

Mercer HIPAA PHI Communications Guidelines

Procedure: Student, Staff and Faculty Communication on Protected Health Information

Source of Data: Student, Staff or Faculty Member

Submitted By: Mercer HIPAA Compliance Committee

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Purpose:

To provide guidelines on how to handle Protected Health Information that is provided by an individual (student, staff, faculty) to another individual for decision purposes. This guideline is to protect both the individual and Mercer University from the errant disclosure of Protected Health Information.

Definition:

Protected Health Information (PHI): Information that is covered under the Health Insurance Portability and Accountability Regulations (HIPAA) regarding privacy. The PHI consists of information regarding treatment, diagnosis, medication, or procedures that can be specifically identified to an individual through oral, written, or electronic communication.

Policy:

The following are the policies that govern the HIPAA Communications Guidelines.

- **Receiver's Responsibility:** According to HIPAA law, the providing of Protected Health Information by the individual is considered confidential on a one to one basis; therefore there is no issue with receiving this information. The HIPAA Confidentiality and Privacy requirement is based on what one does with the information received. The communication of this information is restricted and does need to comply with HIPAA Regulations. It is advised not to communicate this information.
- **Communication of Protected Health Information:** If communication of the information received is required to perform work or accommodation for an individual, then the receiver should contact the University HIPAA Privacy Officer for instruction on proper HIPAA compliant communication of the PHI.
- **HIPAA Privacy Baseline:** All identified PHI needs to be kept secure, private, confidential and communication of this information needs to follow all established Mercer University HIPAA Policies and Procedures.

The best course of action is to not solicit nor receive any medical or health related information about an individual that could be interpreted or assumed to be PHI.