**UW Stevens Point IRB: HIPAA Quick Reference Guide**

**What is HIPAA?**

The Health Insurance Portability and Accountability Act (HIPAA) is a complex regulation that affects many researchers.  HIPAA is designed to protect the use and disclosure of individually identifiable health information (also defined as Protected Health Information or PHI). PHI is defined as any of the 18 HIPAA recognized identifiers **in combination with** health information.

**HIPAA recognized identifiers:**

1. Names;
2. All geographic subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes;
3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death;
4. Telephone numbers;
5. Fax numbers;
6. Electronic mail addresses;
7. Social security numbers;
8. Medical record numbers;
9. Health plan beneficiary numbers;
10. Account numbers;
11. Certificate/license numbers;
12. Vehicle identifiers and serial numbers, including license plate numbers;
13. Device identifiers and serial numbers;
14. Web Universal Resource Locators (URLs);
15. Internet Protocol (IP) address numbers;
16. Biometric identifiers, including finger and voice prints;
17. Full face photographic images and any comparable images;
18. Any other unique identifying number, characteristic, or code.

If in your research you collect Protected Health Information (PHI) from a Covered Entity and your department is deemed outside of the Covered Entity, HIPAA applies to your access of the Protected Health Information.

**HIPAA Authorization**

Researchers not in the Covered Entity may need a HIPPA Authorization Form ([HHS HIPAA FAQs](http://www.hhs.gov/ocr/privacy/hipaa/faq/authorizations/))

1. to access PHI for their study; or,
2. if they are conducting part of their study in the Covered Entity.

What is the difference between “consent” and “authorization” under the HIPAA Privacy Rule?

The Privacy Rule permits, but does not require, a covered entity voluntarily to obtain patient consent for uses and disclosures of protected health information for treatment, payment, and health care operations. Covered entities that do so have complete discretion to design a process that best suits their needs.

By contrast, an “authorization” is required by the Privacy Rule for uses and disclosures of protected health information not otherwise allowed by the Rule. Where the Privacy Rule requires patient authorization, voluntary consent is not sufficient to permit a use or disclosure of protected health information unless it also satisfies the requirements of a valid authorization. An authorization is a detailed document that gives covered entities permission to use protected health information for specified purposes, which are generally other than treatment, payment, or health care operations, or to disclose protected health information to a third party specified by the individual.

An authorization must specify a number of elements, including a description of the protected health information to be used and disclosed, the person authorized to make the use or disclosure, the person to whom the covered entity may make the disclosure, an expiration date, and, in some cases, the purpose for which the information may be used or disclosed. With limited exceptions, covered entities may not condition treatment or coverage on the individual providing an authorization.

**Business Associate Agreements (BAA) for Subcontractors**

([Sample HHS BAA template](http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/contractprov.html))

You may need a BAA for your research study if:

1. You have an outside person/entity that performs a service on behalf of the healthcare provider (including a researcher) or the healthcare institution during which individually identifiable health information is created, used or disclosed.
2. You (or your department) are not in the Covered Entity and you are either de-identifying information or creating a limited data set.

The IRB does not consider research collaborators as business associates unless they sign a contract to perform certain duties/functions that involves the use and/or disclosure of PHI. ([Sample HHS BAA template](http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/contractprov.html))

**Use/Disclosure of PHI without Authorization under HIPAA Privacy Rule:**

To use or disclose protected health information without authorization by the research participant, a covered entity must obtain one of the following:

