

Texas Tech University Health Sciences Center El Paso HIPAA Privacy Policy

Policy: Using and Disclosing PHI – Disclosing Protected Health Information in Emergency Situations and Disaster Relief	Policy #: HPP 4.7
Effective Date: July 5, 2016	Last Revision Date: May 19, 2026
References: https://www.hhs.gov/hipaa/index.html	
TTUHSC El Paso HIPAA Privacy and Security Website: https://my.ttuhscep.edu/elpaso/hipaa/	

Policy Statement

It is the policy of Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) to secure the confidentiality of protected health information (PHI) released regarding requests for patient information during emergencies and disaster relief purposes.

Scope

This policy applies to all PHI maintained by TTUHSC El Paso.

Policy

TTUHSC El Paso may, if required by law, use or disclose PHI to a public or private entity authorized by law or by its charter to assist in disaster relief efforts. The requirement that the individual be present or not agree to the use or disclosure should be applied to the extent that TTUHSC El Paso, in the exercise of professional judgment, determines that the requirement does not interfere with its ability to respond to the emergency circumstances.

If the individual is not present, or the opportunity to object cannot practicably be provided because of incapacity or emergency, TTUHSC El Paso, in the exercise of professional judgment, may determine whether the disclosure is in the best interest of the individual and, if so, shall disclose only the PHI that is directly relevant to the person's involvement with the individual's health care.

Attachment: [HHS Bulletin: HIPAA Privacy in Emergency Situations](#)

<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergencypreparedness/index.html>

Knowledge of a violation or potential violation of this policy must be reported directly to the Institutional Privacy Officer or the Fraud and Misconduct Hotline at (866) 294-9352 or www.ethicspoint.com under the Texas Tech University System.

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Frequency of Review

This policy will be reviewed on each even-numbered year (ENY) by the Institutional Privacy Officer, and the HIPAA Privacy and Security Committee, but may be amended or terminated at any time.

Questions regarding this policy may be addressed to the Institutional Privacy Officer or the Institutional Compliance Officer.

Review Date: 5/19/2026

Revision Date: 7/18/2017, 5/19/2020, 3/15/2022, 5/21/2024, 5/19/2026