

Name of Policy: Minimum necessary guidelines for use/disclosure of protected health information			
Policy Number: 3364-90-02		Effective date: August 14, 2023	
Approving Officer: President		Original effective date: April 14, 2003	
Responsible Agent: Privacy Officer and Health Information Management Director			
Scope: Hybrid and affiliate covered entity of the University of Toledo			
Keywords: Do not capitalize unless a proper noun			
	New policy	X	Minor/technical revision of existing policy
	Major revision of existing policy		Reaffirmation of existing policy

(A) Policy statement

The university of Toledo (UToledo) will make reasonable efforts to limit the use and disclosure of individually identifiable protected health information to the minimum necessary to comply with

determined by the privacy and security committee and documented on the hybrid list that can be located on the UToledo healthcare compliance and institutional privacy website located at https://www.utoledo.edu/offices/compliance/What_is_HIPAA.html.

(D) Definitions

- (1) Continuity of care: continuation of care over time for an individual patient. Continuity of care for a patient refers to the coordination of actions by an integrated medical team that is actively managing care.
- (2) Required by law: 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.

(E) Procedure

- (1) The exceptions to the minimum necessary restrictions set forth in this policy and under HIPAA, do not apply to the following uses and disclosures:
 - (a) A healthcare provider for treatment purposes, including for emergencies;
 - (b) The individual who is the subject of the information seeks access;
 - (c) Request is made pursuant to a valid authorization;
 - (d) Accounting of disclosures of PHI;
 - (e) Uses or disclosures required for compliance with HIPAA; and
 - (f) The secretary of the department of health and human services as may be required for compliance and enforcement purposes;
 - (g) Disclosures required by law.
- (2) Access for treatment purposes

UToledo uses role-based access controls when allowing access to a patient's medical record, both paper and computerized, in order to provide appropriate and efficient treatment to a patient during the patient care episode.
- (3) Minimum necessary requests for PHI must be limited to what is reasonably necessary to accomplish the purpose of the request. Requests made on a routine and recurring basis must be limited to the PHI necessary to accomplish the purpose of the request.

(a) V

	Next review date:
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