1. **Documented Institutional Review Board (IRB) or Privacy Board Approval.** Documentation that an alteration or waiver of research participants’ authorization for use/disclosure of information about them for research purposes has been approved by an IRB or a Privacy Board (see criteria below for HIPAA Authorization Waiver). See 45 CFR 164.512(i)(1)(i). This provision of the Privacy Rule might be used, for example, to conduct records research, when researchers are unable to use de-identified information, and the research could not practicably be conducted if research participants’ authorization were required. A covered entity may use or disclose protected health information for research purposes pursuant to a waiver of authorization by an IRB or Privacy Board, provided it has obtained documentation of all of the following:
	1. Identification of the IRB or Privacy Board and the date on which the alteration or waiver of authorization was approved;
	2. A statement that the IRB or Privacy Board has determined that the alteration or waiver of authorization, in whole or in part, satisfies the three criteria in the Rule;
	3. A brief description of the protected health information for which use or access has been determined to be necessary by the IRB or Privacy Board;
	4. A statement that the alteration or waiver of authorization has been reviewed and approved under either normal or expedited review procedures; and
	5. The signature of the chair or other member, as designated by the chair, of the IRB or the Privacy Board, as applicable.
2. **Preparatory to Research**. Representations from the researcher, either in writing or orally, that the use or disclosure of the protected health information is solely to prepare a research protocol or for similar purposes preparatory to research, that the researcher will not remove any protected health information from the covered entity, and representation that protected health information for which access is sought is necessary for the research purpose. See 45 CFR 164.512(i)(1)(ii). This provision might be used, for example, to design a research study or to assess the feasibility of conducting a study.
3. **Research on Protected Health Information of Decedents**. Representations from the researcher, either in writing or orally, that the use or disclosure being sought is solely for research on the protected health information of decedents, that the protected health information being sought is necessary for the research, and, at the request of the covered entity, documentation of the death of the individuals about whom information is being sought. See 45 CFR 164.512(i)(1)(iii).
4. **Limited Data Sets with a Data Use Agreement.** A data use agreement entered into by both the covered entity and the researcher, pursuant to which the covered entity may disclose a limited data set to the researcher for research, public health, or health care operations. See 45 CFR 164.514(e). A limited data set excludes specified direct identifiers of the individual or of relatives, employers, or household members of the individual. The data use agreement must:
	1. Establish the permitted uses and disclosures of the limited data set by the recipient, consistent with the purposes of the research, and which may not include any use or disclosure that would violate the Rule if done by the covered entity;
	2. Limit who can use or receive the data; and
	3. Require the recipient to agree to the following:
		* + Not to use or disclose the information other than as permitted by the data use agreement or as otherwise required by law;
			+ Use appropriate safeguards to prevent the use or disclosure of the information other than as provided for in the data use agreement;
			+ Report to the covered entity any use or disclosure of the information not provided for by the data use agreement of which the recipient becomes aware;
			+ Ensure that any agents, including a subcontractor, to whom the recipient provides the limited data set agrees to the same restrictions and conditions that apply to the recipient with respect to the limited data set; and
			+ Not to identify the information or contact the individual.
5. **Research Use/Disclosure With Individual Authorization**. The Privacy Rule also permits covered entities to use or disclose protected health information for research purposes when a research participant authorizes the use or disclosure of information about him or herself. Today, for example, a research participant’s authorization will typically be sought for most clinical trials and some records research. In this case, documentation of IRB or Privacy Board approval of a waiver of authorization is not required for the use or disclosure of protected health information. To use or disclose protected health information with authorization by the research participant, the covered entity must obtain an authorization that satisfies the requirements of 45 CFR 164.508. The Privacy Rule has a general set of authorization requirements that apply to all uses and disclosures, including those for research purposes. However, several special provisions apply to research authorizations:
	1. Unlike other authorizations, an authorization for a research purpose may state that the authorization does not expire, that there is no expiration date or event, or that the authorization continues until the “end of the research study”.
	2. An authorization for the use or disclosure of protected health information for a research study may be combined with a consent to participate in the research, or with any other legal permission related to the research study.
	3. An authorization for the use or disclosure of protected health information for a research study may be combined with an authorization for a different research activity, provided that, if research-related treatment is conditioned on the provision of one of the authorizations, such as in the context of a clinical trial, then the compound authorization must clearly differentiate between the conditioned and unconditioned components and provide the individual with an opportunity to opt in to the unconditioned research activity.
	4. An authorization may be obtained from an individual for uses and disclosures of protected health information for future research purposes, so long as the authorization adequately describes the future research such that it would be reasonable for the individual to expect that his or her protected health information could be used or disclosed for the future research purposes.
6. **Accounting for Research Disclosures.** In general, the Privacy Rule gives individuals the right to receive an accounting of certain disclosures of protected health information made by a covered entity. See 45 CFR 164.528. This accounting must include disclosures of protected health information that occurred during the six years prior to the individual’s request for an accounting, or since the applicable compliance date (whichever is sooner), and must include specified information regarding each disclosure. A more general accounting is permitted for subsequent multiple disclosures to the same person or entity for a single purpose. See 45 CFR 164.528(b)(3). Among the types of disclosures that are exempt from this accounting requirement are:
	* Research disclosures made pursuant to an individual’s authorization;
	* Disclosures of the limited data set to researchers with a data use agreement under 45 CFR 164.514(e).

