

Individual's Access to PHI

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Policy # 3.2

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Rights to Access PHI

Purpose: To establish written policies and procedures regarding the rights of Individuals to access, inspect and/or obtain copies of their PHI in a timely manner.

Policy: Travis County Covered Components process Individual requests for access to PHI maintained in a designated record set in accordance with the procedures outlined below.

Process:

Request Submission

- 1. Workforce Members of the Covered Component directs Individuals to make requests for accessing, inspection of, or copies of PHI to the HIPAA Compliance and Privacy Officer via submission of a Request to Access PHI Form or an email to privacy@traviscountytx.gov.
- 2. Upon receipt of a request, the Covered Component or Compliance and Privacy Office informs the Individual of such receipt and logs the request in order to track it and issue a timely response.
- 3. Workforce member at the Covered Component or the Compliance and Privacy Office accesses the Individual's PHI and securely transmits it to the requestor. In the event that the Individual's PHI is not maintained in a designated record set by Travis County, the Covered Component makes the Privacy Office aware of this fact, and the Privacy Office closes the request upon issuing a response to the requesting Individual.
 - a) When Travis County has knowledge of where the PHI is maintained, the HIPAA Compliance and Privacy Office response will include information about where the Individual may direct his or her request.

Determining Access in Whole, or in Part

1. The HIPAA Compliance and Privacy Officer, in consultation with the departmental Privacy Liaison and the Legal Counsel, **as needed**, review the request for PHI, **as necessary**. Requests are granted to the extent that they are not otherwise prohibited/unauthorized. The allowed reasons for denying access to an Individual include, but are not limited to, those set forth in the table below.

Table 1: Bases for denials.

Basis	Description or criteria
PHI is specifically excepted from rights of access under HIPAA	 Psychotherapy Notes Information compiled to use, or anticipated to be used in a civil, criminal, or administrative action or proceeding.
Access to PHI is likely to endanger the life or physical safety of the Individual or another person; or access would jeopardize the health, safety, security, or rehabilitation of an Individual inmate or another person. **Special Note: Please see website link below to Inmates Rights on who can access their PHI. Confidentiality and Release of Protected Health Information (texas.gov)	 The covered component is: All or part of a correctional institution or A Business Associate covered entity acting on behalf of a correctional institution and either the health, safety, security, custody, or rehabilitation of the Individual or of other inmates would be jeopardized, or
	 The safety of any officer, employee, or other person at a correctional facility, or responsible for transporting an inmate would be jeopardized
PHI was created or obtained in the course of research and such research is still in progress	 The PHI was created or obtained by a covered health care provider conducting research The Individual agreed to the denial of access during the research phase, and The health care provider has informed the Individual that the right of access will be reinstated upon completion of the research
PHI was confidentially obtained	The PHI was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be likely to reveal the source of the information

Notification of the Response

- 1. The HIPAA Compliance and Privacy Officer sends a written notification to the requesting Individual, **in plain** language. The notice must include the following information:
 - a. Whether or not access is granted to the whole designated record set, or only part of it.
 - b. The format in which Travis County will provide access as discussed in Procedure 7 of this policy,
 - c. Whether any fees apply to the requested access as discussed in Procedure 8 of this policy, and
 - d. If access is denied:
 - i. the basis of the denial
 - ii. a statement that the denial is reviewable and instructions on how an Individual can request a review, if applicable
 - iii. a description of how the Individual may complain to Travis County about our privacy policies or to the Secretary of the U.S. Department of Health and Human Services
 - e. The HIPAA Compliance and Privacy Officer's name, phone number, and email

Providing Access

- 1. Covered Components provide the Individual, or the person designated by the Individual, with access to the requested PHI within **30** days of the request.
 - a. If the Covered Component cannot fulfill the request for access within 30 days, the Covered Component may ask the HIPAA Compliance and Privacy Officer for an extension with sufficient reason to extend.
 - b. The HIPAA Compliance and Privacy Officer may approve one (30) day extension.
 - c. Upon the granting of an extension, the HIPAA Compliance and Privacy Officer (or Department, if deemed more appropriate) sends the Individual a written statement containing the reasons for the delay and the date by which Travis County expects to respond to the request.
 - <u>NOTE</u>: Before providing PHI to the person designated by the Individual, workforce members
 must verify the identity of the person requesting PHI (see the procedure entitled: "<u>Verifying</u>
 the Identity and Authority of a Person Requesting PHI") and use reasonable safeguards to
 protect the information that is being used or disclosed, such as ensuring that the third-party
 recipient's contact information is correctly entered prior to transmission.
- 2. The HIPAA Compliance and Privacy Officer, or Covered Component as mutually agreed upon, provides access to the PHI in the format requested by the Individual, if that format is readily available. If the requested format is not readily available, Travis County provides the PHI in a readable hard copy, or in another form agreed to by Travis County and the Individual.

- a. When providing PHI to an Individual, **in any form**, Workforce Members ensure that reasonable safeguards are in place to protect the PHI. For example, before sending an email to an Individual, Workforce Members will inform the Individual that all emails containing PHI will be **sent encrypted**. Workforce Members will send a 2nd email with instructions on how to decrypt.
- b. Workforce Members **do not** provide copies of records on external media storage devices **provided by the individual** such as USB ("flash" or "thumb") drives or CD's. Plugging such devices into County equipment risk introduction of viruses and other malicious software onto the County's computer network. In such cases, the County may offer an alternative, such as the provision of that type of media or other means.
 - NOTE: A summary or explanation of the requested PHI will be provided in lieu of access only when the Individual agrees to the summary or explanation and pays any related fees in advance.

Fees Imposed for Providing Access

1. The HIPAA Compliance and Privacy Officer determines if there are any cost-based fees associated with the access. Unless the actual costs associated with labor, copying, supplies, postage, retrieval from storage, or preparation of summary information represents a high cost to the County, Travis County tries to provide copies of PHI at no cost. Otherwise, the County charges a flat, cost-based fee not to exceed **\$10.00**.

Review of Denial of Access

- 1. When Travis County denies an Individual's request for access on the ground that a licensed The Health Care Professional ("Reviewing Official") in a Travis County covered component has determined, in the exercise of his or her professional judgement, that:
 - a. Granting access to the PHI to the Individual or to a personal representative of the Individual is likely to endanger the life or physical safety of the Individual or another person.
 - b. The PHI references another person (other than a health care provider) and the access requested will likely cause substantial harm to that other person.
 - c. The Individual may request a review of denial by submitting a written request to the HIPAA Compliance and Privacy Officer or Privacy Liaison.
- 2. The HIPAA Compliance and Privacy Officer or Privacy Liaison will forward the request for review to a qualified licensed The Health Care Professional ("Reviewing Official") within the Covered Component. A qualified licensed The Health Care Professional ("Reviewing Official") is one that:
 - a. Did not participate in the original denial of access.
 - b. Is a workforce member of the Covered Component.
- 3. The Health Care Professional ("Reviewing Official") will determine, within 10 business days, whether to deny access based on the criteria set forth in Procedure 11 above. The Health Care Professional ("Reviewing Official") will report his or her decision to the HIPAA Compliance and Privacy Officer.

- 4. The HIPAA Compliance and Privacy Officer will inform the Individual of the Health Care Professional ("Reviewing Official")'s determination.
 - a. If the Health Care Professional ("Reviewing Official") determines that the Individual should be granted access, then the Covered Component is notified and will provide access as described in Procedures 7 and 8.

5. Documentation

The HIPAA Compliance and Privacy Office will appropriately document the resolution of the request and, where applicable, the delivery of the PHI.