

TEXAS ASSOCIATION OF COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL HIPAA POLICIES

USE OF AUTHORIZATIONS

Effective Date: March 17, 2003

POLICY

Unless authorized by an individual Participant, the Texas Association of Counties Health & Employee Benefits Pool ("HEBP") will not use or disclose the Participant's Protected Health Information ("PHI") for purposes other than the permitted uses and disclosures specified in the Privacy Rule.

PROCEDURE

- An authorization from the Participant is not required for HEBP to:
 - Use or disclose PHI for HEBP's payment or health care operations;
 - Disclose PHI to a health care provider for the participant's treatment;
 - Disclose PHI to another covered entity or a health care provider for that entity's payment activities; and
 - Disclose PHI to another covered entity for that entity's health care operations if both entities have or had a relationship with the participant whose PHI is being requested, the PHI pertains to the current or former relationship, and the purpose of the disclosure is for:
 - A health care operations activity for which the Privacy Rule states an authorization is not required; or
 - Detection of health care fraud and abuse or compliance with health care fraud and abuse laws.
 - Use or disclose PHI as specifically permitted by the Privacy Rule pursuant to an exception.
- When authorization is needed, no PHI will be used or disclosed until the participant is provided with a copy of the authorization form and has signed it.
- Signing the authorization form is voluntary and the participant may refuse to sign it.

- A copy of the signed authorization is provided to the participant.
- The participant may revoke the authorization, in writing, at any time.
- The permissions granted in the authorization are not acted upon if the authorization has been revoked or if it has expired.

The authorization is documented and retained for a period of six (6) years after it was created or expired, whichever date is later.