law enforcement officials, without the individual’s written authorization, under the specific circumstances summarized below. Disclosures for law enforcement purposes are permitted as follows:

- To comply with a court order or court-ordered warrant, a subpoena or summons issued by a judicial officer, or a grand jury subpoena.
- To respond to an administrative request, such as an administrative subpoena or investigative demand or other written request from a law enforcement official. Because an administrative request may be made without judicial involvement, the Rule requires all administrative requests to include or be accompanied by a written statement that the information requested is relevant and material, specific and limited in scope, and that de-identified information cannot be used.
- To respond to a request for PHI for purposes of identifying or locating a suspect, fugitive, material witness or missing person; but the covered entity must limit disclosures of PHI to name and address, date and place of birth, social security number, ABO blood type and rh factor, type of injury, date and time of treatment, date and time of death, and a description of distinguishing physical characteristics. Other information related to the individual’s DNA, dental records, body fluid or tissue typing, samples, or analysis cannot be disclosed under this provision, but may be disclosed in response to a court order, warrant, or written administrative request.

This same limited information may be reported to law enforcement:

- About a suspected perpetrator of a crime when the report is made by the victim who is a member of the covered entity’s workforce;
- To identify or apprehend an individual who has admitted participation in a violent crime that the covered entity reasonably believes may have caused serious physical harm to a victim, provided that the admission was not made in the course of or based on the individual’s request for therapy, counseling, or treatment related to the propensity to commit this type of violent act;
- To respond to a request for PHI about a victim of a crime, and the victim agrees. If, because of an emergency or the person’s incapacity, the individual cannot agree, the covered entity may disclose the PHI if law enforcement officials represent that:
  - the PHI is not intended to be used against the victim,
  - is needed to determine whether another person broke the law,
  - the investigation would be materially and adversely affected by waiting until the victim could agree, and
  - the covered entity believes in its professional judgment that doing so is in the best interests of the individual whose information is requested.

Where can I find the latest forms and other information about HIPAA?

The HIPAA Privacy Compliance Office has developed a website for Purdue staff to access forms and other HIPAA-related information. To access the site, please visit: [http://www.purdue.edu/hipaa](http://www.purdue.edu/hipaa) or contact:

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telephone: (765) 496-1927

e-mail: jvaughan@purdue.edu
Disclosures to Law Enforcement...Continued

- Child abuse or neglect may be reported to any law enforcement official authorized by law to receive such reports and the agreement of the individual is not required.

- Adult abuse, neglect, or domestic violence may be reported to a law enforcement official authorized by law to receive such reports if the individual agrees, if the report is required by law or if expressly authorized by law, and based on the exercise of professional judgment, the report is necessary to prevent serious harm to the individual or others, or in certain other emergency situations. Notice to the individual of the report may be required.

- To report PHI to law enforcement when required by law to do so. For example, state laws commonly require health care providers to report incidents of gunshot or stab wounds, or other violent injuries; and the Rule permits disclosures of PHI as necessary to comply with these laws.

- To alert law enforcement to the death of the individual, when there is a suspicion that death resulted from criminal conduct or to medical examiners or coroners to assist them in identifying the decedent, determining the cause of death, or to carry out their other authorized duties.

- To report PHI that the covered entity in good faith believes to be evidence of a crime that occurred on the covered entity’s premises.

- When consistent with applicable law and ethical standards:
  - To a law enforcement official reasonably able to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public; or
  - To identify or apprehend an individual who appears to have escaped from lawful custody.

Except when required by law, the disclosures to law enforcement summarized above are subject to a minimum necessary determination by the covered entity. When reasonable to do so, the covered entity may rely upon the representations of the law enforcement official as to what information is the minimum necessary for their lawful purpose. Moreover, if the law enforcement official making the request for information is not known to the covered entity, the covered entity must verify the identity and authority of such person prior to disclosing the information.

Security Reminder - Correction

Correction: In last quarter’s newsletter, in the article titled “Security Reminder - Incident Response”, the following was stated: To report abuse of Purdue’s information technology resources, please fill out and submit the online incident report form. http://www.purdue.edu/securePurdue/incidentReport-Form.cfm.....Complete the information on the Secure Purdue Incident page only if you think your problem is a serious IT incident.

IT Security and Privacy is asking that ANY SUSPECTED IT incident be reported, whether it’s serious or not, since some incidents (during investigation) may actually become serious.