



## ESSENT HEALTHCARE, INC.

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<b>Section:</b>	<b>HIPAA Privacy</b>	<b>Effective Date:</b>	<b>4/14/03</b>
<b>Subject:</b>	<b>Accounting of Disclosures</b>	<b>Revision Date:</b>	<b>5/05/05</b>
<b>Policy #:</b>	<b>HIPAA-012</b>	<b>Review Date:</b>	<b>9/14/09</b>
<b>Responsible Party:</b>	<b>HIPAA Privacy Officers</b>	<b>Revision #:</b>	<b>2</b>

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**Scope:**

This policy applies to all entities of Essent Healthcare, Inc., (“Essent”).

**Purpose:**

The purpose of this policy is to outline Essent policy regarding accounting for disclosures of Protected Health Information (PHI) as required by the Health Insurance Portability and Accountability Act (HIPAA).

**Policy:**

With certain exceptions, all individuals have a right to receive an accounting of disclosures of their PHI made by an Essent facility in the six years prior to the date on which the accounting is requested. It is the policy of Essent to provide individuals, upon written request, with an accounting of disclosures of PHI in accordance with the HIPAA requirements and as outlined below.

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**Procedure:**

1. All requests for accounting of disclosures must be in writing and must come from the person who is the subject of the information or their legal guardian (personal representative).
  - a. If the facility has reason to believe that the legal guardian (“personal representative”) has subjected an individual to domestic violence, neglect, or abuse; the facility may refuse to provide an accounting of disclosures to that individual.
  - b. Hospitals must exclude disclosures to a health oversight agency or law enforcement official from the accounting, for the time period specified by the official, if the official provides the facility with a statement that the inclusion of the disclosure in the accounting would be reasonably likely to impede the agency or official’s activities.  
*Such requests need not be in writing but must be clearly documented by the facility.*
2. Each Essent facility must implement procedures for tracking disclosures and providing an accounting of disclosures to any individual who requests one. Tracking sheets and/or disclosure logs may be maintained in whatever format the facility deems appropriate and must be retained permanently. Effective April 14, 2003, this disclosure must cover either the time



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period specified by the requestor, or the six year period leading up to the request (excluding dates prior to April 14, 2003). **The following are exempted from the disclosure accounting requirement (and need not be tracked or disclosed):**

- a. Disclosures made to carry out treatment, payment, or health care operations
- b. Disclosures made to the individual who is the subject of the information
- c. Incidental disclosures
- d. Disclosures related to the facility directory
- e. Disclosures made in response to national security or for intelligence purposes
- f. Disclosures made to correctional facilities or law enforcement officials involved in corrections. Generally speaking, this exception relates to the provision of care to inmates and other incarcerated individuals.
- g. Limited data set disclosures
- h. Disclosures that occurred prior to April 13, 2003

**3. All other disclosures that are not for treatment, payment, or healthcare operations (or excepted above) MUST be documented in the “disclosure log” maintained by the facility. This includes disclosures made by business associates, disclosures made for research, and disclosures made in accordance with the Privacy Notice (i.e. national security, law enforcement, etc...). Disclosures that are authorized by the individual but not made to the individual must also be tracked and disclosed. Examples of disclosures that must be tracked and reported include disclosures:**

- a. Regarding victims of abuse, neglect, or domestic violence {164.512(c)}
- b. In connection with judicial and administrative proceedings (except where no direct identifiers are disclosed) {164.512(e)}
- c. To law enforcement or as required by law {164.512(f)}
- d. To coroners, medical examiners, and funeral directors {164.512(g)}
- e. For cadaveric organ, eye, or tissue donation {164.512(h)}
- f. For research pursuant to IRB or Privacy Board waiver of authorization (except where no direct identifiers are disclosed) {164.512(i)}
- g. To avert a serious threat to health or safety {164.512(j)}
- h. For military and veterans activities {164.512(k)(1)}
- i. For protective services of the President of the United States and others {164.512(k)(3)}
- j. In connection with medical suitability determinations {164.512(k)(4)}



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- k. By covered entities that are government programs providing public benefits {164.512(k)(6)}**
    - l. For workers compensation {164.512(l)}**
- 4. Inappropriate disclosures, whether made accidentally, out of ignorance, or due to malfeasance must be documented and included in any accounting of disclosures. This does not include “incidental disclosures” as defined by HIPAA.
- 5. Essent facilities must temporarily suspend an individual’s right to an accounting of disclosures upon written request from a health oversight agency or law enforcement official. Such suspensions are limited to 30 days from that date of the request.
- 6. Disclosure accountings must include the following information:
  - a. A listing of all disclosures of PHI that occurred during the six year period prior to the date of the request for disclosure, including disclosures to or by business associates of the facility.
  - b. The date of the disclosure
  - c. The name of the entity or person who received the information and, if known, the address of the entity
  - d. A brief description of the PHI disclosed
  - e. A brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure (or a copy of the written request for disclosure)
- 7. Essent facilities must provide disclosures no later than 60 days after the request is received.
- 8. Essent facilities must provide the first accounting to an individual in any 12 month period without charge. A reasonable, cost-based fee for each subsequent request may be imposed provided that the individual is notified of the cost at the time the request is made, and the individual is given the opportunity to withdraw or modify their request to reduce the fee.
- 9. Each facility must retain the following information for a period of six years:
  - a. The information required to be included in an accounting of disclosures
  - b. The written accounting that is provided to the individual
  - c. The titles of the persons responsible for receiving and processing requests for



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accountings by individuals.

**References:**

Health Insurance Portability and Accountability Act  
FR 12/28/00 pages 82559-82561  
FR 12/28/00 pages 82739-82744