

HIPAA/PRIVACY AND SECURITY OF CONFIDENTIAL DATA POLICIES

UConn Health commits to protecting the privacy of information entrusted to us in the course of fulfilling our clinical, academic, and research missions. The Office of Healthcare Compliance & Privacy at UConn Health focuses on the implementation of a Healthcare Compliance and Privacy Program directly relevant to operations and patient care in clinical environments and related business functions. The Privacy team serves as a resource for all workforce members, including residents and fellows, and patients alike, responding to privacy-related questions and concerns, providing education and guidance on HIPAA and other federal and state privacy laws, and investigating suspected privacy incidents.

HIPAA

All UConn Health residents and fellows are considered UConn Health Workforce Members and must follow Health Insurance and Portability and Accountability Act (HIPAA) rules and related UConn Health policies and procedures. HIPAA establishes standards to protect individuals' medical records and other protected health information (PHI), granting patients some control over certain parts of their health information, and requires organizations to implement practices to keep PHI safe. PHI includes any information created or received by UConn Health that relates to the health or condition of an individual, the provision of healthcare to an individual, or payment for the provision of healthcare to an individual. As residents and fellows, you must comply with applicable HIPAA requirements including maintaining confidentiality, integrity, and availability of our patients' PHI at all times and in all forms.

Key HIPAA Privacy Principles

- **Verify Identity** – Identity must be verified with a minimum of two unique identifiers whenever accessing, using, or disclosing PHI. It is vitally important to identify the correct individual for many reasons, including but not limited to patient safety, protection of privacy, and proper billing. UConn Health policy requires, at a minimum, verifying identity using an individual's full name and date of birth. Regulation requires the use of as many identifiers as necessary to ensure identification of the correct person.
- **The Minimum Necessary Rule** – Uses or disclosures of PHI or requests for PHI must be limited to the minimum amount of PHI necessary to accomplish the intended purpose of the use, disclosure, or request, with limited exceptions (e.g., disclosures to or requests by a healthcare provider for treatment purposes and disclosures to a patient or their legally authorized representative). In addition, only use and disclose PHI in accordance with UConn Health policy governing the use and disclosure of PHI.

You must not access the PHI of an individual with whom you do not have a UConn Health-related treatment, payment, or healthcare operation responsibility including, but not limited to, using work-issued access credentials to view or access:

- a. Your own medical records;
- b. The medical records of another resident, fellow, or colleague; or
- c. The medical records of family members, including your own minor children, unless you have a UConn Health-related treatment, payment, or healthcare operation responsibility to do so.

- **Determine the Need for Authorization for Uses and Disclosures** – PHI may be used and disclosed without authorization for specific treatment, payment, or healthcare operations. In general, obtain authorization prior to using patient data for activities such as presenting at external conferences or taking pictures/videos for educational or academic purposes unrelated to patient care.
- **Use Appropriate Safeguards** – Appropriate safeguards include but are not limited to:
 - Using only approved methods and technologies for accessing and disclosing PHI
 - Using discretion when discussing a patient's condition during rounds
 - Speaking quietly and avoiding conversations in public areas
 - Not leaving PHI unsecured or unattended
 - Disposing of paper PHI in locked shredder bins
- **Reporting Privacy Incidents or Concerns**

If you have a privacy-related question or need guidance, contact the Office of Healthcare Compliance & Privacy at ohcp@uchc.edu or x6060. Actual or suspected privacy incidents must be reported immediately to any of the following:

 - Your department or unit manager
 - Office of Healthcare Compliance & Privacy
 - University of Connecticut and UConn Health toll-free REPORTLINE at 1-888-685-2637

Organizational Confidentiality

In the course of your residency or fellowship, UConn Health may grant you access to various types of confidential data. Residents and fellows must abide by the policies and procedures governing privacy and security of confidential data at the University of Connecticut School of Medicine (SOM) as well as at all affiliated sites. This policy applies both during and after employment, volunteering, studying, and/or when business with UConn Health has been completed or terminated. Confidential data includes but is not limited to:

- PHI
- Ongoing negotiations (labor contracts, leases, purchases)
- Pending litigation and/or investigations
- Proprietary information that allows UConn Health to be more competitive in the marketplace, e.g., an innovative approach described in a grant proposal
- Financial information
- Faculty, employee, and student information including personnel and medical files
- IDs and/or passwords for access to UConn Health computing resources
- Research data requiring protections (clinical trials, patient survey responses, etc.)

Key Privacy Policies

[2002-43 - Confidentiality](#)

[2023-06 HIPAA Patient Rights](#)

[2003-21 HIPAA Privacy – Minimum Necessary](#)

[2023-03 Identification and Protection of Protected Health Information \(PHI\)](#)

[2003-09 Responding to Breaches of Privacy or Security of Protected Health Information \(PHI\) and/or Personal Information](#)

[2023-05 Use and Disclosure of PHI](#)

[2014-03 Visual, Audio or Recording of Patient Data Obtained Through Any Medium](#)

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