

II. HIPAA ANALYSIS

**Updated as of February 2007 for
Thomas Edison State College**

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NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
<p><u>N.J.S.A. Title 26</u> HEALTH AND VITAL STATISTICS</p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-11. Additional powers of Public Health Council</p> <p>In addition to its powers and duties otherwise provided in this act, the Public Health Council <i>may</i>: a. Request <i>from the commissioner</i> such information, concerning the work of the department, as it may deem necessary; b. Consider any matter relating to the preservation and improvement of public health, and may advise the commissioner thereon . . . d. <i>Study and investigate the public health activities of the State</i> and report its findings thereon to the Governor and the Legislature.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: (1) for public health activities and (2) for health oversight activities.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-15.1 Electronic receipt and transmission of health care claim information; advisory board established.</p> <p>The Commissioner of Health and Senior Services, in consultation with the Commissioner of Banking and Insurance, shall establish an advisory board to make recommendations to the commissioners on health information electronic data interchange technology policy, including a Statewide policy on electronic health records, and measures to protect the confidentiality of medical information. The members of the board shall include, at minimum, representation from health insurance carriers, health care professionals and facilities, higher education, business and organized labor, health care consumers and the commissioner of each department in the State that uses individuals’ medical records or processes claims for health care services. The members of the board shall serve without compensation but shall be entitled to reimbursement for reasonable expenses incurred in the performance of their duties.</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both State law and HIPAA require patient information to be kept confidential. However, HIPAA is more specific with respect to when uses and disclosures of PHI are permissible without first obtaining written Authorization from the individual. Therefore, when implementing this State law requirement, the HIPAA requirements relating to the uses and disclosures of PHI without an Authorization must be incorporated.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health –Reorganized</p>	<p>26:1A-16. Access to premises for examination</p> <p>The commissioner <i>shall</i> have full access to any premises for the purpose of examination if he has reason to believe that on the premises there exists a violation of any health law of the State or any provision of the State Sanitary Code.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p>	<p>26:1A-17. Inspection, right of</p> <p>The commissioner <i>shall</i> have the same right of inspection in regard to all matters</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and</p>

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<p><u>Chapter 1A</u> State Department of Health –Reorganized</p>	<p>affecting the public health as has been or may be conferred upon the local boards of health.</p>		<p>HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics <u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-18. General supervision over sanitation and hygiene matters</p> <p>[a] The commissioner shall exercise <i>general supervision</i> over all matters relating to sanitation and hygiene throughout the State. Whenever in the opinion of the commissioner it is necessary or advisable, a sanitary survey of the whole or of any part of the State shall be made.</p> <p>[b] The commissioner may enter upon, examine and survey any source and means of water supply, sewage disposal plant, sewage system, prison, public or private place of detention, asylum, hospital, school, public building, private institution, factory, workshop, tenement, public wash room, public rest room, public toilet and toilet facility, public eating room and restaurant, and also any premises in which he has reason to believe there exists a violation of any health law of the State, any provision of the State Sanitary Code, or any law which he has the duty of administering.</p>	<p><i>With respect to [a]:</i> 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><i>With respect to [b]:</i> 45 C.F.R. 164.512 (b) and (d) allow a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for public health and health oversight purposes.</p>	<p><i>With respect to [a]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><i>With respect to [b]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law authorizes uses and disclosures for purposes of public health and health oversight; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics <u>Chapter 1A</u></p>	<p>26:1A-20. Local health officials, duties of</p> <p>Every local health official shall furnish the commissioner with such information as the commissioner may demand, and shall perform such acts as the commissioner may direct, with regard to, and within, the territory under the jurisdiction of the local</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be</p>

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State Department of Health –Reorganized	health official.		made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p data-bbox="118 378 370 464"><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p data-bbox="118 500 370 586"><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p data-bbox="419 378 1279 435">26:1A-37. Policies, formulation of; additional powers and duties of department</p> <p data-bbox="419 467 1419 1044">The department shall formulate comprehensive policies for the promotion of public health and the prevention of disease within the State. It <i>shall</i> in addition to other powers and duties vested in it by this act or by any other law: [a] Collect, preserve and tabulate all information required by law in reference to births, marriages, deaths and all vital facts and shall obtain, collect and preserve such information relating to the health of the people of the State and to the prevention of disease as may be useful in the discharge of the functions of the department . . . [d] Encourage, <i>direct and aid in coordinating local programs</i> concerning control of preventable diseases in accordance with a unified State-wide plan which shall be formulated by the department; [e] <i>Administer or supervise a program of maternal and child health services</i>, encourage and aid in coordinating local programs concerning maternal and infant hygiene, and encourage and aid in coordinating local programs concerning prenatal and post-natal care, and may, when requested by a local board of education, supervise the work of school nurses; [f] <i>Administer or supervise a program of dental health</i>, encourage and aid in coordinating local programs concerning dental health; [g] Establish and maintain adequate serological, bacteriological and chemical laboratories with such expert assistance and such facilities as are necessary for routine examinations and analyses, and for original investigations and research in matters affecting public health...</p>	<p data-bbox="1454 378 1956 496"><u>With respect to [a]:</u> 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p data-bbox="1454 773 1956 951"><u>With respect to [d] [e] [f]:</u> 45 C.F.R. 164.512 (b) and (d) allow a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for public health and health oversight purposes.</p> <p data-bbox="1454 1195 1956 1349"><u>With respect to [e] [f] [g]:</u> 45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for purposes of treatment, payment and health care operations</p>	<p data-bbox="1983 378 2408 797"><u>With respect to [a]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p data-bbox="1983 829 2408 1284"><u>With respect to [d] [e] [f]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law authorizes uses and disclosures for purposes of public health and health oversight; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p> <p data-bbox="1983 1317 2408 1495"><u>With respect to [e] [f] [g]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for the use and disclosure health</p>

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		<p><u>With respect to [g]</u>: 45 C.F.R. 164.512 (i) allows a covered entity to use and disclose PHI for research purposes without an Authorization.</p>	<p>information for purposes of treatment, payment and/or health care operations; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p> <p><u>With respect to [g]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law authorizes uses and disclosures for purposes of research; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for purposes relating to research. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-37.2. Information and data confidential; disclosure; exceptions</p> <p>Information and data in the possession of the State Department of Health, pertaining to the health of any named person, procured in connection with research studies approved by the Public Health Council for the purpose of reducing the morbidity or mortality from any cause or condition of health shall be kept in the confidence of the department and shall not be revealed or disclosed in any manner or under any circumstances by any person connected with such research studies or by the department or any person therein except [a] to persons within the department, [b] to other persons participating in such research studies or [c] in such impersonal form that the individual to whom the information or data relates cannot be identified therefrom.</p>	<p><u>With respect to [a]</u>: 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI without an Authorization for research purposes, provided an IRB or privacy board has approved the waiver of the Authorization.</p> <p><u>With respect to [b]</u>: 45 C.F.R. 164.502(a) states that a covered entity may only use and disclose PHI in accordance with the HIPAA rules.</p>	<p><u>With respect to [a]</u>: This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits uses and disclosures of PHI for purposes of research). Therefore, follow the State law restrictions when using or disclosing PHI relating to research purposes under this provision.</p> <p><u>With respect to [b]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both State law and HIPAA permit certain uses and disclosure</p>

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		<p><i>With respect to [c]:</i> 45 C.F.R. 164.514(a) allows a covered entity to use and disclose PHI without regard to the HIPAA rules if the information does not identify an individual and there is no reasonable basis to believe that the information could be used to identify an individual.</p>	<p>of PHI relating to research purposes. However, HIPAA is more specific with respect to when uses and disclosures of PHI are permissible without first obtaining written Authorization from the individual. Therefore, when implementing this State law requirement, the HIPAA requirements relating to the uses and disclosures of PHI without an Authorization must be incorporated.</p> <p><i>With respect to [c]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This State law provision, allows for uses and disclosures of information that do not identify a particular person. However, HIPAA is more specific than State law with regard to when PHI is considered “de-identified.” Therefore, be sure to check HIPAA to see that all identifies have been removed.</p>

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health –Reorganized</p>	<p>26:1A-47. Subpoenas</p> <p>The commissioner may issue subpoenas, signed by him requiring the attendance of witnesses and the <i>production of books and papers in any part of the State before him</i>, or a member of the department designated by him.</p>	<p>45 C.F.R. 164.512 (e) and (f) allow a covered entity to use and disclose PHI in the course of any judicial or administrative proceeding in response to a court order, or, provided certain requirements are met, in response to an administrative subpoena or request.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to uses and disclosures of PHI pursuant to a subpoena. Therefore, be sure to meet the additional HIPAA requirements relating to administrative requests and subpoenas.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-50. Establishment of districts; district State health officers; civil service; duties</p> <p>[E]ach district State health officer, under the direction of the commissioner and subject to the provisions of the State Sanitary Code, shall, in addition to such other duties as may be imposed upon him by the commissioner, perform the following duties . . . (j) Act as the representative of the commissioner, and under his direction, in <i>securing the enforcement</i> within his district of the provisions of the State Sanitary Code and of the laws of this State <i>pertaining to public health</i>.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> <u>Health and Vital</u> <u>Statistics</u></p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-96. Duties of the Division of Chronic Illness Control</p> <p>The division shall administer and provide for the carrying out of the programs required to perform the general functions provided by this act to be performed by the State and for the carrying out of the general policies formulated by the Advisory Council on the Chronic Sick as approved by the State Commissioner of Health and it shall perform such other duties as may be delegated to it by the State Commissioner of Health.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p><u>N.J.S.A. Title 26</u></p>	<p>26:1A-97. State Department of Health; duties</p>	<p><i>With respect to [d] [e] and [h]</i>: 45 C.F.R.</p>	<p><i>With respect to [d] [e] and [h]</i>: This</p>

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<p>Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>The State Department of Health shall within funds appropriated and available therefore be charged with the responsibility of carrying out the obligations herein assumed by the State as its share of the task of providing for prevention, early detection and control of chronic illness and rehabilitation of the chronic sick and it shall also . . . [d] <i>Collect, prepare and distribute information including statistics</i> which will afford the general public greater insight into the significance, character and magnitude of the problem of prevention of chronic sickness as well as insight into the problem of the care and rehabilitation of the chronic sick in order to secure a more active interest of the general public in such problems; [e] <i>Perform and encourage research activities</i> as to the best and most modern methods of prevention, discovery, treatment and cure of chronic diseases and the care and rehabilitation of persons affected and for the analysis of such data and for the dissemination of such information to the professions and agencies engaged in providing for the chronic sick, as well as to the general public . . . [h] Maintain and expand co-operative relationships with all professional and public and private agencies responsible for and interested in, the prevention and detection of chronic illness and in the care and rehabilitation of the chronic sick.</p>	<p>164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With respect to [h]</u>: 45 C.F.R. 164.504(e) allows a covered entity to use and disclose PHI to a Business Associate if the Covered Entity obtains satisfactory assurances from the Business Associate - vis' a vis a Business Associate Agreement - that the Business Associate will appropriately safeguard the information.</p>	<p>State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With respect to [h]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to disclosures to entities that act as Business Associates. Therefore, <i>if a Business Associate relationship exists</i>, be sure to follow the additional HIPAA requirements.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 1A</u> State Department of Health -Reorganized</p>	<p>26:1A-113. Powers and duties of division.</p> <p>The division shall: [1] Maintain a <i>continuous study, analysis and interpretation</i> of all information, data, programs and developments pertaining to the aging processes and the needs of the older residents of New Jersey . . . [3] Serve as the central permanent agency for the planning and co-ordination of programs and services for the older residents in the State, particularly in respect to those which multiple governmental agencies or private organizations may contribute; [4] Provide leadership and administrative direction to such efforts from one central source so that those who need help or who may provide help on any of the aspects of aging shall have a central point of contact . . . [9] Co-operate and consult with such other departments of State or Federal Government to the extent necessary to attain the objectives of this act.</p>	<p><u>With respect to [1]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With respect to [3] [4] and [9]</u>: 45 C.F.R.</p>	<p><u>With respect to [1]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With respect to [3] [4] and [9]</u>: This</p>

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		<p>164.504(e) allows a covered entity to use and disclose PHI to a Business Associate if the Covered Entity obtains satisfactory assurances from the Business Associate - vis' a vis a Business Associate Agreement - that the Business Associate will appropriately safeguard the information.</p>	<p>State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to disclosures to entities that act as Business Associates. Therefore, <i>if a Business Associate relationship exists</i>, be sure to follow the additional HIPAA requirements.</p>

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 2 State Department of Health</p>	<p>26:2-103.4 Hospital, birthing center to provide for newborn screening for hearing loss.</p> <p>Every hospital that provides inpatient maternity services and every birthing center licensed in the State pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall be required to provide for newborn screening for hearing loss for all newborns born at the facility. The hospital or birthing center shall file a plan with the department, in a manner and on forms prescribed by the commissioner, detailing how the hospital or birthing center will implement the newborn hearing screening requirements established pursuant to this act. The plan shall include, at a minimum . . . [among other things] <i>the protocol to be followed to ensure the confidentiality of any patient identifying information</i> furnished to the department for the purposes of the central registry established pursuant to this act.</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p> <p>45 C.F.R. 164.530(i) requires a covered entity to have written policies and procedures governing the use and disclosure of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both State law and HIPAA require patient information to be kept confidential. However, HIPAA is more specific with respect to when uses and disclosures of PHI are permissible without first obtaining written Authorization from the individual. Therefore, when implementing this State law requirement, the HIPAA requirements relating to the uses and disclosures of PHI without an Authorization must be incorporated.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 2 State Department of Health</p>	<p>26:2-103.6 Central registry of newborns at risk of hearing loss.</p> <p>(b) A hospital, birthing center or health care professional who performs testing required by this act <i>shall report</i> the results of such testing when a hearing loss is indicated <i>to the department</i> in a manner and on forms prescribed by the commissioner.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 2 State Department of Health</p>	<p>26:2-106 Reports; rules, regulations; enforcement.</p> <p>(a) The Commissioner of Health and Senior Services, in consultation with the Public Health Council, <i>shall require the reporting</i> of cases of cancer and other specified tumorous and precancerous diseases, and the submission of such specified additional information on reported cases or control populations as he deems necessary and appropriate for the recognition, prevention, cure or control of such diseases. (b) Pursuant to subsection a. of this section, the Commissioner of Health and Senior Services is hereby authorized to adopt and promulgate . . . <i>rules and regulations specifying</i> the health care providers, individuals, and other organizations obliged to make the report and submissions required by subsection a. of this section, the related information to be included in such reports, and the methods for such reporting.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u></p>	<p>26:2-106 Reports; rules, regulations; enforcement.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to</p>