In addition, for disclosures of protected health information for research purposes without the individual’s authorization pursuant to 45 CFR164.512(i), and that involve at least 50 records, the Privacy Rule allows for a simplified accounting of such disclosures by covered entities. Under this simplified accounting provision, covered entities may provide individuals with a list of all protocols for which the patient’s protected health information may have been disclosed under 45 CFR 164.512(i), as well as the researcher’s name and contact information. Other requirements related to this simplified accounting provision are found in 45 CFR 164.528(b)(4).

1. **Transition Provisions.** Under the Privacy Rule, a covered entity may use and disclose protected health information that was created or received for research, either before or after the applicable compliance date, if the covered entity obtained any one of the following prior to the compliance date
* An authorization or other express legal permission from an individual to use or disclose protected health information for the research;
* The informed consent of the individual to participate in the research;
* A waiver of authorization approved by either an IRB or a privacy board (in accordance with 45 CFR  164.512(i)(1)(i)); or
* A waiver of informed consent by an IRB in accordance with the Common Rule or an exception under FDA’s human subject protection regulations at 21 CFR 50.24. However, if a waiver of informed consent was obtained prior to the compliance date, but informed consent is subsequently sought after the compliance date, the covered entity must obtain the individual’s authorization as required at 45 CFR 164.508. For example, if there was a temporary waiver of informed consent for emergency research under the FDA’s human subject protection regulations, and informed consent was later sought after the compliance date, individual authorization would be required before the covered entity could use or disclose protected health information for the research after the waiver of informed consent was no longer valid. The Privacy Rule allows covered entities to rely on such express legal permission, informed consent, or waiver of authorization of informed consent, which they create or receive before the applicable compliance date, to use and disclose protected health information for specific research studies, as well as for future unspecified research that may be included in such permission.

**Can an IRB approve a HIPAA Authorization Waiver?**

The following three criteria must be satisfied for an IRB or Privacy Board to approve a waiver of authorization under the Privacy Rule:

1. The use or disclosure of protected health information involves no more than a minimal risk to the privacy of individuals, based on, at least, the presence of the following elements:
	1. an adequate plan to protect the identifiers from improper use and disclosure;
	2. an adequate plan to destroy the identifiers at the earliest opportunity consistent with conduct of the research, unless there is a health or research justification for retaining the identifiers or such retention is otherwise required by law; and
	3. adequate written assurances that the protected health information will not be reused or disclosed to any other person or entity, except as required by law, for authorized oversight of the research project, or for other research for which the use or disclosure of protected health information would be permitted by this subpart;
2. The research could not practicably be conducted without the waiver or alteration; and
3. The research could not practicably be conducted without access to and use of the protected health information.

**Sources:**

[HHS Health Information Privacy](http://www.hhs.gov/ocr/privacy/hipaa/understanding/special/research/)

[University of Kentucky- HIPAA in Human Research](http://www.research.uky.edu/ori/HIPAA/main%20page.htm)