THE MINIMUM NECESSARY REQUIREMENT

Vanderbilt University Medical Center makes a reasonable effort to ensure that the use or disclosure of Protected Health Information (PHI) is limited to the minimum necessary to satisfy a particular purpose or carry out a specific function unless it meets the following exceptions:

Exceptions to the Minimum Necessary Rule:

- Disclosures to providers for treatment
- Disclosures directly to the patient
- Disclosures with a patient signed authorization
- Disclosures required by HIPAA, the Office of Civil Rights and required by Law

- Verify the identity of the person requesting PHI and the authority of that person to have access to PHI. Release only the information about the patient that is needed to complete the needed task
- Do not collect the social security number from an individual if another identifier will work. SSNs are protected to a higher standard than other patient identifiers.

- Limit the amount of information accessed or disclosed to only the minimum necessary to accomplish the specific task. For example: When communicating a MRN or an Account number there is no reason to include the patient full name and DOB since the recipient should be able to access that information if needed using the MRN or Account numbers.
- Leave only your name and phone number on message machines when you are asking patients to call you back. For example: DO NOT disclose any details of the patient’s condition, appointments, test results, or financial information on the answering machine allowing access by others not authorized by the patient to have access to the information unless the patient has instructed you to do so.

- Only share specific information that is requested regarding an admission or a visit in response to a Release of Information. For example: Do not share or release more information than requested just because more information is available.
- When emailing always follow the minimum necessary rule and the electronic messaging policy. For example: Use the MRN or Account number and no other patient identifiers when including patient protected health information (PHI) in an email or use only the patient’s initials or just the patient’s last name in combination with PHI. (You can also use the File Transfer Application (Accellion) and send in a secure attachment).

IM 10-30.02: “Breach Notification: Unauthorized Access, Use, or Disclosure of Individually Identifiable patient or Other Personal Information”
IM 10-30.15: “Electronic Messaging of Individually Identifiable Patient and Other Sensitive Information”