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<p>Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>(e) Health insurers and other third party health care payers providing health benefits plans to residents of the State shall report to the Department of Health and Senior Services cases of cancer of State residents based upon selection criteria and in a format specified by the department.</p>	<p>Authorization as “required by law”.</p>	<p>comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-106 Reports; rules, regulations; enforcement.</p> <p>(g) All information <i>reported</i> to the Department of Health and Senior Services for inclusion in the cancer registry pursuant to this section shall be verified for accuracy by the department within six months of receiving the information and shall be incorporated in the registry. <i>Aggregate or summary information</i>, to include gender distribution, age groupings of cases, and cancer types, shall be made available to the public no later than six months after verification by the department. The department shall not make public any information reported to the department which discloses the identity of any person to whom the information relates.</p>	<p>45 C.F.R. 164.514(a) allows a covered entity to use and disclose PHI without regard to the HIPAA rules if the information does not identify an individual and there is no reasonable basis to believe that the information could be used to identify an individual.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This State law provision allows for uses and disclosures of information that do not identify a particular person. However, HIPAA is more specific than State law with regard to when PHI is considered “de-identified.” Therefore, be sure to check HIPAA to see that all identities have been removed.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-107 Confidentiality of reports.</p> <p>4. The reports made pursuant to this act are to be used only by the Department of Health and Senior Services and such other agencies as may be designated by the Commissioner of Health and Senior Services and shall not otherwise be divulged or made public so as to disclose the identity of any person to whom they relate; and to that end, such reports shall not be included under materials available to public inspection pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.).</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to the Department of Health and Senior Services and such other agencies as may be designated by the Commissioner HSS and for limited purposes). Therefore, continue to follow the specific State law restrictions when using and disclosing PHI under this provision.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital</p>	<p>26:2-111 Tests of all infants; treatment services; fees; follow up on positive cases; disclosure of information; educational and training program; objections on religious grounds</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a</p>

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<p>Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>All infants born in this State shall be tested for hypothyroidism, galactosemia and phenylketonuria. <i>Information</i> on newborn infants and their families compiled pursuant to this section may be used by the department and agencies designated by the commissioner for the purposes of carrying out this act, but otherwise the information shall be confidential and not divulged or made public so as to disclose the identity of any person to which it relates, except as provided by law.</p>	<p>confidentiality.</p> <p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI for treatment, payment and healthcare operations without an Authorization.</p> <p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to the Department of Health and Senior Services and such other agencies as may be designated by the Commissioner HSS and for limited purposes). Therefore, continue to follow the specific State law restrictions when using and disclosing PHI under this provision.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-128. Powers of commissioner</p> <p>The commissioner is authorized to . . . (b) Gather data relative to the detection of high blood pressure and the incidence of heart disease, kidney disease and stroke . . .</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities; (2) for health oversight activities and (3) for research purposes.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for disclosures for public health, health oversight and research purposes; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA permits PHI to be used and disclosed for such purposes. Therefore, follow State law, but be sure to implement the additional HIPAA requirements that relate to research.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u></p>	<p>26:2-137.4. Lead screening performed; requirements</p> <p>a. A physician or registered professional nurse, as appropriate, shall perform lead screening on each of his patients under six years of age to whom he provides health care services unless the physician or registered professional nurse has knowledge</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures for</p>

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State Department of Health	<p>that the child has already undergone lead screening in accordance with the requirements of this act. If the physician or registered professional nurse or his staff cannot perform the required lead screening, <i>the physician or registered professional nurse may refer the patient, in writing, to another physician or registered professional nurse, health care facility or designated agency or program which is able to perform the lead screening.</i></p> <p>b. A health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) which serves children and any other agency or program that serves children and that is designated by the commissioner to perform lead screening, shall perform lead screening on each child under six years of age that the facility, agency or program serves, unless the facility, agency or program has knowledge that the child has already undergone lead screening in accordance with the requirements of this act. If the health care facility cannot perform the required lead screening, the <i>health care facility may refer the patient, in writing, to another health care facility, physician, registered professional nurse, or other designated agency or program which is able to perform the lead screening.</i></p>		<p>purposes of treatment; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law without violating HIPAA because HIPAA permits PHI to be use and disclosed for such purposes. Therefore, follow State law.</p>

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-137.4. Lead screening performed; requirements</p> <p>c. If a physician, registered professional nurse, or health care facility, agency or program <i>receives</i> laboratory test results that indicate that a child has lead poisoning, the physician, registered professional nurse, or health care facility, agency or program shall notify, in writing, the <i>parent or guardian of the child</i> about the test results and provide the parent or guardian with an explanation in plain language of the significance of lead poisoning</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p>45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-137.5 Analysis of blood levels to be performed by laboratories licensed by department</p> <p>b. A laboratory which performs a lead screening test pursuant to this act shall report the test results to the department, the local health department in the municipality in which the child who is the subject of the test resides, and [to] the physician, registered professional nurse or health care facility, agency or program that submitted the specimen, within five days of obtaining the test result.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-137.6 Central data base to be maintained for lead screening results information included; permitted uses of information</p> <p>b. The information reported to and compiled by the Department of Health and Senior Services <i>is to be used only by the Department and such other agencies as may be designated by the commissioner and shall not otherwise be divulged</i> or made public so as to disclose the identity of any child to whom it relates <i>without written parental consent</i>.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.</p> <p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for a number of public policy reasons where State law does not). Therefore, follow the State law restrictions when using and disclosing PHI under this provision.</p>

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		specialized government functions; and to authorized worker's compensation programs established by law.	

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-141. Duties, powers</p> <p>The commissioner is authorized to . . . (a) Gather data relative to the occurrence of diabetes and its associated complications</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization including for public health activities and health oversight activities.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-144. Determination of Rh blood type</p> <p>The physician or licensed health professional shall submit the blood specimen to a licensed clinical laboratory or a laboratory approved by the State Department of Health for a determination of rhesus (Rh) blood type. The laboratory shall report the results to the physician or other person engaged in the prenatal care of the woman at the time of delivery, miscarriage or abortion.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-154 Powers; duties.</p> <p>7. The commission has, but is not limited to, the following powers and duties . . . g. Maintain confidential records on each child who applies for assistance under the fund. . . .</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p> <p>45 C.F.R. 164.508(a)(1) states that, as a general rule, except as otherwise permitted or required by the HIPAA Privacy Rule, a covered entity may not use or disclose PHI without first obtaining a valid Authorization.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both State law and HIPAA require patient information to be kept confidential. However, HIPAA is more specific with respect to when uses and disclosures of PHI are permissible without first obtaining written Authorization from the individual. Therefore, when implementing this State law requirement, the HIPAA requirements relating to the uses and disclosures of PHI without an Authorization must be incorporated.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p>	<p>26:2-159 Annual reports.</p> <p>12. The commission shall report annually to the Governor and to each Senate and General Assembly committee with responsibility for issues affecting children, health</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and</p>

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<p><u>Chapter 2</u> State Department of Health</p>	<p>and human services on the status of the program. The report <i>shall include</i> information about the number of participants in the program, average expenditures per participant, the nature and type of catastrophic illnesses for which the fund provided financial assistance, and the average income and expenditures of families who received financial assistance under the program.</p>		<p>HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2</u> State Department of Health</p>	<p>26:2-176. Development of policies, procedures for care</p> <p>d. Physicians, nurse midwives and other licensed health care professionals providing prenatal and postnatal care to women should include <i>fathers and other family members, as appropriate</i>, in both the education and treatment processes to help them better understand the nature and causes of postpartum depression so that they too can overcome the spillover effects of the illness and improve their ability to be supportive of the new mother.</p>	<p>45 C.F.R. 164.510 allows a covered entity to use and disclose PHI to a family member, other relative or close personal friend of the individual or any other person identified by the individual, the PHI directly relevant to such person’s involvement with the individual’s care or payment related to the individual’s care, but only if the individual is present for, or otherwise available prior to, a use or disclosure and has the capacity to make healthcare decisions and the covered entity obtains the individual’s agreement or provides that the individual with an opportunity to object and the individual does not express an objection or reasonably infers from the circumstances, based on the exercise of professional judgment that the individual does not object to the disclosure.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, HIPAA has more specific requirements when PHI can be disclosed to family members or friends involved in an individual’s treatment or care. Therefore, be sure to also implement the additional HIPAA requirements relating to disclosures to friends and family.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 2B Rehabilitation of Alcoholics</p>	<p>26:2B-13 Powers of department</p> <p>The department is hereby authorized, empowered and directed under this act to . . . k.) Develop and implement an ongoing system of collecting, analyzing and distributing <i>statistics</i> on the incidence and prevalence of alcoholism, alcohol-related problems and alcohol consumption among the citizens of New Jersey, with special emphasis on youth. This system <i>shall</i> include, but is not limited to, <i>studies, surveys, random samplings and assessments</i>, and use as its sources the variety of public agencies and private organizations concerned and connected with the subject, including the Division of Motor Vehicles, the Superior Court, Chancery Division, Family Part, the youth bureaus, alcohol treatment programs, hospitals and mental health centers, the schools, the police departments, and the Division of Alcoholic Beverage Control. Special attention shall be given to the relationship of alcohol to automobile accidents, crime, delinquency and other social problems.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy reasons without an Authorization including for public health activities, and for research purposes, provided an IRB or privacy board has approved the waiver of the Authorization.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for use and disclosure of PHI for research purposes, or of information that is de-identified; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits PHI to be disclosed under such circumstances. Therefore, follow State law, but be sure to implement the additional HIPAA</p>

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			requirements that relate to research.
<p data-bbox="150 565 344 651">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 686 344 773">Chapter 2B Rehabilitation of Alcoholics</p>	<p data-bbox="419 565 1319 623">26:2B-15 Intoxicated persons or alcoholics; admission for treatment of facilities; duration; notice to family</p> <p data-bbox="419 654 1413 773">[W]hen a person is admitted to a facility, his family shall be notified as soon thereafter as possible. If a patient who is <i>not incapacitated</i> requests that notification <i>not</i> be given, his request <i>shall be respected except</i> if a person is a juvenile in which case his family or legal guardian shall be notified.</p>	<p data-bbox="1454 565 1956 1500">45 C.F.R. 164.510 allows a covered entity to disclose PHI to a family member, other relative or close personal friend of the individual or any other person identified by the individual, the PHI directly relevant to such person's involvement with the individual's care or payment related to the individual's care, but only if the individual is present for, or otherwise available prior to, a use or disclosure and has the capacity to make healthcare decisions and the covered entity obtains the individual's agreement or provides that the individual with an opportunity to object and the individual does not express an objection or reasonably infers from the circumstances, based on the exercise of professional judgment that the individual does not object to the disclosure OR if the individual is not present for or the opportunity to agree or object to the use or disclosure cannot practicably be provided because of the individual's incapacity or an emergency circumstance, the covered entity may, in the exercise of professional judgment determine whether the disclosure is in the best interests of the individual and, if so, disclose only the PHI that is directly relevant to the person's involvement with the individual's health care.</p>	<p data-bbox="1983 565 2408 834">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>

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		45 C.F.R. 164.502(g) allows a covered entity to treat a personal representative as the individual for purposes of authorizing disclosure of PHI. However, HIPAA States that if, under applicable law a minor has the authority to act as an individual with respect to PHI pertaining to a health care service.	
<p data-bbox="150 410 344 492">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 532 344 613">Chapter 2B Rehabilitation of Alcoholics</p>	<p data-bbox="419 410 1257 459">26:2B-16 Person intoxicated in public place; assistance to facility; determination of intoxication</p> <p data-bbox="419 500 1419 703">[A]ny person who is intoxicated in a public place and who a police officer has reason to believe is incapacitated shall be assisted by the police officer to an intoxication treatment center or other facility . . . Any person assisted by a police officer to facility pursuant to the provisions of this section shall receive treatment . . . if such person is determined upon examination to be intoxicated, the examining physician or other medically competent individual shall so certify and a duplicate copy of the certification <i>shall be made available to the police officer.</i></p>	45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.
<p data-bbox="150 808 344 889">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 930 344 1011">Chapter 2B Rehabilitation of Alcoholics</p>	<p data-bbox="419 808 1419 922">26:2B-17 Violators of municipal ordinance or disorderly persons not arrested for misdemeanor; taking to facility; determination of alcoholism; commitment; request; stay of criminal proceeding; hearing; treatment; discharge; report to court; sentence; credits</p> <p data-bbox="419 963 1419 1401">Any person who is arrested for violation of a municipal ordinance, or for a disorderly persons offense, and who is not also arrested for a misdemeanor, and who the arresting police officer has reasonable cause to believe is intoxicated, may be taken by a police officer directly to an intoxication treatment center or other appropriate facility The administrator of any intoxication treatment center, or of any other facility, shall cause any such person to be examined by a physician or by a medically competent individual designated by the department At such time as the person is to be discharged from the facility, he shall be informed by the administrator that if he is an alcoholic who would benefit by treatment he may, in the discretion of the court, be afforded treatment in lieu of prosecution Prior to releasing the person from the center or other facility, the administrator <i>shall</i> notify the police who shall transport him therefrom for proceedings in the case The physician <i>shall</i> report his findings to the court together with the facts upon which the findings are based and the reasons therefor as soon as possible but in any event not longer than 3 days after the completion of the examination. . . .</p>	45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.
<p data-bbox="150 1417 344 1498">N.J.S.A. Title 26 Health and Vital Statistics</p>	<p data-bbox="419 1417 1118 1442">26:2B-20.a. Records; confidentiality; rights of patients</p> <p data-bbox="419 1474 1325 1498">The administrator of each facility (any public, private place, or portion thereof</p>	45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization,	State law is “more stringent” than HIPAA and must be followed because it restricts a use or

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<p><u>Chapter 2B</u> Rehabilitation of Alcoholics</p>	<p>providing services especially designed for the treatment of intoxicated persons or alcoholics; including, but not limited to intoxication treatment centers, inpatient treatment facilities, outpatient facilities, and residential aftercare facilities) shall keep a record of the treatment afforded each patient, which shall be confidential and shall be made available only upon proper judicial order, whether in connection with pending judicial proceedings or otherwise.</p>	<p>including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>disclosure in circumstances under which such use or disclosure otherwise would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for a number of public policy reasons where State law does not). Therefore, follow the State law restrictions when using and disclosing PHI under this provision.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2F</u> Public Health Priority Funding</p>	<p>26:2F-12. Audit by commissioner; examination of agency records; unexpended funds and audit exceptions; return; disposition</p> <p>In order to insure that the public health priority funds are expended in conformance with the provisions of this act, the commissioner shall, when he deems it in order, have an audit made of the expenditures of moneys and of services provided by the local health agency receiving public health priority funds and shall, when he shall deem it necessary, have examined all books, papers and vouchers of the agency and its fiscal agent shall have free and unrestricted access thereto for that purpose.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization including for public health activities and health oversight activities.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2N</u> Pertussis</p>	<p>26:2N-5. Health record</p> <p>Upon administering a pertussis vaccine to a child in this State, a health care provider shall record and retain as part of the child’s permanent health record the date the vaccine was administered, the manufacturer, a lot number and any other available identifying information of the vaccine that was administered, and the name and title of the health care provider who administered the vaccine.</p> <p>The health care provider shall make the information concerning the vaccine available to the child’s <i>parent or guardian</i>, upon request.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p>45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 2N</u> Pertussis</p>	<p>26:2N-6. Reporting of major adverse reactions</p> <p>If the health care provider has reason to believe that the recipient of the pertussis vaccine has had a major adverse reaction, the health care provider shall immediately record all relevant information in the child’s permanent medical record and shall report the information, including the manufacturer and the lot number, to the</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by</p>

