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TO: All MA Ambulance Services
FROM: Tracy A. Miller, Deputy General Counsel and Director, Privacy and Data and Data Access Office
DATE: September 24, 2009
RE: Sharing Patient Information for Quality Improvement and Required Reporting to the Department of Public Health

Emergency Medical Services (EMS) transport stroke patients to designated hospitals for Primary Stroke Services and stroke patients are frequently transferred between facilities. To monitor and improve care for stroke patients, both EMS and hospitals must evaluate patient outcomes. The Department of Public Health (DPH) understands that critical information for such evaluations is often not provided because providers believe that the Health Insurance Portability and Accountability Act (HIPAA) bars the release of such protected health information (PHI). This advisory is sent to clarify that HIPAA permits the disclosure of PHI, without patient authorization, from one covered entity¹ (CE) to another CE for health care operations, which includes quality assessment and improvement activities of the receiving CE. 45 CFR § 164.506(c) (4)²

Provided that the requesting entity is also a CE and that both entities had a relationship with the individual who is the subject of the PHI requested, HIPAA authorizes the disclosure of the minimum necessary information to conduct the quality assessment and improvement activities. No patient authorization, accounting, or data sharing agreement is required under HIPAA for such disclosures. Further, the disclosing entity is permitted to rely on the request, if made by a CE, as representing the minimum necessary information.

When a stroke patient is transferred between facilities after the administration of a thrombolytic therapy, DPH requires the sending hospital to contact the receiving hospital to determine if the patient experienced a hemorrhagic complication and to enter the information in the Primary Stroke Service Registry. The receiving facility's disclosure of this information to the sending facility is permitted

¹ A covered entity in this context may be either an ambulance service or hospital; a health care provider that engages in electronic transactions that are covered under HIPAA.

² While HIPAA is a federal statute, and the regulations implementing it are those of the U.S. Department of Health and Human Services, DPH is issuing this guidance since it is aware of confusion about HIPAA and its implications for conducting quality improvement activities related to primary stroke services. Any further questions should be referred to the CE's Privacy Officer or legal counsel.

under HIPAA, as a disclosure required under state law. 45 CFR §164.512(a); 105 CMR 130.1410 (B) and (C); and Circular Letter: DHCQ 06-5-460

It is recommended that CEs transporting and treating patients for primary stroke services develop protocols for sharing QI information as well as reporting required information to transferring facilities.

Hospitals that provide primary stroke services have already received this Advisory. All ambulance services are asked to share this information to all their EMT staff.