POLICY REGARDING MINIMUM NECESSARY USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION

**Purpose:** To set forth the policy and procedures of WVU Physicians of Charleston (WVUPC) regarding the minimum necessary requirements for use and disclosure of protected health information (PHI).

**Standard:** When using or disclosing PHI, or when requesting PHI from another covered entity, WVUPC must make reasonable efforts to limit PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request, unless an exception applies.

**Policy:** WVUPC will make reasonable efforts based upon its professional judgment to use, disclose, and/or request only that PHI which is minimally necessary to accomplish the purpose of the use, disclosure, and/or request.

In limited circumstances, WVUPC may, but is not required to, rely on the judgment of the party requesting the disclosure that the PHI requested is the minimum amount needed. Such reliance must be reasonable under the circumstances. Such “reasonable reliance” is permitted only when the request for PHI is made by:

- Public officials who represent that the information is the minimum necessary for the stated purpose(s)
- Another covered entity
- A professional who is a member of the WVUPC workforce or is a Business Associate of WVUPC for the purpose of providing professional services to WVUPC
- An individual for research purposes and the individual has provided documentation to WVUPC verifying institutional review board approval and authority

**Procedure**

1. **Internal Uses and Disclosures**

   - Electronic role-based access: Reasonable efforts will be made to limit access to persons or classes of persons within the organization who need access to PHI to perform their jobs.
   - Paper-based access: Employees shall avoid reviewing PHI outside of the scope of the function being performed, based upon role
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1. **Policy Basis**

2. **Routine or Recurring Disclosures**

   a. Subject to the exceptions stated below, for routine or recurring requests and disclosures (such as to Peer Review Organizations, Accrediting Agencies, Health Plans, Health Insurers) WVUPC HIM staff and/or WVUPC’s designated release of information contractor will, when responding to a request for PHI, limit the disclosed PHI, or the response to a request for disclosure, to that which is reasonably necessary to achieve the purpose of the disclosure or request.

   b. For uses and disclosures requested and made within the clinical teaching setting, the patient’s entire medical record may be deemed, by the WVUPC faculty, to be the minimum necessary for the purpose of such uses or disclosures.

   c. For disclosures or requests that are not made on a routine and recurring basis (such as subpoenas, court orders, legal requests), the WVUPC Director of HIM, with guidance as necessary from the WVUPC Privacy officer and/or General Counsel, will evaluate each such non-routine disclosure or request to verify that the PHI disclosed or requested is only that amount which is necessary to accomplish the purpose of the disclosure or request.

3. **Exceptions to the Minimum Necessary Requirement**

   The minimum necessary requirement will not apply in the following instances:

   a. Disclosures to or requests by a health care provider or practice for purposes of treatment
   b. Uses or disclosures made to the individual who is the subject of the PHI
   c. Uses or disclosures made pursuant to a valid authorization initiated by the individual
   d. Disclosures to the Secretary of the Department of Health and Human Services (HHS)
   e. Uses or disclosures that are required by law
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f. Uses or disclosures required for compliance under HIPAA, including compliance with the implementation specifications for conducting standard data transactions.

4. Disclosure of an individual’s entire medical record

Subject to the exceptions listed above, WVUPC will not disclose an individual’s entire medical record unless such disclosure is reasonably believed to be the amount that is reasonably necessary to accomplish the intended purpose.

REFERENCES:
45 C.F.R. §164.502; 45 C.F.R. §164.514.
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