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	department within seven days . . . upon receipt of the information, the department shall immediately notify the manufacturer of the vaccine and the Center for Disease Control of the adverse reaction.		HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<u>N.J.S.A. Title 26</u> Health and Vital Statistics Chapter 2P Lyme Disease	None Identified.	N/A	N/A
<u>N.J.S.A. Title 26</u> Health and Vital Statistics Chapter 2Q Lead Evaluation and Abatement	None Identified.	N/A	N/A
<u>N.J.S.A. Title 26</u> Health and Vital Statistics Chapter 3 Local Boards of Health	None Identified.	N/A	N/A
<u>N.J.S.A. Title 26</u> Health and Vital Statistics Chapter 3A2 Local Health Services	26:3A2-10. Standards of performance; compliance by municipality; evaluation; certification; review by commissioner (d) The commissioner shall periodically review every municipal or county health department to determine whether said municipal or county department is meeting the “Standards of Performance.”	45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for public health activities and health oversight activities.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, follow State law.
<u>N.J.S.A. Title 26</u>			

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Health and Vital Statistics <u>Chapter 3B</u> Nuisances Affecting Health	None Identified.	N/A	N/A

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 3E</u> Restaurants</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-19. Report of persons affected with communicable diseases in institutions</p> <p>Every physician, superintendent or other person having control or supervision over a State, county or municipal hospital, sanatorium or other public or private institution in which any person ill or infected with any disease required by law or the State Sanitary Code to be reported is received for care or treatment <i>shall</i>, within 24 hours after any such patient has been received into the institution, <i>report the fact</i> to the health officer or other officer or employee designated to receive such reports by the local board of health having jurisdiction over the territory in which the institution is located.</p> <p>The report <i>shall be in writing</i> in the name of the physician, superintendent or other person having charge over the institution and shall set forth the name and age of the ill or infected person and the exact place of his residence or the name of the place from which he was received into the institution, together with the date upon which he was received and such other information as may be required by regulation of the State Department of Health.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-20. Transmission of duplicate of report from institutions in certain cases.</p> <p>Every person designated by any local board of health to receive reports of communicable diseases who shall receive any report of sickness from a physician, superintendent or other person having charge over any institution referred to in section 26:4-19 of this title <i>shall</i>, when the sick person referred to in the report resides in some municipality other than that in which the institution is located, make a duplicate of any such report received by him and <i>transmit the same</i>, within twenty-four hours after the receipt of the original, by mail, <i>to the officer designated</i> to receive the reports in the locality in which the sick person resided before being admitted into the institution.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-21. Certificate of cases reported to local board</p> <p>On the thirtieth day of June and the thirty-first day of December in each year every physician, house owner or householder making any report of a communicable disease shall receive from the officer to whom the report was made during the preceding six months a certificate in writing under the hand of the officer <i>setting forth the number of names reported</i>.</p>	<p>45 C.F.R. 164.514(a) allows a covered entity to disclose PHI without regard to the HIPAA rules if the information does not identify an individual and there is no reasonable basis to believe that the information could be used to identify an individual.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This State law provision, allows for uses and disclosures of information that do not identify a particular person. However, HIPAA is more specific than State law with</p>

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			regard to when PHI is considered “de-identified.” Therefore, be sure to check HIPAA to see that all identifiers have been removed.
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p>Chapter 4 Communicable Diseases</p>	<p>26:4-23. Register of reported cases; inspection</p> <p>The facts contained in the report of a communicable disease shall be entered by the officer to whom the report is delivered in a register kept for that purpose. The register shall be subject to the inspection of the local board and its proper officers and to the state department and its officers only.</p>	<p>45 C.F.R. 164.514(d). A covered entity must make reasonable efforts to limit access to PHI by member of the workforce to those individuals who need the information to carry out their duties.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law specifically limits the access to certain health information to only specific individuals while HIPAA only states that a covered entity must itself define and document the scope of employee access to PHI. Therefore, follow State law, but be sure to document the limitations as required by HIPAA.</p>
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p>Chapter 4 Communicable Diseases</p>	<p>26:4-24. Reports of local boards to state department</p> <p>The officer to whom the report of a communicable disease is delivered and whose duty it is to make a record of the same, <i>shall</i>, at least once each week, and daily when required by the state department, <i>transmit</i> by mail the facts stated therein <i>to the state department</i> and <i>shall</i> upon request by the state department give full information concerning the measures employed by the local board to prevent the spread of the diseases mentioned in the reports, which facts and information shall be conveyed to the state department in writing.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p>Chapter 4 Communicable Diseases</p>	<p>26:4-29. Determination of infectiousness; review</p> <p>A case of venereal disease shall be regarded as infectious until a physician licensed to practice medicine has examined the case and reported to the local board that the case is not infectious, but if in the opinion of the local board of the jurisdiction the protection of the public health requires it, the <i>board may review the case</i> and cause a medical examination of any such case to be made by a physician designated by the board, and the opinion of such physician as to the infectiousness or noninfectiousness of the case shall be final.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment.</p> <p>45 C.F.R. 164.512(b) allows a covered entity to use and disclose PHI for public health activities.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures to be made for purposes of treatment and public health activities; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p>
<p>N.J.S.A. Title 26</p>	<p>26:4-30. Examination of suspected person on report from director</p>	<p>45 C.F.R. 164.502 allows a covered entity</p>	<p>This State law is not “contrary to”</p>

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<p>Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>When a local board or health officer receives a report from the director or from any person authorized by the director to make such report, that a person within the jurisdiction of the local board or health officer is, or is suspected to be, suffering from or infected with a venereal disease, the board or health officer may cause a medical examination to be made of the person for the purpose of ascertaining whether or not such person is in fact suffering from or infected with such disease.</p>	<p>to use and disclose PHI without an Authorization for treatment.</p> <p>45 C.F.R. 164.512(b) allows a covered entity to use and disclose PHI for public health activities.</p>	<p>HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of treatment and public health activities. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-35. Examination and isolation of infected person failing to report to attending physician</p> <p>If a person in the infectious stage of a venereal disease shall fail to report as directed to the physician in attendance on him for treatment, the physician shall report such failure to the local board, or to the state department, which shall forward the information to the local board.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-37 Quarantine; complaint; warrant; commitment.</p> <p>[T]he complaint, commitment, and all other papers relating to the case [to force quarantine on uncooperative person] shall be impounded and shall <u>not</u> be open to public inspection, and hearings shall <u>not</u> be open to the public.</p>	<p>45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for certain public policy reasons). Therefore, assuming the information referred to under this provision is PHI, follow the State law restrictions when using or disclosing such information.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-38. Report of private cases to state department</p> <p>The physician, nurse, or other person treating a venereal disease shall report the case immediately to the state department.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by</p>

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			<p>HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>

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<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p>Chapter 4 Communicable Diseases</p>	<p>26:4-39 Report of institutional cases to State department</p> <p>The physician, superintendent or other person having control or supervision over any State, county or municipal hospital, sanatorium or other public or private institution shall report the following cases to the State department immediately after they are received into the institution: the case of any person infected with venereal disease.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p>Chapter 4 Communicable Diseases</p>	<p>26:4-41 Contents of reports secret; exceptions</p> <p><i>No person shall disclose</i> the name or address or the identity of any person known or suspected to have a venereal disease <i>except to</i> the person’s <i>physician</i> or to a <i>health authority</i>, or, in the event of a prosecution under this article or under the criminal law of this State to a <i>prosecuting officer</i> or to the State; provided, however, that the person’s physician or a health authority may disclose the name, address or identity of such person when and only when the physician or health authority shall deem such disclosure necessary in order to <i>protect the health or welfare of the person or his family or of the public</i>; and provided further, that nothing herein shall be construed as in any way restricting such disclosures to the State Department of Health.</p> <p>Documents, records or reports which contain or would reveal the name, address or identity of a person known or suspected to have a venereal disease or treated for such a disease <i>shall not be open to inspection</i> except by an authorized representative of the State Department of Health or, in the event of a prosecution under this article or under the criminal laws of this State, <i>by a prosecuting officer</i> or the court; provided, however, that the custodian of any such documents, records or reports <i>may permit inspection of them by a licensed physician or a health official whenever said custodian shall deem such inspection necessary in order to protect the health or welfare of the person or of his family or of the public</i> and the custodian of any hospital record shall permit examination of such record in connections with any claim for compensation or damages for personal injury or death resulting therefrom by any person authorized by any other law to make such an examination.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI for treatment purposes without an Authorization.</p> <p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>This State law is “more stringent” and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for purposes of providing treatment, obtaining payment or for health care operations as well as for a number of public policy reasons). Therefore, uses and disclosures under this provision should be limited to those made to a physician or health authority, <u>AND</u> the health authority must limit its uses and disclosures of PHI to a prosecuting officer or the State to those instances where there is a valid subpoena or court order.</p>
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p>Chapter 4 Communicable Diseases</p>	<p>26:4-49.8. Examination and treatment for venereal disease of inmates of institutions</p> <p>If a person has a venereal disease or if any person has refused to submit to examination or to allow specimens to be taken, the warden, superintendent or other person in charge: [a] shall notify the State department and</p>	<p><u>With respect to [a]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p><u>With respect to [a]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA</p>

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	<p>[b] may also notify the <i>local health officer</i> of the expected date of release of such person and the facts of the case.</p> <p>Such notification shall be made, if possible, at least five days prior to the actual date of release, and shall be made not later than the day following the date of release in any case.</p>	<p><i>With respect to [b]:</i> 45 C.F.R. 164.512(b) allows a covered entity to use and disclose PHI without an Authorization for public health activities.</p>	<p>may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><i>With respect to [b]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures to be made for purposes of public health activities; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-60. Register of reported cases and examinations; inspection</p> <p>The local board shall cause all reports of cases of tuberculosis, and the results of any examination showing the presence of the bacilli of tuberculosis to be recorded in a register of which it shall be the custodian. Such register shall not be open to inspection by any person other than the <i>State department</i> and the <i>local board</i>. The local board shall not permit any such report or record to be divulged so as to disclose the identity of the person to whom it relates, except as may be necessary to carry into effect the provisions of this article.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to the State department and the local board and for limited purposes.) Therefore, continue to follow the specific State law restrictions when disclosing PHI under this provision.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-71. Investigation of reported cases</p> <p>When cases of tuberculosis are reported to the state department as required by law, the state department and the local boards shall investigate such cases for the purpose of ascertaining whether the rules and regulations of the state department are being complied with.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law requires certain disclosures to be made; and, an entity covered by</p>

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			<p>HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-71.3. Leaving hospital against medical advice; report to local board of health</p> <p>If any person afflicted with tuberculosis in a communicable form shall leave any hospital against medical advice, the administrator <i>shall report</i> such person to the local board of health of the municipality in which such patient was residing when admitted to the hospital and to the State Commissioner of Health within 12 hours. Such report shall be in writing and shall state whether the person is afflicted with tuberculosis in a communicable form.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-73. Duty to report to local board</p> <p>Whenever one or both eyes of an infant become inflamed, swollen or reddened, or show any unnatural discharge at any time within two weeks after its birth, and no licensed practitioner of medicine is in attendance upon the infant at the time, the midwife, nurse, attendant or relative having charge of such infant <i>shall report</i> the fact in writing, within six hours, to the local board of health having jurisdiction over the locality in which the parents of the infant reside.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-79. Report by physician attending person bitten by animal</p> <p>Every physician <i>shall</i>, within twelve hours after his first professional attendance upon any person bitten by a dog, cat or other animal, <i>report</i> to the person designated by law or by the local board, under authority of law, to receive reports of reportable communicable diseases in the municipality in which the person so bitten may be, the name, age, sex, color and the precise location of the person so bitten.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should</p>

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 4</u> Communicable Diseases</p>	<p>26:4-126. Reports to state department</p> <p>The state department <i>may</i> require from the local board and the port health officer any necessary reports relating to their duties under this article.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for public health activities and health oversight activities.</p>	<p>follow this State law.</p> <p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 4A Public Swimming Pools and Places</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 4B Public Accommodations</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 5C Acquired Immune Deficiency Syndrome</p>	<p>26:5C-7. Record of identifying information; confidentiality</p> <p>A record maintained by the Department of Health, a local health department, an organization pursuant to a contract with, grant from, or regulation by the department in connection with this act, a provider of health care or a health care facility as defined by section 2 of P.L.1971, c. 136 (C.26:2H-2), a laboratory, a blood bank, a third-party payor, or any other institution or person which contains identifying information about a person who has or is suspected of having AIDS or HIV infection, <i>is confidential and shall be disclosed only</i> for the purposes authorized by this act.</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p>	<p>This State law is not “contrary to” HIPAA as both laws generally require information to be kept confidential.</p> <p><i>*However, see the State law provisions below for specific comment and direction on how this information may be disclosed under State law “for the purposes authorized by this act.”</i></p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p>	<p>26:5C-8. Disclosure of content of record; consent; conditions</p> <p>[a] The content of a record (which contains identifying information about a person</p>	<p><u>With regard to [a]</u>: 45 C.F.R. 164.508 allows a covered entity to use and disclose PHI in accordance with a valid</p>	<p><u>With regard to [a]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both</p>

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<p><u>Chapter 5C</u> Acquired Immune Deficiency Syndrome</p>	<p>who has or is suspected of having AIDS or HIV infection) <i>may be disclosed</i> in accordance with the <i>prior written informed consent</i> of the person who is the subject of the record or if the person is legally incompetent or deceased, in accordance with section 8 of the Aids Assistance Act.</p> <p>[b] If the <i>prior written consent</i> of the person who is the subject of the record is <u>not</u> obtained, the <i>person's records shall be disclosed only under the following conditions</i>:</p> <p>[1] to qualified personnel for the purpose of conducting scientific research, but a record shall be released for research <i>only</i> following review of the research protocol by an Institutional Review Board constituted pursuant to federal regulation 45 C.F.R. § 46.101 et seq. (the person who is the subject of the record shall not be identified, directly or indirectly, in any report of the research and research personnel shall not disclose the person's identity in any manner);</p> <p>[2] to qualified personnel for the purpose of conducting management audits, financial audits or program evaluation, but the personnel shall not identify, directly or indirectly, the person who is the subject of the record in a report of an audit or evaluation, or otherwise disclose the person's identity in any manner (identifying information shall not be released to the personnel unless it is vital to the audit or evaluation);</p> <p>[3] to qualified personnel involved in medical education or in the diagnosis and treatment of the person who is the subject of the record (disclosure is limited to only personnel directly involved in medical education or in the diagnosis and treatment of the person);</p> <p>[4] to the Department of Health as required by State or federal law;</p> <p>[5] as permitted by rules and regulations adopted by the commissioner for the purposes of disease prevention and control; and</p> <p>[6] in all other instances authorized by State or federal law.</p>	<p>Authorization that contains specified elements.</p> <p><u>With regard to [b][1]:</u> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI without an Authorization for research purposes, provided an IRB or privacy board has approved the waiver of the Authorization</p> <p><u>With regard to [b][2] and [b][3]:</u> 45 C.F.R. 164.502 allows a covered entity to use and disclose PHI for treatment, payment and healthcare operations without an Authorization.</p> <p>45 C.F.R. 164.514(d) requires a covered entity to make reasonable efforts to limit access to PHI by members of the workforce to those individuals who need</p>	<p>State law and HIPAA. An entity covered by HIPAA may disclose PHI after obtaining a written consent referred to under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to the required elements of the consent (called an "Authorization" under HIPAA). Therefore, be sure your consent forms contain the additional HIPAA requirements relating to Authorizations.</p> <p><u>With regard to [b], generally:</u> State law is "more stringent" because AIDS/HIV information may be used and disclosed without written Authorization only for the purposes listed in this State law provision, which is more limited than the complete list of permissible uses disclosures that HIPAA allows without a written Authorization.</p> <p><u>With regard to [b][1]:</u> State law is "more stringent" (i.e., for purposes of this fact pattern, the law prohibits or restricts a use or disclosure in circumstances under which such use or disclosure otherwise would be permitted under HIPAA) and controls. Follow State law.</p> <p><u>With regard to [b][2] and [b][3]</u> This Generally, State law is not "contrary to" HIPAA as this provision of State law allows for uses and disclosures for purposes of treatment, payment and/or health care operations; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law without violating HIPAA because</p>

