



Issuing Department: Internal Audit, Compliance, and Enterprise Risk Management

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General Uses and Disclosures of PHI

Policy

NYU Langone Health **may** Use and Disclose Protected Health Information (“PHI”):

- for Treatment, Payment and Health Care Operations,
- to the patient or pursuant to the patient’s valid Authorization,
- to a legal Personal Representative of the patient,
- to family and friends involved in the patient’s care and for notification purposes as permitted by law,
- to Business Associates subject to a Business Associate Agreement,
- to create information that is not individually identifiable health information (known as De-Identified Information) or Limited Data Sets,
- for Research, Marketing, or Fundraising purposes as permitted by law,
- incidentally to a permitted Use or Disclosure, and
- as otherwise permitted or required by state or federal laws or regulations, for example, to a public health authority for public health activities or in response to a subpoena, discovery request or other lawful process.

NYU Langone Health **must** Disclose PHI:

- to the patient or the patient’s Personal Representative in response to a request for access or a request for an accounting of Disclosures in accordance with NYU Langone Health policy, and
- as required to comply with investigations and compliance reviews by the U.S. Department of Health and Human Services or as otherwise required by state or federal laws or regulations.

Uses or Disclosures without Authorization that are not permitted by state or federal laws or regulations may only be made subject to a patient’s written Authorization.

All applicable Uses and Disclosures of a decedent’s PHI will be in compliance with these policies for a period of fifty (50) years following the death of the individual.

NYU Langone Health will limit Use and Disclosure of PHI to the minimum necessary to accomplish the intended purpose of the Use or Disclosure. An incidental Use or Disclosure is a secondary Use or Disclosure that cannot reasonably be prevented, is limited in nature, and occurs as by-product of an otherwise permitted Use or Disclosure. NYU Langone Health implements

reasonable administrative, technical, and physical safeguards to limit incidental Uses and Disclosures of PHI and comply with the minimum necessary requirements.

State and federal laws require additional safeguards for the release of information that is deemed especially sensitive, such as Confidential HIV-Related Information, alcohol and drug abuse information, psychiatric information, genetic information, and reproductive health information. In most situations, a special Authorization or attestation is required before releasing any of this type of information. Workforce members should consult with the Sensitive PHI policy before using or disclosing sensitive PHI.

Workforce Members should consult the applicable policy and procedure before Using or Disclosing a patient's PHI for purposes other than Treatment, Payment, or Health Care Operations.

Related Documents

Disclosures of PHI to Family or Friends

HIPAA Privacy Policies, Procedures, and Documentation

HIPAA Privacy Policies and Procedures Definitions

Minimum Necessary Standard for Uses and Disclosures of PHI

Providing PHI to Personal Representatives

Sensitive PHI

Use and Disclosure of PHI for Fundraising

Use and Disclosure of PHI for Marketing

Use and Disclosure of PHI for Research

Use and Disclosure of PHI in the Patient Directory

Uses and Disclosures of PHI for Treatment, Payment, and Health Care Operations

Uses and Disclosures Requiring Patient Authorization

Uses and Disclosures Required or Permitted by Law

Legal Reference

45 C.F.R. §164.502

45 C.F.R. §164.530

This version supersedes all NYU Langone Health (as defined in this Policy) previous policies, including but not limited to NYU Hospitals Center, New York University School of Medicine, Lutheran Medical Center, and Winthrop University Hospital.