HIPAA MINIMUM NECESSARY POLICY

HIPAA requires that uses, disclosures, and requests of protected health information (PHI) must be limited to the “the limited data set or if the limited data set is not sufficient, the minimum necessary to accomplish the intended purpose.”

When using or disclosing protected health information or when requesting protected health information from another covered entity, Purdue’s covered component must make reasonable efforts to limit protected health information to the limited data set or if necessary, the minimum necessary to accomplish the intended purpose of the use, disclosure, or request.

For all uses, disclosures, or requests of PHI, a covered entity may not use, disclose or request an entire medical record, except when the entire medical record is specifically justified as the amount that is reasonably necessary to accomplish the purpose of the use, disclosure, or request.

Minimum necessary does NOT apply to:

- disclosures to or requests by a health care provider for treatment purposes,
- uses or disclosures made to the individual,
- uses or disclosures pursuant to an authorization,
- uses or disclosures to Health and Human Services, or
- uses or disclosures that are required by law or required for compliance with the HIPAA privacy rule.

HIPAA requires that uses of protected health information be limited to only workforce members who are performing services to patients or health plan members and only for purposes allowed under the Privacy Rule. Only workforce members with responsibilities related to a particular patient or health plan member may access information pertaining to that individual and only the minimum necessary information should be accessed to perform the related work responsibilities.

Access to Purdue systems that store patient or health plan member data is provided only to those who need to use the data for legitimate purposes. Access by staff to patient or health plan member information for purposes such as personal business or curiosity are strictly prohibited.

Unauthorized access to PHI is prohibited and upon discovery, sanctions may be applied to the employee up to and including termination, as deemed appropriate given the circumstances.

Minimum necessary uses of protected health information

Purdue covered components will identify individuals or roles, as appropriate, in its workforce who need access to protected health information to carry out their duties; and for each person or role,
the categories of protected health information to which access is needed and any conditions appropriate to that access.

Covered components must make reasonable efforts to limit the access of these persons or roles to protected health information to the minimum necessary appropriate for their job duties.

**Minimum necessary disclosures of protected health information.**

For any type of disclosure that it makes on a routine and recurring basis, covered components will:

- Implement policies and procedures (which may be standard protocols) that limit the protected health information disclosed to the amount reasonably necessary to achieve the purpose of the disclosure.

For all other disclosures, a covered component must:

- Develop criteria designed to limit the protected health information disclosed to the information reasonably necessary to accomplish the purpose for which disclosure is sought; and review requests for disclosure on an individual basis in accordance with such criteria.

A covered component may rely, if reasonable under the circumstances, on a requested disclosure as the minimum necessary for the stated purpose when:

- Making disclosures to public officials if the public official represents that the information requested is the minimum necessary for the stated purpose(s);
- The information is requested by another covered entity;
- The information is requested by a professional who is a member of its workforce or is a business associate of the covered entity for the purpose of providing professional services to the covered entity, if the professional represents that the information requested is the minimum necessary for the stated purpose(s); or
- Documentation or representations that comply with the applicable requirements for research have been provided by a person requesting the information for research purposes.

**Public Health Disclosures**

The HIPAA Privacy Rule permits covered entities to disclose the amount and type of protected health information that is needed for public health purposes. For disclosures that are not required by law, covered components may disclose, without authorization, the information that is reasonably limited to that which is minimally necessary to accomplish the intended purpose of the disclosure. For routine or recurring public health disclosures, a covered component may develop protocols as part of its minimum necessary policies and procedures to address the type and amount of information that may be disclosed for such purposes. Covered components may also rely on the requesting public health authority’s determination of the minimally necessary information.
Definitions

*Required by law* means a mandate contained in law that compels an entity to make a use or disclosure of protected health information and that is enforceable in a court of law.

*Required by law* includes, but is not limited to, court orders and court-ordered warrants; subpoenas or summons issued by a court, grand jury, a governmental or tribal inspector general, or an administrative body authorized to require the production of information; a civil or an authorized investigative demand; Medicare conditions of participation with respect to health care providers participating in the program; and statutes or regulations that require the production of information, including statutes or regulations that require such information if payment is sought under a government program providing public benefits.