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		<p>the information to carry out their duties.</p> <p><i>With regard to [b][4]:</i> 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><i>With regard to [b][5]:</i> 45 C.F.R. 164.512(b) allows a covered entity to use and disclose PHI for public health activities.</p>	<p>HIPAA also permits PHI to be used and disclosed for such purposes. However, with regard to limiting employee access, State law is “more stringent” (i.e., for purposes of this fact pattern, State law restricts the use or disclosure of PHI by personnel for health care operations to when it is “vital,” and, for treatment purposes to providers “directly involved” in the diagnosis and treatment of the Individual, where HIPAA would permit others to receive the information) and controls. Therefore, follow State law.</p> <p><i>With regard to [b][4]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law requires certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><i>With regard to [b][5]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures to be made for purposes of treatment and public health activities; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such</p>

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		<p><i>With regard to [b][6]:</i> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>purposes. Therefore, follow State law.</p> <p><i>With regard to [b][6]:</i> State law is “more stringent” (i.e., for purposes of this fact pattern, the law permits all other uses and disclosures only if they are “authorized by law” where HIPAA would permit such use or disclosure even if it is not authorized by law) and controls. Follow State law.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 5C</u> Acquired Immune Deficiency Syndrome</p>	<p>26:5C-9 Disclosure by order of court pursuant to showing of good cause</p> <p>The record of a person who has or is suspected of having AIDS or HIV infection may be disclosed by an order of a court of competent jurisdiction which is granted pursuant to an application showing good cause therefore.</p>	<p>45 C.F.R. 164.512(f) allows a covered entity to use and disclose PHI in compliance with and as limited by the relevant requirements of a court order or court-ordered warrant or a subpoena or summons issued by a judicial officer.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 5C</u> Acquired Immune Deficiency Syndrome</p>	<p>26:5C-11 Confidentiality of record by recipient of disclosure</p> <p>Any record disclosed under this act shall be held confidential by the recipient of the record and shall not be released by said recipient unless the conditions of this act are met.</p>	<p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 5C</u> Acquired Immune Deficiency Syndrome</p>	<p>26:5C-12 Consent for disclosure of record of deceased or legally incompetent person</p> <p>When consent is required for disclosure of the record of a deceased or legally incompetent person who has or is suspected of having AIDS or HIV infection, consent may be obtained:</p> <p>(a) from an executor, administrator of the estate, or authorized representative of the</p>	<p>45 C.F.R. 164.502(g) allows a covered entity to treat a personal representative as the individual for purposes of authorizing disclosure of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore,</p>

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	legally incompetent or deceased person; (b) from the person's spouse, domestic partner as defined in section 3 of P.L. 2003, c.246, primary caretaking partner or, if none, by another member of the person's family; and (c) from the commissioner in the event that a deceased person has neither an authorized representative or next-of-kin.		follow both State law and HIPAA requirements.
<p data-bbox="150 289 344 370">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 407 344 488">Chapter 5C Acquired Immune Deficiency Syndrome</p>	<p data-bbox="419 289 1077 313">26:5C-13 Consent for disclosure of record of minor</p> <p data-bbox="419 345 1400 459">When consent is required for disclosure of the record of a minor who has or is suspected of having AIDS or HIV infection, consent shall be obtained from the parent, guardian or other individual authorized under State law to act in the minor's behalf.</p>	<p data-bbox="1454 289 1956 581">45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p data-bbox="1983 289 2408 557">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p data-bbox="150 592 344 673">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 711 344 792">Chapter 5C Acquired Immune Deficiency Syndrome</p>	<p data-bbox="419 592 1360 646">26:5C-16. Information on HIV, AIDS and benefits of testing; guidelines for notification of positive test result; confidentiality</p> <p data-bbox="419 683 1400 829">A physician or other health care practitioner who is the primary caregiver for a pregnant woman or a woman who seeks treatment within four weeks of giving birth, shall, in accordance with guidelines developed by the commissioner, provide the woman with information about HIV and AIDS, and also inform the woman of the benefits of being tested for HIV and present her with the option of being tested.</p> <p data-bbox="419 867 1400 920">Information about a woman which is obtained pursuant to this section shall be held confidential in accordance with the provisions of P.L.1989, c. 303 (C. et seq.).</p>	<p data-bbox="1454 592 1956 706">45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI</p>	<p data-bbox="1983 592 2408 860">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p data-bbox="150 987 344 1068">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 1105 344 1187">Chapter 6 Disposal of Dead Bodies</p>	<p data-bbox="419 961 1427 1042">26:6-8.2 Notification of Infections of Deceased with AIDS or certain contagious, infectious or communicable diseases by medical person who makes determination of death.</p> <p data-bbox="419 1079 1400 1380">If the attending physician, registered professional nurse or State or county medical examiner who makes the actual determination and pronouncement of death determines or has knowledge that the deceased person was infected with HIV or hepatitis B virus or that the deceased person suffered from AIDS, AIDS-related complex or any of the contagious, infectious or communicable diseases as shall be determined by the Commissioner of the Department of Health, the attending physician, registered professional nurse or State or county medical examiner shall immediately place with the remains written notification of the condition and shall provide written notification of the condition to the funeral director who is responsible for the handing and the disposition of the body.</p>	<p data-bbox="1454 961 1956 1042">45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p data-bbox="1983 961 2408 1351">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>
<p data-bbox="150 1421 344 1502">N.J.S.A. Title 26 Health and Vital Statistics</p>	<p data-bbox="827 1474 1016 1498">None Identified.</p>	<p data-bbox="1677 1474 1731 1498">N/A</p>	<p data-bbox="2171 1474 2225 1498">N/A</p>

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<p align="center">Chapter 7 Cremation</p>			
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p align="center">Chapter 8 Registration of Vital Statistics</p>	<p>26:8-40.12 Sex Reassignment surgery; amendment of birth certificate</p> <p>[c] When an amended certificate of birth is issued, the State registrar shall notify the appropriate local registrar of vital statistics, who will enter the amended certificate in his local record and place his copy of the original certificate under seal.</p> <p>[d] The State registrar shall place the <i>original certificate</i> of birth and all papers pertaining to the amended certificate of birth under seal. The seal shall <u>not</u> be broken except by order of a court of competent jurisdiction. Thereafter, whenever a certified copy of the certificate of birth is prepared, it shall be made from the amended certificate of birth, except when an order of a court of competent jurisdiction requires that a certified copy be made of the original certificate of birth.</p>	<p><u>With respect to [c]</u>: 45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p> <p><u>With respect to [d]</u>: 45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p><u>With respect to [c]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p> <p><u>With respect to [d]</u>: This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits a disclosure of PHI for a number of public policy reasons where this State law provision would prohibit it without a court order). Therefore, continue to follow the specific State law restriction when disclosing PHI under this provision.</p>
<p>N.J.S.A. Title 26 Health and Vital Statistics</p> <p align="center">Chapter 8 Registration of Vital Statistics</p>	<p>26:8-40.22. Confidential reports of abortions of fetus with or infant affected by birth defect</p> <p>a. The Commissioner of Health and Senior Services, in consultation with the Public Health Council, shall require the confidential reporting to the Department of Health and Senior Services of all cases where an infant is diagnosed with severe hyperbilirubinemia, and where pregnancy results in a naturally aborted fetus or infant affected by a birth defect, and an electively aborted fetus that exhibits or is known to have a birth defect after 15 weeks of gestation. The reporting requirement shall apply to all infants from birth through five years of age.</p> <p>b. The Commissioner of Health and Senior Services shall determine the health care providers and facilities which shall be required to report all birth defects and all</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should</p>

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	cases of severe hyperbilirubinemia, the types of conditions or defects that shall be reported, the type of information that shall be contained in the confidential report and the method for making the report. In reports concerning all fetuses with anomalies, the name of the mother shall <u>not</u> be submitted.		follow this State law.
<p data-bbox="150 285 344 370">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 407 360 492">Chapter 8 Registration of Vital Statistics</p>	<p data-bbox="419 253 889 280">26:8-40.23. Confidentiality of reports</p> <p data-bbox="419 318 1419 492">The confidential reports made pursuant to this act are to be <i>used only by the Department of Health and other agencies</i> that may be designated by the Commissioner of Health and shall not otherwise be divulged or made public so as to disclose the identity of any person to whom they relate; and to that end, such reports shall not be included under materials available to public inspection pursuant to P.L. 1963, c. 73 (C. 47:1A-1 et seq.).</p>	<p data-bbox="1454 253 1938 370">45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI</p> <p data-bbox="1454 407 1951 524">45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization.</p>	<p data-bbox="1983 253 2408 768">This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to Department of Health and other agencies that may be designated by the Commissioner of Health and for limited purposes). Therefore, continue to follow the specific State law restrictions when disclosing PHI under this provision.</p>
<p data-bbox="150 836 344 920">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 958 360 1042">Chapter 8 Registration of Vital Statistics</p>	<p data-bbox="419 803 1145 831">26:8-48. Amendments to be signed, dated and witnessed</p> <p data-bbox="419 868 1392 1011">A certificate of birth, fetal death, marriage, domestic partnership or death heretofore or hereafter filed with the State registrar shall not be altered or changed otherwise than by amendments properly signed, dated and witnessed, or as otherwise recorded and authenticated on the NJ-EDRS as prescribed by the State registrar.</p>	<p data-bbox="1454 803 1951 946">45 C.F.R. 164.526 allows an individual the right to have a covered entity amend PHI in a designated record set for as long as the record is maintained in the designated record set.</p>	<p data-bbox="1983 803 2408 1157">This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may amend PHI under this State law provision without violating HIPAA. Therefore, follow State law. However, if the reason for the change is initiated by the person whose PHI is at issue, be sure to also meet the HIPAA requirements relating to amendment.</p>
<p data-bbox="150 1203 344 1287">N.J.S.A. Title 26 Health and Vital Statistics</p> <p data-bbox="150 1325 360 1409">Chapter 8 Registration of Vital Statistics</p>	<p data-bbox="419 1170 1150 1198">26:8-49. Corrections to birth and fetal death certificates</p> <p data-bbox="419 1235 1419 1352">Corrections to birth and fetal death certificates shall be signed by the person who made the original report or by either of the parents of the child or by any other person having personal knowledge of the matters sought to be corrected which other person shall state such matters on his oath.</p> <p data-bbox="419 1390 1405 1500">Corrections may also be signed by any person whose birth report is in error provided substantiating documentary proof, satisfactory to the State registrar or any local registrar, is submitted therewith and noted by said State registrar or local registrar upon the written request for correction.</p>	<p data-bbox="1454 1170 1951 1320">45 C.F.R. 164.526 allows an individual the right to have a covered entity amend PHI in a designated record set for as long as the record is maintained in the designated record set.</p>	<p data-bbox="1983 1170 2408 1500">This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may amend PHI under this State law provision without violating HIPAA. Therefore, follow State law. However, if the reason for the change is initiated by the person whose PHI is at issue, be sure to also meet the HIPAA requirements</p>

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<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 8</u> Registration of Vital Statistics</p>	<p>26:8-52. Correcting death certificates, procedure</p> <p>Corrections to death certificates shall be signed by the physician, registered professional nurse, county medical examiner, State Medical Examiner, funeral director or informant, whose name appears upon the certificate, or shall be otherwise recorded and authenticated on the NJ-EDRS as prescribed by the State registrar; however, any individual having personal knowledge and substantiating documentary proof of the matters sought to be corrected may apply under oath to the county medical examiner or the State Medical Examiner in a case in which the certificate was signed by the State Medical Examiner, to have the certificate corrected. The authority to sign or otherwise authenticate corrections or amendments to causes or duration of causes of death is restricted to the physician, State Medical Examiner or county medical examiner. Upon denial of an application for correction or amendment of a death certificate, a person who has applied to a county medical examiner may apply to the State Medical Examiner, who shall exercise discretion to review the matter and amend the certificate or to defer to the decision of the county medical examiner. The decision of the county medical examiner shall be deemed the final decision by a public officer in the matter unless the State Medical Examiner amends or corrects the death certificate.</p>	<p>45 C.F.R. 164.526 allows an individual the right to have a covered entity amend PHI in a designated record set for as long as the record is maintained in the designated record set.</p>	<p>relating to amendment.</p> <p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may amend PHI under this State law provision without violating HIPAA. Therefore, follow State law. However, if the reason for the change is initiated by the person whose PHI is at issue, be sure to also meet the HIPAA requirements relating to amendment.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p><u>Chapter 8</u> Registration of Vital Statistics</p>	<p>26:8-53. Acceptance of corrections</p> <p>The State department or local registrars may refuse to accept corrections or amendments unless supported by adequate documentary evidence presented at the time the request for correction or amendment is made.</p>	<p>45 C.F.R. 164.526(b) A covered entity is permitted to deny an individual the right to amend his or her records as permitted by HIPAA.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may amend PHI under this State law provision without violating HIPAA. Therefore, follow State law. However, if the reason for the change is initiated by the person whose PHI is at issue, be sure to also meet the HIPAA requirements relating to amendment.</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p> <p>Chapter 9 Mosquito Extermination</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p><u>N.J.S.A. Title 26</u> Health and Vital Statistics</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>

