

**UNIVERSITY OF MAINE SYSTEM
HIPAA POLICY #13
HEALTH CARE CLEARINGHOUSES**

I. General

A Health Care Component that is a Health Care Clearinghouse must comply with the University's privacy and security policies and procedures, the Security Rule, and the Privacy Rule as set forth below.

II. Health Care Clearinghouse as a Business Associate

When a Health Care Clearinghouse creates or receives PHI as a business associate of another covered entity, the clearinghouse must comply with the following:

- A. 45 CFR § 164.500, relating to applicability;
- B. 45 CFR § 164.501, relating to definitions;
- C. 45 CFR § 164.502, relating to uses and disclosures of PHI, except that a clearinghouse is prohibited from using or disclosing PHI other than as permitted in the business associate contract under which it created or received the PHI;
- D. 45 CFR §164.504, and 45 CFR § 164.105 relating to the organizational requirements for covered entities, including the designation of health care components of a covered entity;
- E. 45 CFR §164.512, relating to uses and disclosures for which individual authorization or an opportunity to agree or object is not required, except that a clearinghouse is prohibited from using or disclosing PHI other than as permitted in the business associate contract under which it created or received the PHI;
- F. 45 CFR § 164.532, relating to transition requirements; and
- G. 45 CFR § 164.534, relating to compliance dates for initial implementation of the privacy standards.

III. Health Care Clearinghouse Not as a Business Associate

When a Health Care Clearinghouse creates or receives PHI other than as a business associate of a covered entity, the clearinghouse must comply with all applicable University policies and procedures and the Privacy and Security Rules.

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