

**Texas Tech University Health Sciences Center
HIPAA Privacy Policies**

Agreements to Use PHI	Policy 6.2
Data Use Agreements	Effective Date: June 15, 2016
References: http://www.hhs.gov/ocr/hipaa HSC HIPAA website http://www.ttuhscc.edu/hipaa/policies_procedures.aspx	

Policy Statement A Data Use Agreement (DUA) is an agreement between TTUHSC and an outside party (e.g., contractor, private industry, academic institution, federal or state agency), when the outside party requests the use of non-public data that is subject to some restrictions on its use. Specifically, DUAs address important issues such as limitations on use of the data, obligations to safeguard the data, and privacy rights that are associated with transfers of confidential or protected data. The purpose of this Health Sciences Center HIPAA Policy and Procedure (HPP) is to provide guidance to identify when Data Use agreements are needed and obtain written assurances via DUAs in order for TTUHSC to comply with the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its implementing regulations.

Scope and Distribution

This policy applies to all health care clinical service areas owned and/or operated by TTUHSC.

Definitions

Refer to [HPP 1.1](#) for Glossary of HIPAA Terms

See [Old/New HIPAA Policy Number Cross Reference Chart](#)

Procedure

1. The TTUHSC department requesting to share data with an outside party is responsible for identifying when a DUA is needed. The [HIPAA DUA Decision Tree](#) is a useful tool to determine if a DUA is required. If it is not clear whether a DUA is required, contact the appropriate HSC campus' Regional Privacy Officer or the Institutional Privacy Officer.

2. A Data Use Agreement requests information contained in a Limited Data Set.

A Limited Data Set may be disclosed to an outside party, i.e., data recipient, without a patient's authorization if a Data Use Agreement is signed between the data recipient and TTUHSC.

A Limited Data Set excludes the direct identifiers listed below:

- i. Names
- ii. Postal address information, other than town or city, State or zip code
- iii. Telephone numbers

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- iv. Fax numbers
 - v. Electronic mail addresses
 - vi. Social Security numbers
 - vii. Medical record numbers
 - viii. Health plan beneficiary numbers
 - ix. Account numbers
 - x. Certificate/license numbers
 - xi. Vehicle identifiers and serial numbers, including license plate numbers
 - xii. Device identifiers and serial numbers
 - xiii. Web Universal Resource Locators (URLs)
 - xiv. Internet Protocol (IP) address numbers
 - xv. Biometric identifiers, including finger and voice prints
 - xvi. Full face photographic images and comparable image
 - xvii. Any other unique identifying number, characteristic, or code unless allowed by 45 CFR 164.514 (c) for re-identification.
3. The data recipient may use and disclose the Limited Data Set received from TTUHSC only in connection with the performance of research activities, public health activities or health care operations.
4. Approved DUA Template.

The TTUHSC HIPAA Privacy and Security Committee adopted a Data Use Agreement template ([TTUHSC DUA template](#)) that meets HIPAA requirements. This Committee is responsible for amending and/or updating the TTUHSC DUA Template as needed.

- a. Review, Negotiation and Maintenance of DUAs. The requesting department will submit the proposed DUA to the [TTUHSC ACS Contracting System](#) for review/revision/approval. All approved DUAs will be maintained on this site.

Contact the HSC Contracting Office for assistance in downloading the DUA to the ACS system if needed.

- b. Authority to Sign DUA on Behalf of TTUHSC. Only those individuals with authority delegated in accordance with Texas Tech University System Regents' Rules have authority to sign a DUA or other written contract. (See HSC OP 54.01.)
5. Data Use Agreement Where TTUHSC is the Data Recipient
- a. DUAs from third parties requesting that TTUHSC sign as the Data Recipient shall be forwarded to the Institutional Privacy Officer or campus' Regional Privacy Officer for review before execution of the DUA.

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- b. Notification of Breaches by TTUHSC. If TTUHSC is acting as a data recipient and has actual knowledge of a breach, or violation by the TTUHSC workforce, the TTUHSC IPO and/or ISO shall, upon completion of an investigation of credible evidence of violation, notify the other party (Covered Entity) as required by law.

6. Right to Change Policy

TTUHSC reserves the right to interpret, change, modify, amend or rescind any policy in whole or in part at any time without the consent of workforce.

This policy and procedure will be documented and retained for a period of 6 years from the date of its creation or the date when it last was in effect, whichever is later.

Knowledge of a violation or potential violation of this policy must be reported directly to a Regional Privacy Officer, the Institutional Privacy Officer or to the employee Compliance Hotline at (866) 294-9352 or [Ethics Point - Texas Tech University](#) under HSC.

Approval Authority

The TTUHSC Privacy and Security Committee has authority for HIPAA policy approval.

Responsibility and Revisions

Questions regarding this policy may be addressed to the Regional Privacy Officer ([Amarillo](#), [Permian Basin Lubbock](#)), the [Institutional Privacy Officer](#), or the [Institutional Compliance Officer](#).

This policy may be amended or terminated at any time.