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<p><u>Chapter 12</u> Youth Camps, Standards Etc.</p>			
<p><u>N.J.S.A. Title 47</u> Public Records</p> <p><u>Chapter 1A</u> Examination and Copies of Public Records</p>	<p>47:1A-1. Legislative findings</p> <p>The Legislature finds and declares it to be the public policy of this State that: government records shall be readily accessible for inspection, copying, or examination by the citizens of this State, with certain exceptions, for the protection of the public interest, and any limitations on the right of access accorded by P.L.1963, c. 73 (C.47:1A-1 et seq.) as amended and supplemented, shall be construed in favor of the public's right of access ; <i>all government records shall be subject to public access unless exempt from such access by: P.L.1963, c. 73 (C.47:1A-1 et seq.) as amended and supplemented; any other statute; resolution of either or both houses of the Legislature; regulation promulgated under the authority of any statute or Executive Order of the Governor; Executive Order of the Governor; Rules of Court; any federal law, federal regulation, or federal order; a public agency has a responsibility and an obligation to safeguard from public access a citizen's personal information with which it has been entrusted when disclosure thereof would violate the citizen's reasonable expectation of privacy</i>; and nothing contained in P.L.1963, c. 73 (C.47:1A-1 et seq.), as amended and supplemented, shall be construed as affecting in any way the common law right of access to any record, including but not limited to criminal investigatory records of a law enforcement agency.</p>	<p>45 C.F.R. 164.502(a) states that a covered entity may only use and disclose PHI in accordance with the HIPAA rules.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both State law and HIPAA require patient medical information to be kept confidential. However, HIPAA is more specific with respect to when disclosures of PHI are permissible without first obtaining written authorization from the individual. Therefore, be sure to look to the HIPAA requirements prior to disclosing without an authorization.</p>
<p><u>N.J.S.A. Title 47</u> Public Records</p> <p><u>Chapter 1A</u> Examination and Copies of Public Records - as amended by - Executive Order #26 (McGreevey, 2002) and Executive Order #41 (Codey, 2005)</p>	<p>4. The following records shall <u>not</u> be considered to be government records subject to public access pursuant to N.J.S.A. 47:1A-1 et seq., . . .</p> <p>[b] Information concerning individuals as follows: 1. <i>Information relating to medical, psychiatric or psychological history, diagnosis, treatment or evaluation</i>; 2. Information in a personal income or other tax return; 3. Information describing a natural person's finances, income, assets, liabilities, net worth, bank balances, financial history or activities, or creditworthiness, except as otherwise required by law to be disclosed</p> <p>[d] Records of a department or agency in the possession of another department or agency when those records are made confidential by a regulation of that department or agency adopted pursuant to N.J.S.A. 47:1A-1 et seq. and Executive Order No. 9 (Hughes 1963), or pursuant to another law authorizing the department or agency to make records confidential or exempt from disclosure.</p>	<p>45 C.F.R. 164.502(a) states that a covered entity may only use and disclose PHI in accordance with the HIPAA rules.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both State law and HIPAA require patient medical information to be kept confidential. However, HIPAA is more specific with respect to when disclosures of PHI are permissible without first obtaining written authorization from the individual. Therefore, be sure to look to the HIPAA requirements prior to disclosing without an authorization.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 7</u> Licensure of Persons</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>

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<p>for Public Health Positions</p>			
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 8 Collection, Processing, Storage and Distribution of Blood</p>	<p>8:8-1.4 Inspection</p> <p>(a) Blood bank facilities and operations shall be made available for inspection upon request by any authorized representative of the Department during normal working hours.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 8</u> Collection, Processing, Storage and Distribution of Blood</p>	<p>8:8-4.2 Procedures</p> <p>(a) All policies and procedures developed for use in the blood bank and required by this chapter shall be detailed in a written procedure manual.</p> <p>(b) Each procedure shall have a current pertinent literature reference</p> <p>(f) All significant changes to procedures shall be reviewed, dated and signed by the blood bank director.</p>	<p>45 C.F.R. 164.530(i) requires a covered entity to have written policies and procedures governing the use and disclosure of PHI.</p>	<p>State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. Both laws require written policies and procedures. However, State law is more stringent than HIPAA with respect to what must be contained in the policies and procedures (i.e., must contain notations). Therefore, when implementing HIPAA’s requirements, follow these more stringent State law requirements.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 8</u> Collection, Processing, Storage and Distribution of Blood</p>	<p>8:8-5.1 Records</p> <p>(b) All corrections to errors made in the records shall: 1. Not conceal the original entry; 2. Document the reason for the correction; and 3. Include the date the change was made and the initials of the person making the change.</p>	<p>45 C.F.R. 164.526 allows an individual the right to have a covered entity amend PHI in a designated record set for as long as the record is maintained in the designated record set.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may amend PHI under this State law provision without violating HIPAA. Therefore, follow State law. However, if the reason for the change is initiated by the person whose PHI is at issue, be sure to also meet the HIPAA requirements relating to amendment.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p>	<p>8:8-5.1 Records</p> <p>(e) If records are maintained on computer systems, the following apply: 1. Prior to use or when modifications are made to the program, validation of all computer</p>	<p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by</p>

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<p><u>Chapter 8</u> Collection, Processing, Storage and Distribution of Blood</p>	<p>programs, including, but not limited to, those dealing with processing, labeling, and distribution of blood and blood components, shall be required as follows: i. To determine if software consistently performs as required and within pre-established limits; and ii. To include <i>review of confidentiality</i> of donor information, security of data and system documentation. 2. Adequate provisions shall be made to safeguard against the eventuality of unexpected electronic loss of data from the computer storage medium. 3. A system shall be in existence which maintains duplicate records on electronic storage media, updates these duplicates continuously and/or transfers electronically stored data periodically to hard copy such as prints or microfiche. 4. Written procedures shall be available for describing each of the blood bank's methods for performing requirements in (e)1 through 3 above. 5. The computer shall automatically note, at the time of correction, when corrections are made to verified results. 6. The computer record shall maintain the original verified entry, including the date, time and the identity of the person performing the test. When corrections to verified results are made, both the original and corrected entries shall show the date, time and identity of the person performing the original and corrected records</p>		<p>HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 8</u> Collection, Processing, Storage and Distribution of Blood</p>	<p>8:8-5.2 Reporting requirements</p> <p>(a) Transfusion reactions shall be reported as follows: 1. Any hemolytic, life threatening or delayed hemolytic transfusion reaction must be reported on forms provided by the Department within 10 days of occurrence. 2. Any fatal transfusion reaction shall be reported by telephone by the next working day of the event, with written follow-up on forms provided by the Department within 10 days of occurrence.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 8</u> Collection, Processing, Storage and Distribution of Blood</p>	<p>8:8-5.2 Reporting requirements</p> <p>(b) Transfusion associated AIDS shall be reported as follows: 1. Any known or presumed case of transfusion associated AIDS brought to the attention of a blood bank shall be reported to the Department within 10 days on forms provided for this purpose. 2. All prospective donors found to test positive for hepatitis B surface antigen shall be reported to the Department within 10 days on forms provided for this purpose and shall be considered ineligible for transfusion purposes as long as they continue to be identified on current lists of interdicted donors supplied by the Department.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health</p>	<p>8:8-6.5 AIDS screening requirements</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to</p>

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<p>and Senior Services Chapter 8 Collection, Processing, Storage and Distribution of Blood</p>	<p>(i) Blood banks must maintain records pertaining to all HIV requirements and test results. These records must be kept in a confidential manner.</p>	<p>covered entities to treat PHI with confidentiality.</p>	<p>comply with both State law and HIPAA. Both State law and HIPAA require patient information to be kept confidential. However, HIPAA is more specific with respect to when uses and disclosures of PHI are permissible without first obtaining written Authorization from the individual. Therefore, when implementing this State law requirement, the HIPAA requirements relating to the uses and disclosures of PHI without an Authorization must be incorporated.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services Chapter 8 Collection, Processing, Storage and Distribution of Blood</p>	<p>8:8-8.13 Therapeutic phlebotomy (g) If therapeutic phlebotomy procedures and record keeping are not entirely performed by blood bank personnel, <i>there shall be a written agreement</i> that specifies the division of responsibilities for assuring compliance with this chapter.</p>	<p>45 C.F.R. 164.514(d) - A covered entity must make reasonable efforts to limit access to PHI by member of the workforce to those individuals who need the information to carry out their duties.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. State law specifically limits the access to certain health information to only <u>specific</u> individuals while HIPAA only states that a covered entity must itself define and document the scope of employee access to PHI. Therefore, follow but be sure to document the limitations as required by HIPAA.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services Chapter 9 Preparation, Handling, Transportation, Burial and Disinterment of Dead Human Bodies</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services Chapter 13 Shellfish</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p>N.J.A.C. Title 8</p>	<p>8:18-1.9 Responsibilities of the testing laboratory</p>	<p>45 C.F.R. 164.512(a) allows a covered</p>	<p>This State law is not “contrary to”</p>

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<p>Department of Health and Senior Services</p> <p>Chapter 18 Newborn Biochemical Screening Program</p>	<p>(a) The testing laboratory shall . . . 4. Issue result reports of within acceptable limits to the chief executive officer or to the responsible physician, that is, the submitter of the specimen; and 5. Issue reports of abnormal results to the submitter of the specimen and to the responsible physician.</p>	<p>entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 18</u> Newborn Biochemical Screening Program</p>	<p>8:18-1.13 Confidentiality of reports</p> <p>(a) The reports made pursuant to this subchapter are to be used only by the Department of Health and Senior Services and other agencies that may be designated by the Commissioner and shall not otherwise be divulged or made public so as to disclose the identity of any person and shall be deemed “information relating to medical history, diagnosis, treatment or evaluation” within the meaning of Executive Order No. 26, §4b1 (McGreevey, August 13, 2002), and therefore, not “government records” subject to public access or inspection within the meaning of . N.J.S.A. 47:1A-1 et seq., particularly 47:1A-1.1.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.</p> <p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p> <p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to the Department of Health and Senior Services and other agencies that may be designated by the Commissioner and for limited purposes). Therefore, continue to follow the specific State law restrictions when disclosing PHI under this provision.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 19 Newborn Screening Program</p>	<p>8:19-1.3 Hearing screening follow-up</p> <p>The hospital or birthing center shall inform the parent, legal guardian or custodian of an infant who failed electrophysiological hearing screening of the need for follow-up screening . . .</p>	<p>45 C.F.R. 164.502(g) states that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore,</p>

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		a personal representative except when the minor has authority to act as an individual.	follow both State law and HIPAA requirements.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 19 Newborn Screening Program</p>	<p>8:19-1.10 Reporting newborn hearing follow-up</p> <p>(a) The individuals who conduct outpatient screening or audiologic testing for the reasons identified in N.J.A.C. 8:19-1.9 shall complete the Newborn Hearing Follow-up Report form, submit the completed form to the Department, and report the results to the infant's medical home within 10 days of conduct of the outpatient screening or audiologic testing.</p> <p>(b) The requirements of (a) above for submission of a Newborn Hearing Follow-up Report form to the Department and the report to the medical home apply for each screening or testing as may be administered in accordance with the JCIH Position Statement protocols for re-examination at regular intervals...</p> <p>(g) In the following situations, a birthing facility, audiologist, physician, or other examiner under the direction and/or supervision of an audiologist or physician, with follow-up responsibilities under this subchapter, shall submit a Newborn Hearing Lost to Follow-up form (Form SCH-3) to the Department and to the medical home (1) Missed outpatient follow-up appointment; (2) Unable to make reminder contact (disconnected phone or returned mail); (3) Infant who is known to have moved out of State; (4) To report the name and address of the facility where newborn is being treated when treated out of State; (5) Documentation of one unsuccessful attempt to contact parents for follow-up; (6) Family refusal to return for follow-up; or (7) Determination that a previously identified risk indicator has been ruled out at follow-up visit.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law."</p> <p>Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 19 Newborn Screening Program</p>	<p>8:19-1.11 Documenting and reporting a diagnosed hearing loss</p> <p>(a) When a permanent hearing loss is confirmed, the forms identified in 1 and 2 below shall be completed and submitted to the Department as soon as possible after diagnosis: (1) For children from birth to 36 months of age, a Newborn Hearing Follow-up Report form and a Special Child Health Service Registration form shall be completed and submitted to the Department as soon as possible after diagnosis...(2) For children from birth through 21 years of age, a Special Child Health Service Registration form shall be completed and submitted to the Department as soon as possible after diagnosis, which shall include specification, in the "diagnosis" section of the form, of the type and degree of hearing loss, the affected ear(s), and, if applicable and known, the syndrome related to the child's hearing loss...</p> <p>(d) Responsible physicians shall also register children diagnosed with hearing loss (through 21 years of age) with the Special Child Health Services Registry.</p> <p>(e) Updated Special Child Health Services Registration forms shall be submitted to the Department if new information is available during follow-up audiologic visits regarding hearing status; diagnosis of a syndromic condition; documented physical disabilities, and/or change in name, address or parent.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law."</p> <p>Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health</p>	<p>8:19-1.13 Confidentiality of reports</p>	45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an	<p>This State law is "more stringent" than HIPAA and must</p>

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
<p>and Senior Services</p> <p><u>Chapter 19</u> Newborn Screening Program</p>	<p>The reports made are to be used only by the Department and such other agencies as may be designated by the Commissioner and <i>shall not otherwise be divulged or made public so as to disclose the identity of any person to whom they relate; and to that end, such reports shall be deemed "information relating to medical history, diagnosis, treatment or evaluation"</i> within the meaning of Executive Order No. 26, §4b2 (McGreevey 2002), and therefore, not "government records" subject to public access or inspection within the meaning of N.J.S.A. 47:1A-1 et seq., particularly 1A-1.1."</p>	<p>Authorization for treatment.</p> <p>45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: "as required by law"; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker's compensation programs established by law.</p>	<p>be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for a number of public policy reasons where State law does not). Therefore, follow the State law restrictions when using and disclosing PHI under this provision.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 20</u> Birth Defects Registry</p>	<p>8:20-1.2 Reporting requirements.</p> <p>(a) Any infant who is born to a resident of the State of New Jersey, or who becomes a resident of the State before one year of age, and who is diagnosed as having a birth defect either at birth or any time during the first year of life shall be reported to the State Department of Health and Senior Services, Special Child Health and Early Intervention Services Program as follows... (b) Any live born infant with a birth defect who has not been previously registered and has expired shall be reported. Such reports shall indicate that the infant has expired... (d) Every physician, dentist, certified nurse midwife, advanced practice nurse, and other health care professionals who diagnose or confirm birth defects shall report to the Department each infant diagnosed as having a birth defect not known to be previously reported. (e) The director of every clinical laboratory shall report to the Department results of postmortem examination form any infant indicating the existence of a birth defect, not known to be previously reported... (h) Cytogenetic laboratories shall report the results of all postnatal chromosomal abnormalities...</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law requires certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 20</u> Birth Defects Registry</p>	<p>8:20-1.2 Reporting requirements.</p> <p>(g) The reports made pursuant to these rules are to be used only by the Department of Health and Senior Services and other agencies that may be designated by the Commissioner of Health and Senior Services and shall not otherwise be divulged or made public so as to disclose the identity of any person; and such reports shall be included under materials available to public inspection pursuant to [N.J.S.A. 47:1A-1 et seq.].</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.</p> <p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: "as required by law"; for public health activities; with respect to victims of abuse or neglect; for</p>	<p>This State law is "more stringent" than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to the Department of</p>

