

HIPAA & RESEARCH

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HIPAA

Health

Insurance

Portability &

Accountability

Act

Major Purposes/Components of HIPAA Statute

- **Health insurance portability**
- **Funding of DHHS/OIG Fraud & Abuse Enforcement**
- **Administrative Simplification**
 - **Standardization of E-Transactions
(e.g. claims)**
 - **Security of E-Health Information &
E-Signatures**
 - **Privacy of Personally Identifiable Health Information**

DHHS HIPAA Privacy Regulations **a/k/a “The Privacy Rule”**

- **Title: “Standards for Privacy of Individually
Identifiable Health Information”**
- **Citation: 65 FR 82462
45 CFR Parts 160 and 164**
- **Promulgated: December 28, 2000**
- **Effective Date: Original 2/6/01
Revised 4/14/01**
- **Compliance Date: Original 2/6/03
Revised 4/14/03**
- **Deadline for Comments: 3/30/01**

General Concepts & Requirements of Privacy Rule

- 1. Rule governs the use and disclosure of “protected health information” by “covered entities”**
 - “Covered Entities”**
 - Health Plans**
 - Health Care Clearinghouses**
 - Health Care Providers (e.g. hospitals)
that transmit health information electronically**

General Concepts & Requirements of Privacy Rule

1. Rule governs the use and disclosure of “protected health information” by “covered entities” (cont.)
 - “Protected Health Information” (“PHI”)
 - relates to person’s physical or mental health or condition or the provision/payment of health services
 - identifies or could identify person
 - created or received by Covered Entity
 - transmitted in any form (electronically, paper, oral)

General Concepts & Requirements of Privacy Rule

2. Rule permits providers to use/disclose PHI as follows:
- With **Consent** for treatment, payment or health care operations
 - With **Prior Notice (and Opportunity to Object)** for marketing, fundraising and directory functions
 - **Without Consent, Authorization or Prior Notice/OTO** for listed “public policy” purposes such as law enforcement, public health and **research**
 - With **Authorization** for all other purposes

General Concepts & Requirements of Privacy Rule

3. Some general provisions that may implicate research are:

- **“Minimum Necessary” Rule**
- **Psychotherapy Notes**
- **State Law**
- **De-Identified Data**
- **Notice of Privacy Practices**
- **Accounting of Disclosures**
- **Individual Rights**
- **Administrative Requirements**
- **Enforcement & Penalties**

Research Provisions of Privacy Rule

1. Definition of “Research” same as under Common Rule:

“a systematic investigation including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge”

Research Provisions of Privacy Rule

2. Individual Authorizations for use/disclosure of PHI

A. Patient authorization required for all research uses/disclosures except:

- Certain studies meeting HIPAA criteria (e.g. patient authorization not practicable) approved by an IRB or Privacy Board**
- Reviews “preparatory to research”**
- Research on decedent’s information**

B. Authorization may be combined with:

- HIPAA consent for treatment/payment/hco**
- Consent to participate in research**

Research Provisions of Privacy Rule

2. Individual authorization for use/disclosure of PHI (cont.)

C. Required elements of a valid authorization include:

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- specific/meaningful description of PHI to be used/disclosed to researcher**
 - specific identification of persons/class to whom CE may disclose PHI**
 - specific identification of persons/class to whom researcher can disclose PHI**
 - expiration date/event**
 - notice of patient rights to revoke**
 - statement about possible re-releases by researcher and limits of protections of Privacy Rule**
 - signature of patient**

Research Provisions of Privacy Rule

2. Individual authorizations for use/disclosure of PHI (cont.)

D. Additional required elements of authorizations for “Treatment” Studies:

- descriptions re intended use/disclosure for treatment, payment, health care operations**
- description re any restrictions on use/disclosure for other permitted purposes**
- if consent or notice is also used/provided, a reference to them, with a statement re binding effect of representations in authorization**

Research Provisions of Privacy Rule

3. Researcher access to PHI without individual authorization

A. By waiver/alteration of authorization by IRB or Privacy Board

(i) Composition/Status of Board

- IRB established in accordance with Common Rule, e.g. 45 CFR 46.107**
- Privacy Board that:**
 - Has members with varying backgrounds and appropriate professional competency**
 - Includes at least 1 unaffiliated member**
 - Has no members w/ a conflict of interest**

