

STANDARD ADMINISTRATIVE PROCEDURE

16.99.99.M0.08 Minimum Use Necessary

Approved April 27, 2020

Next scheduled review: April 27, 2025

SAP Statement

This standard administrative procedure applies to the Texas A&M University (TAMU) components that have been designated as a TAMU HIPAA Health Care Component (TAMU HIPAA HCC) in Standard Administrative Procedure 16.99.99.M0.01, *Designation as a Hybrid Entity*.

Definitions

[Click to view Definitions](#)

Official Procedure

1. GENERAL

TAMU HIPAA HCC personnel routinely use PHI about patients to carry out their duties. TAMU HIPAA HCC personnel may also need to disclose PHI about patients to persons outside the TAMU HIPAA HCC or to request PHI from these persons. TAMU HIPAA HCC personnel must limit their uses and requests of PHI to the minimum amount of information necessary to accomplish the purpose.

1.1 This procedure does not apply to the following types of uses, disclosures, and requests:

1.1.1 Requesting patient information from, or releasing patient information to, another health care provider for treatment purposes.

- 1.1.2 Releasing patient information to the patient, or to a personal representative who is authorized to make health care decisions for the patient or the patient's estate.
- 1.1.3 Using or releasing patient information pursuant to a patient's written authorization.
- 1.1.4 Releasing protected health information required by the Department of Health and Human Services in connection with an investigation or determination of the TAMU HIPAA HCC's compliance with the HIPAA privacy regulations.
- 1.1.5 Using or releasing protected health information as required by law.

2. VIOLATIONS

The TAMU Privacy Officer has general responsibility for implementation of this procedure. Employees who violate this procedure will be subject to disciplinary action up to and including termination of employment. Anyone who knows or has reason to believe that another person has violated this procedure should report the matter promptly to his or her supervisor or the TAMU Privacy Officer. All reported matters will be investigated and, where appropriate, steps will be taken to remedy the situation. Where possible, every effort will be made to handle the reported matter confidentially. Any attempt to retaliate against a person for reporting a violation of this procedure will itself be considered a violation of this procedure that may result in disciplinary action up to and including termination of employment.

ⁱ HIPAA Code: §164.502(b)

Contact Office

Office of University Risk, Ethics, and Compliance