

2.2.4 Minimum Necessary Use and Disclosure of Protected Health Information

(a) Policy

California Correctional Health Care Services (CCHCS) and its workforce must make reasonable efforts to limit Protected Health Information (PHI) to the minimum necessary to accomplish the intended purpose of the use, disclosure or request when CCHCS policy permits the use or disclosure of a patient's PHI or when requesting PHI from another entity. CCHCS shall determine what access to PHI is needed by workforce members to carry out work duties.

(b) Purpose

To improve the privacy of PHI used or disclosed by workforce members in the course of carrying out their job duties, and ensure workforce members have appropriate access to PHI required to accomplish the missions, goals and objectives of CCHCS while maintaining compliance with privacy and related health information law.

(c) Responsibility

Oversight responsibility of the Privacy Office shall be vested in the Privacy Officer. The Privacy Officer is required to oversee privacy rights as required by laws, policies, and standards for respecting the rights of individuals with regard to the collection, use, and disclosure of personal information throughout CCHCS.

(d) When Minimum Necessary Uses or Disclosures of PHI Applies

(1) Unless an exception set forth in this policy applies, CCHCS workforce members may only use, request, and disclose the minimum amount of PHI necessary to perform their duties including the fulfillment of a request for the use or disclosure of PHI. For requests requiring patient authorization, CCHCS must limit the use and disclosure of PHI as described in the patient authorization.

(A) Uses or disclosures of entire health records

CCHCS workforce members shall not use, disclose or request a patient's entire health record except when the entire health record is specifically justified as the amount that is reasonably necessary to accomplish the use, disclosure, or request.

(B) Routine and recurring disclosures

CCHCS subdivisions shall implement policies and procedures that limit the PHI disclosed to the amount reasonably necessary to achieve the purpose of the disclosure.

(C) Non-routine disclosures

CCHCS subdivisions shall develop criteria designed to limit the PHI disclosed to only the minimum amount necessary to accomplish the purpose for which the disclosure is sought; requests for non-routine disclosures shall be reviewed on an individual basis in accordance with such criteria.

(2) Reasonable Reliance

CCHCS may rely on the judgment of the party requesting a disclosure in determining the minimum amount of information that is needed when:

(A) Making disclosures to public officials pursuant to the Health Care Department Operations Manual, Section 2.2.6, Use and Disclosure of Protected Health Information Special Exceptions, if the public official represents that the PHI requested is the minimum necessary for the stated purpose.

(B) The information is requested by another covered entity.

(C) The information is requested by a professional who is a member of the CCHCS workforce or is a CCHCS business associate for the purpose of providing professional services if the professional represents that the information requested is the minimum necessary for the stated purpose(s).

(3) Access and use

CCHCS subdivisions shall establish role-based access controls that provide only the minimum amount of information necessary for workforce members to perform their duties. CCHCS subdivisions shall safeguard information accessible by computer, kept in files, or other forms of information consistent with CCHCS policy.

(e) When Minimum Necessary Uses or Disclosures of PHI does not Apply

(1) Disclosures to or requests by a health care provider for treatment.

(2) Disclosures to the patient who is the subject of the information.

(3) Uses and disclosures based upon a valid authorization to use and disclose PHI.

(4) Uses or disclosures required by law.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES
Health Care Department Operations Manual

(f) Training Requirements and Contact Information

- (1) Privacy training is required for new employees during New Employee Orientation and annually thereafter.
- (2) For questions or clarification, please contact: Privacy@cdcr.ca.gov or 1-877-974-4722.

References

- Code of Federal Regulations, Title 45, Subtitle A, Subchapter C, Part 160, Subpart A, Section 160.103 – Definitions
- Code of Federal Regulations, Title 45, Subtitle A, Subchapter C, Part 164, Subpart E, Section 164.502(b)
- Code of Federal Regulations, Title 45, Subtitle A, Subchapter C, Part 164, Subpart E, Section 164.514(d)(1)
- Health Care Department Operations Manual, Chapter 2, Article 2, Section 2.2.1, General Use and Disclosure of Protected Health Information
- Health Care Department Operations Manual, Chapter 2, Article 2, Section 2.2.2, Use and Disclosure of Protected Health Information Based on Patient Authorization
- Health Care Department Operations Manual, Chapter 2, Article 2, Section 2.2.5, Administrative, Technical, and Physical Safeguards
- Health Care Department Operations Manual, Chapter 2, Article 2, Section 2.2.6, Use and Disclosure of Protected Health Information Special Exceptions

Revision History

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