The University of Iowa
HIPAA Privacy Rule
Policies and Procedures

BUSINESS ASSOCIATES

Purpose: To define the guidelines and procedures that must be followed for Business Associates* at the University of Iowa.

Policy: A Business Associate is a person or entity that provides certain functions, activities, or services on behalf of the University involving the use and/or disclosure of Protected Health Information (PHI)**. The University is required to take action if it becomes aware of a practice or pattern that constitute a violation of the policy protecting confidentiality of PHI.

Procedures:
• The University will identify its Business Associates and maintain a database of Business Associates.

Business Associate Contracting
• The University will enter into contracts, approved by the Business Officer, with Business Associates.
• Contracts between the University and Business Associates will be consistent with the requirements of the HIPAA Privacy Rule and will provide, at a minimum, that the Business Associate will:
  o Use appropriate safeguards to prevent use or disclosure of PHI other than as provided for by its agreement;
  o Report to the UI any use or disclosure of PHI not provided for by its agreement of which the Business Associate became aware;
  o Not use or further disclose PHI except as permitted by the agreement or required by law;
  o Ensure that any agents, or sub-contractors, to whom it provides PHI received from, created by, or on behalf of UI, agree to the same restrictions and conditions that apply to the Business Associate with respect to PHI;
  o Make available PHI in accordance with UI policies and procedures;
  o Make available internal records, documents, books or other items related to the use and disclosure of PHI received from or created on behalf of UI, available to DHHS upon request for audit or compliance purposes;
  o At termination of the agreement, return or destroy all PHI received from or created on behalf of UI that the Business Associate maintains any form, and retain no copies. If return or destruction is not feasible, extend the protections of the contract to the information and limit further uses and disclosures to those purposes that make the return of the information infeasible.
Searches of Contract

- In the event that UI becomes aware of a pattern or practice of the Business Associate that constitutes a violation of the Business Associate’s obligations under its agreement, UI will take reasonable steps to end the violation.
- In the event that the Business Associate cannot or will not remedy the practice or pattern, UI may terminate the contract if feasible. Where termination is not feasible, the UI Privacy Officer will report the problem to appropriate authorities.

*“Business Associate” is a person or entity who, on behalf of a covered entity, 1) performs or assists in the performance of (a) a function of activity involving the use or disclosure of individually identifiable health information. Examples include claims processing, data analysis, utilization review, quality assurance, billing, benefit management, practice management, and repricing; or (b) Any other function or activity regulated the HIPAA Privacy Rule; or 2) provides, in a capacity other than as a member of the workforce, legal, actuarial, accounting, consulting, data aggregation, management, administration, accreditation, financial, or other services to, for, or on the behalf of the covered entity, in which the covered entity participates and where the provision of the service involves the disclosure of individually identifiable protected health information.

**Definition of Protected Health Information (PHI):**
Individually identifiable health information transmitted or maintained in any form or medium, including oral, written, and electronic. Individually identifiable health information relates to an individual’s health status or condition, furnishing health services to an individual or paying or administering health care benefits to an individual. Information is considered PHI where there is reasonable basis to believe the information can be used to identify an individual.

References: 45 C.F.R. §§164.504, 164.524, 164.526, 164.528