ARECTRAN	Pennsylvania Hospital & Surgery Center ADMINISTRATIVE POLICY MANUAL	Page 1 Effective: 0408
	SUBJECT: HIPAA POLICY AND PROCEDURE FOR RESEARCH POLICY NUMBER: HIP17	
	POLICY NUMBER: HIP17	

POLICY

Committee Approval: HIPAA

Issued:

Administrative Policy Review Committee: April 2003 April 2004 April 2005 April 2006 April 2007 April 2008

Attachment(s):

Related Policies: See HIPAA Policies 1-21 in Administrative Manual For purposes of this policy, Pennsylvania Hospital includes all off campus licensed facilities, including but not limited to the Surgery Center of Pennsylvania Hospital.

It is the policy of the Pennsylvania Hospital (PAH) to recognize that Protected Health Information (PHI) used in research must be handled in accordance with HIPAA privacy regulations and applicable law.

PURPOSE

This policy outlines the procedures for using PHI in research.

SCOPE

PAH staff, students, and employees who utilize PHI of PAH patients.

IMPLEMENTATION

This policy will be implemented by all employees, volunteers, trainees, medical staff, and other persons working for or in PAH.

DEFINITIONS

Protected health information (PHI) is information that is created or received by UPHS and the School of Medicine; and relates to the past, present, or future physical or mental health or condition of a patient; the provision of health care to a patient; or the past, present, or future payment for the provision of health care to a patient; and that identifies the patient or for which there is a reasonable basis to believe the information can be used to identify the patient. PHI includes information of persons living or deceased. The following components of a patient's information also are considered PHI: a) names; b) street address, city, county, precinct, zip code; c) dates directly related to a patient, including birth date, admission date, discharge date, and date of death; d) telephone numbers, fax numbers, and electronic mail addresses; e) Social Security numbers; f) medical record numbers; g) health plan beneficiary numbers; h) account numbers; i) certificate/license numbers; j) vehicle identifiers and serial numbers, including license plate numbers; k) device identifiers, including finger and voice prints; n) full face photographic images and any comparable images; and o) any other unique identifying number, characteristic, or code.

Pennsylvania Hospital & Surgery Center	Page 2 Effective: 0408
ADMINISTRATIVE POLICY MANUAL	
SUBJECT: HIPAA POLICY AND PROCEDURE FOR RESEARCH	
POLICY NUMBER: HIP17	

PROCEDURE

I. PERMISSIBLE USES AND DISCLOSURES FOR RESEARCH:

PAH may use and disclose PHI for research purposes under any of the following circumstances:

A. With an authorization on the PAH HIPAA Research Authorization Form signed by the individual.

B. Where the Institutional Review Board has waived the HIPAA authorization requirement.

C. Where PAH is using or disclosing only data contained in a limited data set and PAH has entered into a data use agreement with the recipient.

D. Where PAH is using or disclosing only "de-identified data."

For details regarding the appropriate use of protected health information for research, please check the Office of Human Research web site at: http://www.med.upenn.edu/ohr.

<u>/s/Kathleen Kinslow</u> Kathleen Kinslow, CRNA, EdD, MBA Executive Director 05/05/08

Date

Disclaimer: Any printed copy of this policy is only as current as of the date it was printed; it may not reflect subsequent revisions. Refer to the on-line version for most current policy.

Use of this document is limited to University of Pennsylvania Health System workforce only. It is not to be copied or distributed outside the institution without administrative permission.