HIPAA Final Omnibus Rule University of California San Francisco

On January 25, 2013, the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR) published the HIPAA Final Omnibus Rule, which amends and strengthens the HIPAA Rules. The compliance date is **September 23, 2013**. Please visit http://www.hhs.gov/news/press/2013pres/01/20130117b.html for more information.

Below is a summary of some of the new regulations and what you need to know to comply. If you have additional questions, please contact the Privacy Office at (415) 353-2750 or email Privacy@ucsf.edu.

Category	Summary of New Regulations	What You Need To Know
Business Associates	 Expands the definition of a Business Associate (BA) BAs directly liable for compliance with certain HIPAA provisions BA's subcontractors are considered BA's themselves and subject to the same HIPAA provisions Updated Business Associate Agreement (BAA) provisions 	 ✓ If you have a third-party relationship that involves patients' protected health information (e.g., medical transcriptionists, attorneys, consultants, cloud service providers), contact your Purchasing or Procurement Office to ensure you execute a current BAA ✓ For existing BAs, Purchasing/Procurement will work with you to execute updated BAAs
Self-Pay Restrictions	The Covered Entity must agree to a patient's request to restrict disclosure of their PHI to a health plan if the PHI pertains to services for which the patient paid out of pocket in full	 ☑ UCSF must agree to the restriction request if: It is related to a disclosure of PHI to a health plan; and The patient paid for the services out of pocket in full ☑ Contact your billing office with questions ☑ For Medical Center patients, refer to Appendix A in Policy 5.02.01, Confidentiality, Access, Use and Disclosure of Protected Health Information and Patient Privacy
Notice of Privacy Practice Make the learner it will My standard the My standa	Requires changes to the Notice of Privacy Practice (NPP)	 UCSF's NPP was updated to reflect the Final Omnibus Rule provisions and must be provided to all new patients beginning September 23, 2013 Contact your Admitting/Registration Department to request an updated NPP Destroy all copies of the previous NPP and Acknowledgement Form; do not provide them to patients Note: the current version has the Effective Date of September 23, 2013 listed on the front cover
Right to Receive Electronic Copies	Provides patients the right to obtain an electronic copy of their PHI	 ✓ If a patient requests an electronic copy of their medical records and if they are maintained electronically, UCSF must provide electronic copies ✓ Refer the medical records request to the appropriate medical records department (e.g., HIMS for the Medical Center)
Research	 Permits the use of a compound authorization for conditioned and unconditioned authorizations Permits the use of an authorization to encompass future research studies 	 ☑ The UC Permission to Use Personal Health Information for Research form is being updated and will be available in the coming months ☑ Contact Committee on Human Research (CHR) for questions regarding research authorization

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Child Immunization Records	Provides greater flexibility to disclose student immunization records to schools where state law requires them to have proof of immunization for students (this includes California schools)	V	While you still need to obtain parental agreement to disclose the immunization records, this agreement can now be <i>verbal</i> or written If verbal agreement is obtained, it must be documented in the patient's record	
Emailing Patients	Clarifies that Covered Entities may send unencrypted emails to individuals if they have advised the individual of the risk, and the individual still prefers the unencrypted email		Utilize MyChart to communicate electronically with patients where possible If a patient does not want to communicate via MyChart or secure, encrypted email, you must notify the patient of the risks of sending unencrypted email (see standard language below) If the patient still prefers unencrypted email, document that in the patient's record Consider the following standard language to notify patients of the risks of sending unencrypted email: "While UCSF strives to communicate with patients in a secure manner, UCSF cannot guarantee secure delivery of email transmissions sent outside of the UCSF MyChart system and the UCSF Secure Email system, and the unencrypted information in the email could be read by a third party. Should you still wish for your correspondence with UCSF to be sent in an unencrypted format, we will honor your request."	
Marketing	 Modifies the definition of "marketing" which requires patient authorization Marketing now includes communications for treatment and healthcare operations if the Covered Entity receives financial remuneration from a third party whose product or service is marketed in the communication 		If you communicate with patients about products or services, and receive payment from a 3 rd party to make that communication, you must obtain patient authorization before doing so The authorization must disclose the fact that UCSF is receiving financial remuneration from the 3 rd party Contact the Marketing Department for questions relating to marketing communications	
Sale of PHI	Prohibits a Covered Entity or BA from receiving remuneration in exchange for PHI without an individual's authorization, with limited exceptions (e.g., for treatment and payment purposes; as required by law)	Ø	Please contact the Privacy Office if you plan to share PHI with a 3 rd party and will receive compensation in exchange for the PHI You must obtain authorization prior to disclosing the PHI	
Decedent Information	Provides greater flexibility to use and disclose decedents' PHI 50 years after death	V	Contact the appropriate medical records department (e.g., HIMS for the Medical Center) for medical records requests	
Breach Determination	Changes the required risk assessment to determine whether a privacy "breach" has occurred under HIPAA. The new risk assessment is more objective and evaluates whether PHI has been compromised.	V	Continue to report all actual or suspected privacy breach incidents to the UCSF Privacy Office The UCSF Privacy Office will continue to assess all incidents to determine whether a privacy breach has occurred under HIPAA	
Genetic Information	Clarifies that genetic information is health information	I	Be aware that use and disclosure of genetic information must be in accordance with the HIPAA regulations Continue to report actual or suspected privacy breach incidents involving genetic information to the UCSF Privacy Office	