



BENEFIT NEWS BRIEFS

OCR Issues FAQs on the Disposal of Protected Health Information

The Office of Civil Rights (OCR), the enforcement arm for the *HIPAA Privacy and Security Rules* recently published a set of *Frequently Asked Questions (FAQs)* on the disposal of *Protected Health Information (PHI)*. The *FAQs* may be accessed at <http://www.hhs.gov/ocr/privacy/hipaa/enforcement/examples/disposalfqs.pdf> or by "[clicking here](#)." A specially prepared version with a Table of Contents is available by "[clicking here](#)." The six questions answered were:

- What do the *HIPAA Privacy and Security Rules* require of covered entities when they dispose of protected health information?
- May a covered entity dispose of protected health information in dumpsters accessible by the public?
- May a covered entity hire a business associate to dispose of protected health information?
- May a covered entity reuse or dispose of computers or other electronic media that store electronic protected health information?
- How should home health workers or other workforce members of a covered entity dispose of protected health information that they use off of the covered entity's premises?
- Does the *HIPAA Privacy Rule* require covered entities to keep patients' medical records for any period of time?

While answers to these questions may seem obvious, this may be a good time for covered entities to review the plan's PHI disposal practices.

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