Creighton UNIVERSITY

Creighton University Institutional Review Board
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Health Insurance Portability and Accountability Act (HIPAA)

Elements of a Valid HIPAA Authorization

The written HIPAA research authorization must contain the following elements:

- A specific and meaningful description of Protected Health Information (PHI) to be used or disclosed.
- Identity of the person(s) or entities authorized to make the requested use or disclose of PHI.
- Identity of the person or entities to whom the covered entity (researcher) may make the requested use/disclosure of PHI.
- Description of each purpose of the requested use or disclosure.
- An expiration date or event that relates to the individual or the purpose of the use or disclosure (can include statements such as "end of the research study" or similar language).
- A statement that the individual has a right to revoke the authorization in writing and either:

  (a) a description of the exceptions to that right, along with a description of how to revoke;

  OR

  (b) a reference to Creighton's Privacy Notice if it describes the exceptions and methods to revoke.

- A statement that Creighton (or researcher) may not condition non-research related treatment, payment, enrollment, or eligibility for benefits available from Creighton (or researcher) on the authorization.
- If applicable, a statement that the researcher may condition the provision of research-related treatment on obtaining a written authorization and that the individual cannot participate without signing an authorization.
- A statement that PHI disclosed under the authorization may be re-disclosed by the recipient and no longer be protected under HIPAA.
- Date and signature of the individual or the individual's personal representative, including a description of the personal representative's authority if signed by the personal representative of the subject.
- Be written in plain language.