PURPOSE AND SCOPE
It is the policy of UW Medicine to recognize and accommodate the right of an individual to receive an accounting of disclosures concerning their protected health information (PHI). UW Medicine entities act in accordance with its Release of Information (ROI) policies and procedures. Within UW Medicine, tracking logs are kept to track the release, transfer, provision of access to, or disclosure of PHI for purposes other than treatment, payment and healthcare operations (TPO) or as authorized by the patient.

This policy is applicable to all UW Medicine entities.

POLICY PRINCIPLES/STATEMENT
See POLICY.

DEFINITIONS
See UW Medicine Compliance Policy: PP-00 Glossary of Terms.

POLICY
UW Medicine limits the time frame of any accounting to a period of up to six years prior to date of the request, or since April 14, 2003, whichever occurred last. UW Medicine is not required to include in the accounting disclosures made for national security purposes, for law enforcement purposes (in some instances), and/or those disclosures made prior to April 14, 2003. Individuals have the right to receive one free accounting every 12 months. UW Medicine may charge a fee for additional accountings.
1. Individual's Right to Accounting of Disclosures of PHI

A. Individuals have the right to receive an accounting of disclosures made by UW Medicine for six years (or less if the individual requests a shorter time frame) from the date of the request. Individuals who seek an accounting should be directed to make the request in writing to UW Medicine Compliance.

The following disclosures will not be included in an accounting:

1. Disclosures made prior to April 14, 2003;

2. Disclosures made to carry out treatment, payment or healthcare operations;

3. Disclosures made to individuals about themselves;

4. Disclosures made that were incidental to a use or disclosure otherwise permitted or required for treatment, payment or healthcare operations (for example: when a copy machine repairperson pulls a jammed piece of paper out of the machine that contains PHI);

5. Disclosures made to carry out an individual’s authorization;

6. Disclosures made for a UW Medicine entity's facility directory, see UW Medicine Compliance Policy: PP.13 Use & Disclosure of Protected Health Information Related to Inpatient Facility Directories & for Disaster Relief Purposes;

7. Disclosures made to persons involved in the individual’s care, see UW Medicine Compliance Policy: PP.15 Use & Disclosure of Protected Health Information for Involvement in Individual’s Care and Notification;

8. Disclosures made for purposes of notifying one responsible for the individual’s care and for which the individual had an opportunity to agree or object, see UW Medicine Compliance Policy: PP.15 Use & Disclosure of Protected Health Information for Involvement in Individual’s Care and Notification;

9. Disclosures made for national security or intelligence purposes;

10. Disclosures made to correctional institutions or law enforcement in custodial situations; and

11. Disclosures of a limited data set\(^1\) made in accordance with a specific data use agreement.

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\(^1\) See UW Medicine Compliance Policy: PP.00 Glossary of Terms for further description of “limited data set.”
B. UW Medicine temporarily suspends an individual’s right regarding any accounting of disclosures made to a health oversight agency or law enforcement official if requested to do so by the agency.

1. UW Medicine will not provide an accounting of disclosures for its PHI to a patient if a health oversight agency or law enforcement official has requested temporary suspension, for the time specified by such official, if the official provides the hospital with a written statement that such an accounting would be reasonably likely to impede the agency’s activities and that specifies the time for which a suspension is required.

2. Subpoenas issued by a federal grand jury or by a Washington Special Inquiry Judge that state that the recipient may not disclose receipt of the subpoena would constitute a written statement suspending the hospital’s obligation to account for that disclosure.

3. If the official’s request for suspension is made orally, the hospital must:
   a. Document that the official made the request, specifying the official’s identity and specifying that the official represented that making such an accounting would be reasonably likely to impede the agency’s activities.
   b. Temporarily suspend the right to an accounting of disclosures subject to the request and limit the temporary suspension to no longer than 30 days from the date of the oral request unless a written statement is submitted during that time.

II. Content of Accounting for Disclosures

A. UW Medicine will provide the individual with a written accounting of PHI disclosures (including accidental disclosures2) that occurred during the six years (or less if the individual requests a shorter time frame) prior to the date of the request or since April 14, 2003, whichever is less. Patients can request an accounting of disclosures through UW Medicine Compliance in writing.

UW Medicine Compliance will respond within 60 days of receipt of the request, if unable to provide the requested accounting, the individual is notified of the reasons for delay and a 30-day extension is applied. UW Medicine Compliance will acknowledge receipt of request and specify the date expected to provide the accounting. See EXAMPLE - Accounting of Disclosures Acknowledgement Letter (Attachment A).

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2 All non-authorized or accidental disclosures of PHI are to be reported to the UW Medicine Compliance and are documented for the accounting of disclosures. Examples include, a fax with PHI is sent to an incorrect fax number; an individual pretending to be a patient obtains PHI; PHI is stolen from a UW Medicine entity; other individual’s PHI is included in a copy of information sent to a patient.
1. The following disclosures do not need to be included in the accounting:

   a. Disclosures made prior to April 14, 2003;
   b. Disclosures made to carry out treatment, payment or healthcare operations;
   c. Disclosures made to individuals about themselves;
   d. Disclosures made that were incidental to a use or disclosure otherwise permitted or required for treatment, payment or healthcare operations; (for example, when a copy machine repairperson pulls a jammed piece of paper out of the machine that contains PHI).
   e. Disclosures made to carry out an individual’s authorization;
   f. Disclosures made for a UW Medicine entity’s facility directory;
   g. Disclosures made to persons involved in the individual’s care;
   h. Disclosures made for purposes of notifying one responsible for the individual’s care and for which the individual had an opportunity to agree or object;
   i. Disclosures made for national security or intelligence purposes;
   j. Disclosures made to correctional institutions or law enforcement in custodial situations; and
   k. Disclosures of a limited data set\(^3\) made in accordance with a specific data use agreement.

