# DEPARTMENT OF HEALTH SERVICES COUNTY OF LOS ANGELES



**SUBJECT:** DESIGNATED RECORD SET

**POLICY NO:** 361.14

### **PURPOSE:**

Individuals have a right to inspect, obtain a copy, and request amendments to protected health information (PHI) about themselves in a Designated Record Set. The purpose of this policy is to identify those records that comprise the Designated Record Set. Defining the scope of the Designated Record Set is important because it defines the information, which is subject to an individual's right to access and amend.

### **POLICY:**

DHS will identify those records that comprise the Designated Record Set in order to clarify the access and amendment standards as set forth in the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA).

#### **DEFINITIONS:**

Designated Record Set means a group of records maintained by or for a covered entity, that is:

- Medical and billing records about individuals maintained by or for a covered health care provider,
- The enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan, **or**
- Information used in whole or in part by or for the covered entity to make decisions about an individual.

### PROCEDURE:

- A. At the DHS facilities, Designated Record Sets are maintained by the particular entity that provides medical treatment to the individual.
  - 1. The particular entity controls access to the Designated Record Set.
  - 2. The entity retrieves information from the designated record set by utilizing the name, identifying number, symbol, or other identifier-assigned to the individual.

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- B. The Designated Record Set maintained by DHS entities includes:
  - 1. Medical Record Designated Record Set includes:
    - Documentation of DHS healthcare services provided to an individual in any aspect of healthcare delivery (e.g. advance directives, care plans, consultation reports, discharge summaries, orders, assessments, consents, provider documentation, etc.),

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- Individually identifiable data, in any medium, collected or directly used in and/or for documenting healthcare or health status. This includes paper-based medical records, imaged records and other electronic/computer-based databases, **and**
- Records of care from all DHS settings, including inpatient and ambulatory areas.
- 2. Billing Designated Record Set includes:
  - Patient-identifiable claims,
  - Other patient identifiable data used for payment purposes, and
  - DHS Supporting documentation for the reimbursement of services provided to the patient.
- 3. Records maintained by a business associate that meet the definition of Designated Record Set that are not merely duplicates of information maintained by DHS.
- C. Exclusions to the Designated Record Set:
  - 1. The designated record set excludes records that do not pertain to medical treatment, billing, insurance coverage, payment, or claim adjudication, and are not otherwise used to make decisions about the individual. Examples of excluded records include:
  - "Shadow" records. Files maintained by clinicians that contain only copies of information otherwise located in the Designated Record Set. Shadow records contain no new or original documents and are maintained merely for the convenience of clinicians.
  - 3. Quality control analysis. Risk management records, quality assessment and improvement records, and peer review records that are used for operational analyses and not for making decisions about individuals.
  - 4. Data collected and maintained for research.

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5. Appointment and surgery schedules.

6. Information compiled in reasonable anticipation of or for use in a civil, criminal, or administrative action or proceeding (e.g., notes taken by DHS during a meeting with DHS' attorney about a pending lawsuit).

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- 7. Employer records (e.g., pre-employment physicals, results of HIV tests on employees who have incurred needle stick injuries on the job).
- 8. Source data interpreted or summarized in the individual's medical record (e.g., pathology slides, diagnostic films, electrocardiogram tracings from which interpretations are derived).
  - There may be times when an individual has a legitimate need for source data. When such a need arises, DHS shall provide the individual with greater rights of access, allowing the individual access to or copies of the source data when possible.

#### **REFERENCES:**

Code of Federal Regulations 45 Part 160 and 164; Sections 164.501; 164.524(a), (b), (c), (e); 164.526(a), (b), (c), (d), (e).

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