Research Provisions of Privacy Rule

A. By waiver/alterations of authorization by IRB or Privacy Board (cont.)

(ii) Procedure for Board Approval

- IRBs must follow “normal” or “expedited review” procedures of Common Rule**
- Privacy Boards may approve**
 - by a majority vote of a majority of the Board that includes 1 unaffiliated member,**
 - or**
 - through expedited review and approval by Chair or Chair’s designee**

Research Provisions of Privacy Rule

A. By waiver/alterations of authorization by IRB or Privacy Board (cont.)

(iii) Criteria for Approval

- Boards may approve waiver/alteration of authorization if 8 criteria are satisfied**
 - no more than minimal privacy risk to subject**
 - no adverse effect on subject's privacy rights and welfare**
 - research not practicable w/out waiver/alteration**
 - research not practicable without PHI**
 - risks reasonable vs. benefits to individual/society**
 - adequate plan to protect PHI**
 - researcher plan to destroy identifiers asap if possible**
 - written researcher assurance of confidentiality**

Research Provisions of Privacy Rule

A. By waiver/alterations of authorization by IRB or Privacy Board (cont.)

(iv) Documentation of Board Approval

- Board must prepare and send to Provider the following documentation signed by Chair or Designated Member:**
 - statement identifying Board and approval date**
 - statement certifying approval by appropriate process**
 - statement that Board determined that 8 criteria are satisfied**
 - brief description of PHI necessary for research**

Research Provisions of Privacy Rule

A. By waiver/alterations of authorization by IRB or Privacy Board (cont.)

(v) Responsibility of Provider (CE)

- Prohibit researcher access until all required documentation is received from IRB**
- Provider probably may “rely” on IRB findings and representations, including “minimum necessary” findings**
- Retain documentation for 6 years**

Research Provisions of Privacy Rule

B. For “Reviews Preparatory to Research”

- Provider may permit access to PHI upon written representation from researcher that:**
 - purpose is to prepare a protocol or for a “similar purpose preparatory to research”**
 - PHI won’t be removed from Provider**
 - PHI is “necessary” for research**

- Provider probably may rely on researcher’s representations, at least when “reasonable under the circumstances”**

Research Provisions of Privacy Rule

C. For Research on Decedents' Information

- Provider may permit access to PHI upon receipt from researcher of:**
 - representation that access is solely for research on decedents**
 - documentation (at provider's request) of proof of subject's death**
 - representation that PHI is necessary**
- Provider probably can rely on researcher's representations, at least when "reasonable"**

Research Provisions of Privacy Rule

4. Relationship of Privacy Rule and Common Rule

- Rules are separate and distinct**
- Both must be complied with**
- 4 Common Rule Waiver criteria not the same as first 4 of 8 criteria in HIPAA Privacy Rule**
- Research “exempt” from Common Rule may still require IRB review under HIPAA (e.g. chart reviews with no identifiers recorded)**
- Advisable to make/document approvals separately**
- Need to coordinate HIPAA Compliance with IRB policies and procedures - e.g. “Preparatory” research activities may still require IRB approval under IRB policies**

Research Provisions of Privacy Rule

5. Summary

- **Reviews Preparatory to Research and Research on Decedent's Information**
 - **Required documentation given to Provider**
 - **No Board review required**
- **Studies not involving patient contact or treatment**
 - **Board approval required**
- **Studies including patient contact or treatment**
 - **Authorization required**
 - **Possibly Board approval of access to PHI for initial "case identification"**

Research Provisions of Privacy Rule

6. State Law Issues

- **Many states prohibit access to sensitive information (e.g. HIV/AIDS information) without specific approval**
- **Stricter state laws must still be complied with**
- **Some state laws (e.g. WA) have HIPAA-like provisions requiring IRB approval for unauthorized researcher access**
- **At least one state (MN) prohibits researcher access (to records created after 1996) without patient authorization**