2. The accounting will include the following four elements:

   a. The date of the disclosure;
   b. The name of the entity or person who received the PHI and the address (if known);
   c. A brief description of the PHI disclosed;
   d. A brief purpose statement that reasonably informs the individual of the basis for the disclosure or, in lieu of such statement,
      i. A copy of a written request for disclosure made by the Secretary of the U.S. Department of Health and Human Services (DHHS) for compliance review purposes; or
      ii. A copy of a written request for disclosure as required by law, includes but is not limited to the following examples:
         - For public health activities;
         - For victims of abuse or neglect;
         - For health oversight activities;
         - For judicial or administrative proceedings;
         - For law enforcement purposes;
         - For decedents;
         - For cadaver organ, eye or tissue donation purposes;
         - For research purposes;

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\(^3\) See PP00 Glossary of Terms for further description of “limited data set.”
• To avert a serious threat to health or safety;
• For specialized government functions; or
• For workers’ compensation cases.

B. UW Medicine will maintain a copy of the written accounting provided to the individual for six years from the date of its creation.

III. Accidental or Non-Authorized Disclosures

All non-authorized or accidental disclosures of PHI are to be reported to UW Medicine Compliance.

A. When appropriate, a fact-based consultation may include; risk management, compliance officer, and senior leadership to determine the appropriate notification to patient(s) of the accidental disclosure.

B. UW Medicine Compliance ensures that a concerted effort is made to retrieve the PHI.

C. The department that was involved in the lost or stolen PHI or inappropriately disclosed information is responsible for accounting for the disclosures in the UW Medicine Accounting of Disclosures Database.

D. UW Medicine Compliance documents the steps taken to correct the problem.

IV. Documenting a Disclosure of PHI

UW Medicine workforce members who disclose PHI that meets the requirement for the accounting of disclosures, must document the disclosure in one of the following:


B. Documentation of an Accounting of Disclosure - Form UH3162, send form to appropriate entity Health Information Management (HIM) department for scanning into the electronic medical record (EMR);

C. UW Medicine entity’s HIM ROI database;

D. Mandatory Violent Injury Reports - Form UH2883;

E. Report disclosure to Northwest Hospital & Medical Center (NWH) HIM and request entry into the NWH Accounting of Disclosures Database;

F. Epic HIPAA Order;
G. Valley Medical Center (VMC) Chartmaxx ROI selection process;

H. King County Public Health accounting of disclosures for public health purposes from King County Public Health Data Systems; or

I. Fred Hutchinson Cancer Research Center (FHCRC) accounting of disclosures for research purposes from FHCRC Clinical Research Data Systems.

V. Provision of the Accounting of Disclosures

A. UW Medicine Compliance facilitates the accounting of disclosures request from the patient to ensure all disclosures are included in the accounting of disclosures report from all UW Medicine entities. Compliance will obtain the accountings from the sources identified in Section IV and review the medical record for accountings of disclosures.

B. UW Medicine must respond to an individual’s request for an accounting of disclosures no later than 60-days after receipt of the request.

C. If UW Medicine is unable to provide the accounting within the 60-days of the request, then a 30-day extension may be made provided that:

   1. UW Medicine provides the individual with a written statement of the reason for the delay along with the expected date the accounting will be provided; and

   2. Only one extension period may be taken.

D. Prior to providing the accounting of disclosures to the requestor, UW Medicine Compliance reviews the disclosures to determine if knowing about any of the disclosures may put the patient in harm’s way.

E. UW Medicine will not charge any individual for the first accounting of disclosures in any 12-month period.

F. UW Medicine may impose a reasonable charge for any additional requests made by the same individual within the same 12-month period, and if a charge is to be imposed, UW Medicine will provide the individual:

   1. With advance notice of the fee; and

   2. The opportunity to withdraw or modify the request.
VI. Documentation Requirements for an Accounting of Disclosures

UW Medicine Compliance is responsible for receiving and processing requests for accounting of disclosures, and shall retain the documentation in written and/or electronic format for a minimum of six years.

A. UW Medicine Compliance maintains a record of all individuals requesting reports of disclosure and the disposition of those requests, and will document in written or electronic form and retain the following in the Compliance Events Database:

1. All information listed above that is required to be included in an accounting;

2. The written accounting that UW Medicine provides to an individual pursuant to the individual’s request for an accounting of disclosures.

REGULATORY/LEGISLATION/REFERENCES

- 45 CFR Part 160 and 164; section 164.528 “Accounting of Disclosures of Protected Health Information”
- RCW 70.02 Medical Records - Healthcare Information Access and Disclosure
- WAC 246-08-400 How much can a medical provider charge for searching and duplicating medical records?

PROCEDURE ADDENDUM(s) REFERENCES/LINKS

- PP-00 Glossary of Terms
- PP-13 Use & Disclosure of Protected Health Information Related to Inpatient Facility Directories & for Disaster Relief Purposes
- PP-15 Use & Disclosure of Protected Health Information for Involvement in Individual’s Care and Notification
- UW Medicine Accounting of Disclosures Database, https://know1.mcis.washington.edu/disclosure_accounting/

Forms/Instructions


ROLES AND RESPONSIBILITIES

Defined within POLICY.
### AUTHORITIES

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<td>UW Medicine Executive Compliance Committee</td>
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### APPROVALS

UW Privacy Official
Johnese M. Spisso, Chief Health System Officer,
UW Medicine & Vice President for Medical Affairs, UW