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
		<p>health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker's compensation programs established by law.</p> <p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>Health and Senior Services and other agencies that may be designated by the Commissioner of Health and Senior Services - and for limited purposes). Therefore, continue to follow the specific State law restrictions when disclosing PHI under this provision.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 20</u> Birth Defects Registry</p>	<p>8:20-1.2 Reporting requirements.</p> <p>(j) Every health care facility and independent clinical laboratory <i>shall</i> allow access to, or provide necessary information on infants with birth defects and other patients specified by characteristics <i>for research studies</i> related to birth defects conducted by the State Department of Health and Senior Services and which have been approved by the State Commissioner of Health and Senior Services after appropriate review for assuring protection of human subjects by the Department's Institutional Review Board.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p> <p>45 C.F.R. 164.512(i) allows a covered entity to use and disclose PHI without an Authorization for research purposes, provided an IRB or privacy board has approved the waiver of the Authorization.</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures for public health and research purposes; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law, but be sure to implement the additional HIPAA requirements that relate to research.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 20</u> Birth Defects Registry</p>	<p>8:20-1.2 Reporting requirements.</p> <p>(k) Any agency designated by the Commissioner to receive reports pursuant to this chapter <i>shall</i> provide to Special Child, Adult and Early Intervention Services any updated diagnostic and/or demographic information.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law requires certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 21 Food and Drugs</p>	None Identified.	N/A	N/A
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 22 Public Campgrounds</p>	None Identified.	N/A	N/A
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 23 Importation of Dogs, Reporting of Rabies in Animals, Control of Avian Chlamydiosis in Pet Birds, Turtles and Turtle Egg Sales, and Transportation by Animal Control Officers</p>	None Identified.	N/A	N/A
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 23A Animal Facility Operation; Animal Control Officer Certification; Pilot Spray/Neuter Clinic Fees</p>	None Identified.	N/A	N/A
<p><u>N.J.A.C. Title 8</u> Department of Health</p>			

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
<p>and Senior Services</p> <p>Chapter 24 Retail Food Establishments and Food and Beverage Vending Machines Ch. XII</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 25 New Jersey Youth Camp Safety Standards</p>	<p>8:25-5.1 Health program</p> <p>(d) A bound medical log, listing the date, name of patient, ailment, treatment, and the name of the person who administered treatment <i>shall be</i> maintained at the health center. If an injury or illness is serious, the physician specified at (a) above <i>shall be</i> consulted immediately, and the parents or guardians <i>shall be</i> notified as soon as possible.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 25 New Jersey Youth Camp Safety Standards</p>	<p>8:25-5.1 Health program</p> <p>(f) On or before October 1 of each year, every youth camp <i>shall report</i> to the Department all accidents resulting in death or serious injury. This does not include minor injuries which require only first aid treatment and which do not involve professional medical treatment, loss of consciousness, restriction of activity or motion, or premature termination of the camper’s stay at the camp.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 25 New Jersey Youth Camp Safety Standards</p>	<p>8:25-5.3 Medication administration and storage</p> <p>(j) Medication errors and adverse drug reactions <i>shall be</i> reported immediately to the health director and to the prescribing physician, and an entry shall be made in the camper’s medical record.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI</p>

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			that are “required by law.” Therefore, a covered entity should follow this State law.
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 25</u> New Jersey Youth Camp Safety Standards</p>	<p>8:25-14.2 Inspection</p> <p>(a) The Department or local health authority <i>shall inspect</i> every youth camp as required by Recognized Public Health Activities and Minimum Standards of Performance for Local Boards of Health in New Jersey, N.J.A.C. 8:52, and as often as the Department deems necessary.</p> <p>(b) The youth camp operator <i>shall permit access</i> to representatives of the Department or local health authority <i>to all parts</i> of the youth camp.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 25</u> New Jersey Youth Camp Safety Standards</p>	<p>8:25-14.3 Powers of the Commissioner</p> <p>(a) In addition to the powers and duties of the Commissioner otherwise provided in any other Act or rule, the Commissioner <i>may</i>: 1. Enter and inspect any youth camp and its records; 2. Question a camp’s staff, employees, and its contractors; 3. Investigate facts, conditions, practices, or other matters to the extent he deems it necessary and appropriate to determine whether the youth camp, its owners, operators, employees, and contractors are in compliance with the Act and this chapter; 4. Administer oaths; 5. Examine witnesses under oath; 6. Issue subpoenas; 7. Compel the attendance of witnesses; 8. Compel the production of papers, books, accounts, records, payroll, documents, and testimony; and 9. Take depositions and affidavits in any proceeding before the Commissioner.</p>	45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 26 Public Recreational Bathing</p>	None Identified.	N/A	N/A
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p>	<p>8:44-2.7 Management</p> <p>(g) The laboratory <i>shall</i> examine specimens only at the request of a licensed physician, dentist, or other person authorized by law to use the findings of laboratory</p>	45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by

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<p align="center">Chapter 44 Chapter IV of State Sanitary Code – Operation of Clinical Labs</p>	<p>examinations and <i>shall</i> report <i>only to those authorized by law</i> to receive such results.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p align="center">Chapter 44 Chapter IV of State Sanitary Code – Operation of Clinical Labs</p>	<p>8:44-2.7 Management</p> <p>(i) The original or true duplicate of the laboratory report <i>shall</i> be sent promptly to the licensed physician or other authorized person who requested the test and all reports shall be preserved by the laboratory for a period of at least 2 years after the date of submittal of the report.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p align="center">Chapter 44 Chapter IV of State Sanitary Code – Operation of Clinical Labs</p>	<p>8:44-2.11 Reporting by laboratory supervisors</p> <p>(a) Laboratory supervisors <i>shall</i>: 1. Immediately report results of laboratory examinations of specimens of humans, animals, or birds indicating or suggesting the existence of communicable diseases to the Department of Health, to the physician or veterinarian submitting the specimen and, excepting results pertaining to venereal diseases, simultaneously forward a copy thereof to the health officer having jurisdiction where the patient is located; 2. Immediately report results of laboratory examinations of specimens of persons being considered for release from isolation or quarantine from any disease listed, whether said report be positive or negative, to the physician submitting the specimen and simultaneously forward a copy thereof to the health officer having jurisdiction where the patient is located; 3. Promptly report to the Department of Health the results of comparative and evaluation examinations made of specimens which may be sent to the laboratory by the Department.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health</p>	<p>8:44-2.11 Reporting by laboratory supervisors</p> <p>(b) Laboratory supervisors <i>shall report</i> to the State Department of Health and</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and</p>

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<p>and Senior Services</p> <p><u>Chapter 44</u> Chapter IV of State Sanitary Code – Operation of Clinical Labs</p>	<p>Senior Services, within 48 hours of the completion of the analysis, the results of laboratory examinations for hazardous substances in blood and urine</p>		<p>HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p><u>Chapter 51</u> Childhood Lead Poisoning: State Sanitary Code Chapter XIII</p>	<p>8:51-2.3 Confirmation of blood lead test results</p> <p>(b) If a child is reported to have a blood lead level of 20 microg/dL or greater on a capillary sample, the local board of health in whose jurisdiction the child resides shall contact the child's parent or guardian to ensure that a timely venous confirmatory blood lead test is performed, in cooperation with the child's health care provider. If it is determined that the child has moved to another jurisdiction subsequent to being tested but before a venous confirmatory test can be obtained, the local board of health shall notify the local board of health in whose jurisdiction the child now resides.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p>45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p><u>Chapter 51</u> Childhood Lead Poisoning: State Sanitary Code Chapter XIII</p>	<p>8:51-3.1 Notification to local board of health</p> <p>Whenever the Department receives a report from a laboratory of a blood lead level of 20 micro g/dL or greater in a child, the Department shall notify the local board of health in whose jurisdiction the child resides.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p><u>Chapter 51</u> Childhood Lead Poisoning: State Sanitary Code</p>	<p>8:51-3.2 Reporting by local boards of health</p> <p>(a) When a local board of health receives a report of a child with blood lead level of 20 micro g/dL or greater, it shall report back to the Department, on the actions it has taken on behalf of the child.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without</p>

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Chapter XIII			violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p data-bbox="118 289 370 375">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="145 407 344 558">Chapter 51 Childhood Lead Poisoning: State Sanitary Code Chapter XIII</p>	<p data-bbox="419 289 854 316">8:51-3.3 Confidentiality of records</p> <p data-bbox="419 349 1408 586">All records maintained by the Department, and by local boards of health, regarding blood lead screening and environmental interventions, that identify individual children, including address information and laboratory test results, <i>shall be confidential</i> in accordance with Executive Order No. 9 (1963), issued by former Governor Richard J. Hughes, and <i>shall not be released without a signed release from the child's parent or legal guardian</i>, except that these records may be released to other government agencies having regulatory responsibility regarding lead hazards.</p>	<p data-bbox="1454 289 1951 407">45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.</p> <p data-bbox="1454 440 1951 922">45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p> <p data-bbox="1454 954 1951 1256">45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p data-bbox="1983 289 2413 678">This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for a number of public policy reasons where State law does not). Therefore, follow the State law restrictions when using and disclosing PHI under this provision.</p>
<p data-bbox="118 1263 370 1349">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="110 1382 379 1468">Chapter 51A Screening of Children For Lead Poisoning</p>	<p data-bbox="419 1263 997 1291">8:51A-4.1 Reporting of lead screening results</p> <p data-bbox="419 1323 1427 1442">(a) Each physician, registered professional nurse, as appropriate, or health care facility that screens a child for lead poisoning <i>shall provide</i> the parent or legal guardian with the results of the blood lead test and an explanation of the significance of the results.</p>	<p data-bbox="1454 1263 1951 1349">45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p data-bbox="1454 1382 1951 1500">45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual</p>	<p data-bbox="1983 1263 2413 1500">This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without</p>

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
		who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.	violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.
<p data-bbox="110 318 379 402">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="110 440 379 524">Chapter 51A Screening Of Children For Lead Poisoning</p>	<p data-bbox="419 318 1096 345">8:51A-4.2 Medical follow-up of lead screening results</p> <p data-bbox="419 378 1427 524">(d) To the extent permitted by New Jersey law regarding patient confidentiality, the physician, registered professional nurse, as appropriate, or health care facility <i>shall cooperate</i> with local health departments <i>by providing information needed</i> to ensure case management and environmental follow-up as specified in Chapter XIII of the New Jersey State Sanitary Code (N.J.A.C. 8:51).</p>	45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for public health activities.	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.
<p data-bbox="110 764 379 849">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="110 886 379 1122">Chapter 52 PUBLIC HEALTH PRACTICE STANDARDS OF PERFORMANCE FOR LOCAL BOARDS OF HEALTH IN NEW JERSEY</p>	<p data-bbox="419 732 682 760">8:52-1.3 Compliance</p> <p data-bbox="419 792 1427 971">(a) Each local board of health and local health agency shall be accountable for their adherence to standards of performance to the Public Health Council and to the Department pursuant to the provisions of N.J.S.A. 26:3A-2 et seq. (b) Each local health agency <i>shall</i> make available to the Office of Local Health, within 10 business days of the request, source data and information used for evaluation and determining adherence to standards of performance as set forth at N.J.A.C. § 8:52-1.4.</p>	45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for health oversight activities.	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.
<p data-bbox="110 1130 379 1214">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="110 1252 379 1430">Chapter 52 Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p data-bbox="419 1130 1032 1157">8:52-1.4 Performance monitoring and evaluation</p> <p data-bbox="419 1190 1427 1312">A method for evaluation and determining adherence to standards of performance shall be developed by the Office of Local Health as set forth at N.J.A.C. 8:52-16. The information and data <i>may</i> be used by the Office of Local Health for compliance purposes, publication, and research.</p>	45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: "as required by law"; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.

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		specialized government functions; and to authorized worker's compensation programs established by law.	

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<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 52 Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-5.2 Management and leadership</p> <p>(f) (4). Each local health agency <i>shall report</i> all diseases, threats, and emergencies in accordance with all applicable State and Federal laws as set forth at N.J.A.C. 8:52-5.2(f)3.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 52 Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-5.2 Management and leadership</p> <p>(g) 3. Each local health agency <i>shall use</i> LINCIS to: i. Report all diseases and threats to the public health to the Department in accordance with applicable State and Federal laws, rules, and regulations. Electronic reporting shall be contingent upon the development of electronic reporting systems; ii. Immediately report to the Department all emergencies that threaten the health or safety of the citizens in its jurisdiction . . .</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 52 Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-10.3 Data collection and management</p> <p>(b) Each local health agency <i>shall ensure</i> electronic linkage with local and Statewide databases, as they become available. These databases include, but are not limited to: NJ LINCIS, New Jersey Immunization Information System (NJIIIS), Communicable Diseases Reporting Systems, Electronic Birth Registry, Vital Statistics, and other registries which track the distribution of diseases, injuries, and health conditions.</p>	<p>None.</p>	<p>N/A</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 52 Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-10.3 Data collection and management</p> <p>(c) Each local health agency shall ensure <i>safeguards</i> for the confidentiality of all data and information that contains personal identifiers or any other information which could be used to identify an individual with reasonable accuracy, either directly or by reference to other readily available information.</p>	<p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>

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<p>Jersey</p> <p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 52</u> Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-12.3 Surveillance</p> <p>(c) Each local health agency <i>shall investigate</i> the cause of illnesses or health threatening conditions and shall implement control measures to prevent the spread of disease or to address the known risk factors in the population served.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for public health activities.</p> <p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment purposes.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures to be made for purposes of treatment and public health activities; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 52</u> Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-13.3 Community outreach for public health services</p> <p>(a) Each local health agency shall engage in community outreach activities that . . .</p> <p>4. Assure that there is an active referral system between the mental and/or behavioral health delivery system and the personal health care delivery system; and</p> <p>5. Assure that social services are coordinated with health care services.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment purposes.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures for purposes of treatment, payment and/or health care operations; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 52</u> Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-13.4 Information systems for personal health and related services</p> <p>Each local health agency <i>shall assist</i> the local public health system and the State in developing capacities for information systems that share client information with managed care organizations, hospitals, and other health care providers.</p>	<p>None.</p>	<p>N/A</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 52</u></p>	<p>8:52-15.2 Capacity to initiate timely epidemiological, economic, and health services research</p> <p>(b) Each local health agency <i>shall report</i> epidemiological, economic, and health services research findings to the Office of Local Health whenever such findings are</p>	<p><u>With respect to [b]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p><u>With respect to [b]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u></p>

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<p>Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>available.</p> <p>(c) Each local health agency <i>shall</i> make all data and information available to public health researchers only in accordance with Institutional Review Board requirements as set forth at 45 C.F.R. Part 46 and/or 21 C.F.R. 50 and 56.</p>	<p><i>With respect to [c]:</i> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI without an Authorization for research purposes, provided an IRB or privacy board has approved the waiver of the Authorization.</p>	<p>certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><i>With respect to [c]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law allows for uses and disclosures for public health and research purposes; therefore, an entity covered by HIPAA may use and disclose PHI under this provision of State law and without violating HIPAA because HIPAA also permits PHI to be used and disclosed for such purposes. Therefore, follow State law, but be sure to also follow additional HIPAA requirements that relate to research.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 52</u> Public Health Practice Standards Of Performance For Local Boards Of Health In New Jersey</p>	<p>8:52-15.2 Capacity to initiate timely epidemiological, economic, and health services research</p> <p>(d) Each local health agency shall ensure the safety and protection of public and personal health data and information through established procedures for access, retention, and destruction in accordance with applicable State and Federal laws, rules, and codes.</p>	<p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 57 COMMUNICABLE DISEASES</p>	<p>8:57-1.3 Reportable diseases</p> <p>(a) Cases due to the following diseases and/or infectious <i>agents shall be reported</i>. Diseases in List 1 shall include confirmed and suspect cases and shall be reported immediately by telephone. Diseases in List 2 shall include confirmed cases and shall be reported within 24 hours of diagnosis.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without</p>

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			violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-1.4 Persons and institutions required to report reportable diseases</p> <p>(a) The following individuals and institutions <i>are required to report</i> any person who is ill or infected with any disease listed in N.J.A.C. 8:57-1.3 and <i>shall</i> make a report as set forth in N.J.A.C. 8:57-1.5: 1. Physician; 2. Advanced practice nurse; 3. Physician's assistant; or 4. A person having control or supervision over a hospital or other health care institution, correctional facility, school, summer camp, child care center, preschool, or institution of higher education. (b) Duplicate reporting of the same case by health care providers in the same institution is not necessary. (c) A physician, advanced practice nurse, physician's assistant, or a person having control or supervision over a hospital or other health care institution, correctional facility, school, summer camp, child care center, preschool, or institution of higher education who fails to report pursuant to the provisions of N.J.A.C. 8:57-1.3 and 1.5 may receive written notification of this failure and a warning.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-1.5 Content of report</p> <p>(a) Any individual with a disease listed in N.J.A.C. 8:57-1.3 <i>shall be reported</i> as set forth in (c) and (d) below to the health officer of the jurisdiction where the individual lives, or if unknown, wherein the diagnosis is made, except that individuals with hepatitis C, sexually transmitted diseases and tuberculosis and all individuals in State institutions shall be reported directly to the Department. If the health officer is unavailable, the report <i>shall be made</i> to the Department</p> <p>(b) Any outbreak or suspected outbreak listed in N.J.A.C. 8:57-1.3 <i>shall be reported</i> as set forth in (e) and (f) below to the health officer of the jurisdiction where the outbreak occurred. If the health officer is unavailable, the report shall be made to the Department</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-1.6 Reporting of positive laboratory results denoting diseases</p> <p>(a) Any positive culture, test, or assay result specific for one of the following organisms <i>shall be reported</i> by a laboratory director to the local health department, except that positive results for hepatitis C, tuberculosis and sexually transmitted diseases <i>shall be reported</i> directly to the Department...</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.

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<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-1.6 Reporting of positive laboratory results denoting diseases</p> <p>(b) A laboratory director <i>shall report</i> positive cultures or positive laboratory test results for the microorganisms listed in (a) above within 72 hours after obtaining a positive result, except that positive cultures or positive laboratory test results for the microorganisms noted by an asterisk (*) shall be reported immediately by telephone. All reports shall be submitted to the health officer having jurisdiction over the locality in which the patient lives, or, if unknown, to the health officer in whose jurisdiction the health care provider requesting the laboratory examination is located, except that reports of organisms for hepatitis C, tuberculosis and sexually transmitted diseases and all reports where the patient is a resident of a State institution <i>shall</i> be submitted directly to the Department.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-1.6 Reporting of positive laboratory results denoting diseases</p> <p>(f) A laboratory director <i>shall submit</i> within three days, to the New Jersey Department of Health and Senior Services . . . for further testing, all microbiologic cultures obtained from human or food specimens of the following organisms</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-1.6 Reporting of positive laboratory results denoting diseases</p> <p>(g) A hospital laboratory director <i>shall</i>, within 31 calendar days of the end of each month, submit data regarding specific microorganisms occurring during that month within the hospital to the Department, utilizing the Department’s Epidemiology Surveillance Form.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57</p>	<p>8:57-1.7 Reporting of diseases by health officers</p> <p>(a) A health officer who is notified of the existence of any disease outbreak, or of any single case of a disease listed in N.J.A.C. § 8:57-1.3(a), <i>shall immediately notify</i> the Department . . . (b) A health officer who is notified of the existence of diseases pursuant to the provisions of N.J.A.C. § 8:57-1.3 and 1.6 <i>shall</i>, within 24 hours of</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by</p>

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Communicable Diseases	receipt of the report, <i>forward</i> a written or electronic copy thereof to the Department. If the initial report is incomplete, a health officer shall seek complete information and shall provide all available information to the Department within five working days of receiving the initial report. (c) A health officer who is notified of any outbreak of disease, or of any single case of a disease listed in N.J.A.C. § 8:57-1.3 and 1.6, which is not within that health officer's jurisdiction shall immediately notify the health officer where the disease was believed to have been contracted and the health officer of the local health agency wherein the home address of the ill or affected person is located, as the case may be.		HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.
N.J.A.C. Title 8 Department of Health and Senior Services Chapter 57 Communicable Diseases	8:57-1.8 Health officer investigations (a) A health officer <i>shall</i> , upon receiving a report of an outbreak or suspected outbreak of any communicable disease, or of a case or suspected case of any communicable disease, <i>investigate</i> the facts contained in the report. A health officer shall follow such direction regarding the investigation as may be given by the Department.	45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including public health activities and for health oversight activities.	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, follow State law.
N.J.A.C. Title 8 Department of Health and Senior Services Chapter 57 Communicable Diseases	8:57-1.8 Health officer investigations (c) Upon determining that a single case of an immediately reportable disease or an outbreak of a reportable disease exists, the health officer shall immediately relay all available information pertaining to the investigation to the Department . . . reports of investigations of other reportable diseases may be submitted electronically or in writing.	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.
N.J.A.C. Title 8 Department of Health and Senior Services Chapter 57 Communicable Diseases	8:57-1.8 Health officer investigations (e) The health officer shall submit a summary report to the Department within 30 days of the completion of each outbreak investigation, and to all physicians who reported cases of illness connected with that outbreak. The report shall include, but not be limited to, a summary of findings, actions taken to control disease, and recommendations to affected parties.	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA

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			permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p data-bbox="115 285 376 375">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="96 407 395 464">Chapter 57 Communicable Diseases</p>	<p data-bbox="419 253 728 280">8:57-1.12 Confidentiality</p> <p data-bbox="419 318 1427 435">(a) The reports made pursuant to this subchapter <i>shall be used only by</i> the local health department, the Department, and such other agencies as may be designated by the Commissioner to carry out mandated duties, including the duty to control and suppress infectious diseases.</p>	<p data-bbox="1454 253 1956 375">45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.</p> <p data-bbox="1454 407 1956 889">45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p data-bbox="1983 253 2413 829">This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to - the local health department, the Department, and such other agencies as may be designated by the Commissioner, and for limited purposes). Therefore, continue to follow the specific State law restrictions when using and disclosing PHI under this provision.</p>
<p data-bbox="115 930 376 1019">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="96 1052 395 1109">Chapter 57 Communicable Diseases</p>	<p data-bbox="419 898 728 925">8:57-1.12 Confidentiality</p> <p data-bbox="419 963 1427 1109">(b) Medical and epidemiologic information which is gathered in connection with an investigation of a reportable disease or infectious agent and which identifies an individual <i>is confidential and not open to public inspection without that individual's consent</i>, except as may be necessary to carry out duties to protect the public health as determined by a health officer or the Department.</p>	<p data-bbox="1454 898 1956 1019">45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p> <p data-bbox="1454 1052 1956 1500">45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation</p>	<p data-bbox="1983 898 2413 1287">This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses and disclosures of PHI for a number of public policy reasons where State law does not). Therefore, follow the State law restrictions when using and disclosing PHI under this provision.</p>

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-1.12 Confidentiality</p> <p>(c) Medical or epidemiologic information collected pursuant to this subchapter <i>may be disclosed in statistical</i> or other form which does not disclose the identity of any individual.</p>	<p>programs established by law.</p> <p>45 C.F.R. 164.514(a) allows a covered entity to use and disclose PHI without regard to the HIPAA rules if the information does not identify an individual and there is no reasonable basis to believe that the information could be used to identify an individual.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This State law provision, allows for uses and disclosures of information that do not identify a particular person. However, HIPAA is more specific than State law with regard to when PHI is considered “de-identified.” Therefore, be sure to check HIPAA to see that all identities have been removed.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-2.2 Reporting HIV Infection</p> <p>[1] (a) Every physician attending a person found to be infected with HIV, or ordering a test resulting in the diagnosis of HIV, shall, within 24 hours of receipt of a laboratory report indicating such a condition, or within 24 hours of making a diagnosis of HIV infection or AIDS, report in writing such condition directly to the Department of Health and Senior Services on forms supplied by the Department of Health and Senior Services. The report shall include the name and address of the reporting physician, the name, address, gender, race and birth date of the person found to be infected with HIV, the date the specimen tested for HIV was obtained, and such other information as may be required by the Department of Health and Senior Services. A physician shall not report a person infected with HIV if the physician is aware that the person having control or supervision of an institution named in (b) below is reporting that person as being infected with HIV, or if the physician is aware that the person has previously been reported to the Department of Health and Senior Services as being infected with HIV.</p> <p>[2] The Department of Health and Senior Services may also collect additional information on persons previously reported, for either audit or epidemiological purposes.</p>	<p><u>With regard to [1]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With regard to [2]</u>: 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities; (2) for health oversight activities; and (3) research purposes.</p>	<p><u>With regard to [1]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With regard to [2]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, generally, follow State law, but be aware of HIPAA requirements relating to research.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health</p>	<p>8:57-2.2 Reporting HIV Infection</p>	<p><u>With regard to [1]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and</p>	<p><u>With regard to [1]</u>: This State law is not “contrary to” HIPAA as it is not</p>

NJ LAW	RELEVANT PROVISIONS	HIPAA RELEVANT CITES	SUMMARY OF IMPACT
<p>and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>[1] (b) The person having control or supervision over any institution such as a hospital, sanitarium, nursing home, penal institution, clinic, blood bank, insurance company or other entity requiring HIV testing as part of an underwriting process, or facility for HIV counseling and testing in which any person is determined to be infected with HIV shall, within 24 hours of receipt of laboratory report indicating such a condition, report in writing such condition directly to the Department on forms supplied by the Department. The report shall state the name, address, gender, race, and birth date of the person found to be infected with HIV, the date the specimen tested for HIV was obtained, the name of the attending physician, the name and address of the institution, and such other information as may be required by the Department. The person having control or supervision of the institution shall <i>not</i> report a person infected with HIV if it is known that a physician is reporting the person or that the person has previously been reported to the Department as being infected with HIV. The person having control or supervision of the institution may delegate this reporting activity to a member of the staff, but this delegation does not relieve the controlling or supervising person of the ultimate reporting responsibility.</p> <p>[2] The Department may also collect additional information on persons previously reported, for either audit or epidemiological purposes.</p>	<p>disclose PHI without an Authorization as “required by law”.</p> <p><u>With regard to [2]</u>: 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities; (2) for health oversight activities; and (3) research purposes.</p>	<p>impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With regard to [2]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, generally, follow State law, but be aware of HIPAA requirements relating to research.</p>

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<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-2.2 Reporting HIV Infection</p> <p>(c) Every clinical laboratory shall, within five working days of completion of a quantitative PCR (viral load) test, regardless of test result, or any other laboratory test which has results indicative of infection with HIV, report in writing such results to the Department of Health and Senior Services. The report shall include the name and address of the clinical laboratory, the name and address of the submitter of the laboratory specimen, the date of the test, and the name, address, gender, and date of birth of the person from whom the laboratory specimen was obtained, or a unique code if a code is the only information identifying the person from whom the laboratory specimen was obtained, and other epidemiological information as may be required by the Department of Health and Senior Services on a general or a case-by-case basis. . . .</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-2.3 Reporting children perinatally exposed to HIV</p> <p>[1] (a) Every physician attending a child known to be perinatally exposed to HIV, or ordering a test resulting in the diagnosis of perinatally exposed to HIV, shall, within 24 hours of receipt of a laboratory report indicating such a condition report in writing such condition directly to the Department of Health and Senior Services on forms supplied by the Department of Health and Senior Services. The report shall include the information as in N.J.A.C. § 8:57-2.2(a) and such other information as may be required by the Department of Health and Senior Services. A physician shall <u>not</u> report the child perinatally exposed to HIV if the physician is aware that the person having control or supervision of an institution named in (b) below is reporting that child as being infected with HIV, or if the physician is aware that the child has previously been reported to the Department of Health and Senior Services as being perinatally exposed to HIV.</p> <p>[2] The Department of Health and Senior Services may also collect additional information on children previously reported, for either audit or epidemiological purposes.</p>	<p><u>With regard to [1]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With regard to [2]</u>: 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities; (2) for health oversight activities; and (3) research purposes.</p>	<p><u>With regard to [1]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With regard to [2]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, generally, follow State law, but be aware of HIPAA requirements relating to research.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p>	<p>8:57-2.3 Reporting children perinatally exposed to HIV</p> <p>[1] (b) The person having control or supervision over any institution such as a</p>	<p><u>With regard to [1]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as</p>	<p><u>With regard to [1]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both</p>

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<p><u>Chapter 57</u> Communicable Diseases</p>	<p>hospital, sanitarium, nursing home, penal institution, clinic, blood bank, insurance company or facility for HIV counseling and testing in which a child is determined to be perinatally exposed to HIV shall, within 24 hours of receipt of a laboratory report or other medical evidence indicating such a condition, report in writing such condition directly to the Department of Health and Senior Services on forms supplied by the Department of Health and Senior Services. The report shall include the information as in N.J.A.C. § 8:57-2.2(a) and such other information as may be required by the Department of Health and Senior Services. The person having control or supervision of the institution shall not report a child perinatally exposed to HIV if it is known that a physician is reporting the child or that the child has previously been reported to the Department of Health and Senior Services as being perinatally exposed to HIV. The person having control or supervision of the institution may delegate this reporting activity to a member of the staff, but this delegation does not relieve the controlling or supervising person of the ultimate reporting responsibility.</p> <p>[2] The Department of Health and Senior Services may also collect additional information on children previously reported, for either audit or epidemiological purposes</p>	<p>“required by law”.</p> <p><u>With regard to [2]:</u> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities; (2) for health oversight activities; and (3) research purposes.</p>	<p>State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With regard to [2]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, generally, follow State law, but be aware of HIPAA requirements relating to research.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-2.4 Reporting AIDS</p> <p>[1] (a) Every physician attending any person ill with AIDS shall, within 24 hours of the time AIDS is diagnosed, report in writing such condition directly to the Department of Health and Senior Services on forms supplied by the Department of Health and Senior Services. The report shall include the name and address of the reporting physician, the name, address, gender, race, and birth date of the person ill with AIDS, the date of onset of the illness meeting the criteria for the diagnosis of AIDS, and such other information as may be required by the Department of Health and Senior Services. Such report should be made whether or not the patient previously had been reported as having HIV infection. The report of AIDS will be deemed to also be a report of HIV infection.</p> <p>[2] The Department of Health and Senior Services may also collect additional information on persons previously reported, for either audit or epidemiological purposes.</p>	<p><u>With regard to [1]:</u> 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With regard to [2]:</u> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an</p>	<p><u>With regard to [1]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With regard to [2]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and</p>

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		<p>Authorization, including for: (1) public health activities; (2) for health oversight activities; and (3) research purposes.</p>	<p>HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, generally, follow State law, but be aware of HIPAA requirements relating to research.</p>

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<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-2.4 Reporting AIDS</p> <p>[1] (b) The person having control or supervision over any institution, such as a hospital, sanitarium, nursing home, penal institution, or clinic, in which a person is ill with AIDS shall within 24 hours of the time AIDS is diagnosed, report such condition in writing directly to the Department of Health and Senior Services on forms provided by the Department of Health and Senior Services. The report shall state the name, address, gender, race and birth date of the person ill with AIDS, the date of onset of the illness meeting the criteria for the diagnosis of AIDS, the name of the attending physician, the name and address of the institution, and such other information as may be required by the Department of Health and Senior Services. Such report should be made whether or not the patient previously had been reported as having HIV infection. The report of AIDS will be deemed to also be a report of HIV infection. The person having control or supervision of the institution may delegate this reporting responsibility to a member of the staff, but this delegation does not relieve the controlling or supervising person of the ultimate reporting responsibility.</p> <p>[2] The Department of Health and Senior Services may also collect additional information on persons previously reported, for either audit or epidemiological purposes.</p>	<p><u>With regard to [1]:</u> 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With regard to [2]:</u> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities; (2) for health oversight activities; and (3) research purposes.</p>	<p><u>With regard to [1]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With regard to [2]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA because HIPAA permits PHI to be used and disclosed for purposes of public health and health oversight activities. Therefore, generally, follow State law, but be aware of HIPAA requirements relating to research.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-2.4 Reporting AIDS</p> <p>(c) Every clinical laboratory shall, within five working days of completion of a CD4 count which has absolute or relative results below a level specified by the Centers for Disease Control and Prevention as criteria for defining AIDS, report in writing or electronically such results to the Department of Health and Senior Services. The report shall include the name and address of the clinical laboratory, the name and address of the submitter of the laboratory specimen, the date of the test, and the name, address, gender, and date of birth of the person from whom the laboratory specimen was obtained, or a unique code if a code is the only information identifying the person from whom the laboratory specimen was obtained, and other epidemiological information as may be required by the Department of Health and Senior Services on a general or a case-by-case basis. Only specimens sent to the laboratory from physicians’ offices in New Jersey or from institutions in New Jersey should be reported.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>

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<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-2.7 Access to information</p> <p>As provided by N.J.S.A. § 26:4-2 and § 26:5C-5 through 14, the information reported to the Department shall <u>not</u> be subject to public inspection, but shall be subject to <i>access only</i> by the Department of Health and Senior Services for <i>public health purposes</i>.</p>	<p>45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p> <p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to the Department of Health and Senior Services for public health purposes). Therefore, continue to follow the specific State law restrictions when using and disclosing PHI under this provision.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-3.1 Reporting of occupational and environmental diseases, injuries and poisonings by hospitals</p> <p>(a) The chief administrator or other persons having control or supervision over any hospital in which any person has been diagnosed with any of the diseases or poisonings listed in (b) and (c) below shall report such disease or poisoning to the Department.</p> <p>(c) Poisoning due to the following and not the result of a suicidal attempt shall also be <i>reported</i> to the parties specified in (a) above in the manner prescribed by (d).</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-3.2 Reporting of occupational and environmental diseases, injuries, and poisonings by physicians and advanced practice nurses</p> <p>(a) The physician attending any person who is ill or diagnosed with any of the diseases or injuries listed in (b) below shall, within 30 days after such condition has been diagnosed or treated, report such condition to the Department of Health and Senior Services. . . (c) The report required by (a) above shall state the name of the disease, injury, or poisoning and the name of the reporting physician or advanced practice nurse. The following information on the person ill or diagnosed with such condition shall also be furnished: name, date of birth, sex, home address, telephone number, name, address and telephone number of employer at the time of exposure</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.”</p>

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	or injury, and the date of onset of the disease, injury or poisoning. Additional information may be required by the Department after receipt of a specific report.		Therefore, a covered entity should follow this State law.
<p data-bbox="110 191 379 282">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="110 315 379 373">Chapter 57 Communicable Diseases</p>	<p data-bbox="419 191 715 219">8:57-3.3 Confidentiality</p> <p data-bbox="419 251 1427 373">(a) The reports made pursuant to this subchapter <i>shall be used only by the Department</i>, and such other agencies as may be designated by the Commissioner to carry out mandated duties, including the duty to control and suppress occupational and environmental diseases, injuries and poisonings.</p>	<p data-bbox="1454 191 1956 678">45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p data-bbox="1983 191 2408 737">This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which such use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law limits uses and disclosures to only by the Department, and such other agencies as may be designated by the Commissioner and for limited purposes). Therefore, continue to follow the specific State law restrictions when using and disclosing PHI under this provision.</p>
<p data-bbox="110 769 379 860">N.J.A.C. Title 8 Department of Health and Senior Services</p> <p data-bbox="110 893 379 951">Chapter 57 Communicable Diseases</p>	<p data-bbox="419 769 715 797">8:57-3.3 Confidentiality</p> <p data-bbox="419 829 1413 984">(b) Medical and epidemiologic information which is gathered in connection with an investigation of a reportable disease, injury or poisoning and which identifies an individual <i>is confidential and not open to public inspection</i> without that <i>individual's consent</i>, except as may be necessary to carry out duties to protect the public health as determined by the Department.</p>	<p data-bbox="1454 769 1956 893">45 C.F.R. 164.500, et seq. governs the scope of the Privacy Rule and requires covered entities to treat PHI with confidentiality.</p> <p data-bbox="1454 925 1956 1404">45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker’s compensation programs established by law.</p>	<p data-bbox="1983 769 2408 1372">This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA generally permits the use and disclosure of PHI for a number of public policy reasons where State law restricts uses and disclosures to a limited purpose – “public health reasons” – and requires individual’s consent for all other disclosures). Therefore, continue to follow the specific State law restrictions when using and disclosing PHI under this provision, but be sure that any consents used contain all of the HIPAA Authorization elements.</p>
<p data-bbox="110 1412 379 1503">N.J.A.C. Title 8 Department of Health and Senior Services</p>	<p data-bbox="419 1412 715 1440">8:57-3.3 Confidentiality</p> <p data-bbox="419 1472 1427 1503">(c) Medical or epidemiologic information collected pursuant to this subchapter <i>may</i></p>	<p data-bbox="1454 1412 1956 1503">45 C.F.R. 164.514(a) allows a covered entity to use and disclose PHI without regard to the HIPAA rules if the</p>	<p data-bbox="1983 1412 2408 1503">This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and</p>

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<p><u>Chapter 57</u> Communicable Diseases</p>	<p><i>be disclosed</i> in statistical or other form which does not disclose the identity of any individual.</p>	<p>information does not identify an individual and there is no reasonable basis to believe that the information could be used to identify an individual.</p>	<p>HIPAA. This State law provision, allows for uses and disclosures of information that do not identify a particular person. However, HIPAA is more specific than State law with regard to when PHI is considered “de-identified.” Therefore, be sure to check HIPAA to see that all identifiers have been removed.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-4.7 Records required</p> <p>[1] (b) If a child withdraws, is promoted, or transfers to another school, preschool, or child care center, the immunization record, or a certified copy thereof, along with statements pertaining to religious or medical exemptions and laboratory evidence of immunity, shall be sent to the new school by the original school or</p> <p>[2] shall be given to the parent or guardian upon request, <i>within 24 hours</i> of such a request.</p>	<p><u>With respect to [1]</u>: 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With respect to [2]</u> 45 C.F.R. 164.524 provides an individual with the right to access to his/her PHI except for psychotherapy notes; information compiled in anticipate of, or for use in a civil, criminal or administrative action or proceeding and PHI maintained subject to CLIA.</p> <p>45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p><u>With respect to [1]</u>: This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With respect to [2]</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, State law is more stringent than HIPAA with respect to how entity must provide access to PHI (i.e., access must be provided sooner under state law than HIPAA). Therefore, when implementing HIPAA’s requirements, follow this more stringent State law requirement.</p> <p>Note: “Education Records” under the Family Educational Rights</p>

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			<p><i>Protection Act (FERPA) are not PHI for purposes of HIPAA. As such, FERPA may contain additional requirements and/or restrictions that must be followed in connection with the handling of such records.</i></p>

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<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-4.7 Records required</p> <p>(c) When a child graduates from secondary school, this record, or a certified copy thereof, [1] shall be sent to an institution of higher education or [2] may be given to the parent or guardian upon request.</p>	<p><u>With respect to [1]:</u> 45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p> <p><u>With respect to [2]:</u> 45 C.F.R. 164.502(g) States that if under applicable law a parent, guardian or other person acting in loco parentis has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative except when the minor has authority to act as an individual.</p>	<p><u>With respect to [1]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p><u>With respect to [2]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p> <p>Note: “Education Records” under the Family Educational Rights Protection Act (FERPA) are not PHI for purposes of HIPAA. As such, FERPA may contain additional requirements and/or restrictions that must be followed in connection with the handling of such records.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-4.8 Reports to be sent to Department of Health and Senior Services</p> <p>(a) A report of the immunization status of the pupils in every school, preschool, or child care center shall be sent each year to the Department of Health and Senior Services by the principal, director, or other person in charge of the school, preschool, or child care center.</p> <p>(d) A copy of this report shall be sent to the local board of health in whose jurisdiction the school, preschool, or child care center is located.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.”</p>

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			<p>Therefore, a covered entity should follow this State law.</p> <p>Note: “Education Records” under the Family Educational Rights Protection Act (FERPA) are not PHI for purposes of HIPAA. As such, FERPA may contain additional requirements and/or restrictions that must be followed in connection with the handling of such records.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-4.9 Records available for inspection</p> <p>Each school, preschool, and child care center shall maintain records of their children's immunization status. Upon 24 hour notice, these records shall be made available for inspection by authorized representatives of the Department of Health and Senior Services or the local board of health in whose jurisdiction the school or child care center is located.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law requires certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.”</p> <p>Therefore, a covered entity should follow this State law.</p> <p>Note: “Education Records” under the Family Educational Rights Protection Act (FERPA) are not PHI for purposes of HIPAA. As such, FERPA may contain additional requirements and/or restrictions that must be followed in connection with the handling of such records.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-5.3 Reportable events</p> <p>(a) Every health care provider attending any person diagnosed with active tuberculosis disease or clinically suspected active tuberculosis shall report the following events to either the appropriate local health officer(s) or the Manager of the TB Program . . . (b) The local health officer shall report, in writing, within 72 hours, the following events to the Manager of the TB Program . . . 1. A person missing an appointment, as ordered by the local health officer in accordance with N.J.A.C. 8:57-5.5, after the required notifications have failed; 2. A person who has refused or failed to submit to a TB diagnostic examination in the following categories: a person clinically suspected of having tuberculosis, a person who has had close contact to a person with active or clinically suspected active TB, or a person with TB infection</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law requires certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.”</p> <p>Therefore, a covered entity should</p>

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	<p>when active TB has not been ruled out; and legal action is initiated; 3. Persons discharged from tuberculosis diagnosis or treatment commitment pursuant to medical or court orders; 4. Detention to prevent loss of contact pending court order in accordance with N.J.A.C. 8:57-5.7; 5. Orders issued by the local health officer to commit a person for TB diagnosis or treatment; and 6. Orders issued by the local health officer (or Superior Court) preventing a patient from leaving a hospital against medical advice (restraining order) for treatment of TB.</p>		<p>follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-5.5 Diagnostic examinations</p> <p>(c) A person with clinically suspected active tuberculosis who does not keep his or her appointment <i>shall be reported</i> to the local health officer who shall make and document at least two additional attempts to schedule an appointment. An attempt to contact is defined as going to the person's primary residence or last known whereabouts to establish a face-to-face contact. Attempts should be made on different days and at different times to maximize the opportunity to obtain a face-to-face contact.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 57</u> Communicable Diseases</p>	<p>8:57-5.5 Diagnostic examinations</p> <p>(e) Upon receipt of a TB Case, Suspect and Status Report from either the health care provider or the New Jersey Department of Health and Senior Services that the person has active or clinically suspected active tuberculosis, the local health officer or his or her designee shall determine whether there are any close contacts who must be examined for tuberculosis.</p> <p>1. If a close contact is identified who resides within the health officer's jurisdiction, the local health officer or his or her designee <i>shall notify that individual</i> and shall schedule a diagnostic examination within 10 business days of said notification indicating the time, place, purpose, and mandatory nature of the examination.</p> <p>2. If a close contact resides outside the local health officer's jurisdiction, <i>the following actions are required:</i> i. If the close contact resides outside the local health officer's jurisdiction, but within New Jersey, <i>the local health officer</i> or his or her designee <i>shall notify the appropriate local health officer</i> in New Jersey or TB control agency where the contact resides. The notified health officer or agency shall be responsible for notifying the individual and scheduling an appointment for a diagnostic examination as mentioned in (e)1 above. Such notification shall include a copy of the TB-70 form (TB Case, Suspect and Status Report) on the newly reported case or suspected case and a copy of the contact interview form (TB-41) showing the name(s) and address(es) of the contact(s) to be examined. A copy of this notification shall be sent to the Department of Health and Senior Services' TB Program representative with responsibility for that jurisdiction. ii. If the close contact</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as "required by law".</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <i>requires</i> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>

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	resides outside of New Jersey, the local health officer or his or her designee shall notify the Manager of the TB Program who shall notify the appropriate state authorities		
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-5.6 Management of TB; outpatient basis</p> <p>(c) If, at any time, the health care provider has reason to believe that an individual is thereafter, either unable or unwilling to follow a prescribed unobserved outpatient treatment plan or if the patient is non-compliant with DOT (less than 80 percent of the medications have been observed ingested), the <i>health care provider</i> shall request the <i>local health officer</i> to <i>initiate legal interventions</i> which may include warnings followed by an order for DOT. Persons on unobserved therapy shall maintain an appointment keeping rate of 80 percent or better as a proxy measure of medication-taking compliance.</p>	45 C.F.R. 164.512(j) allows the use and disclosure of PHI if the covered entity believes it is necessary to (i) prevent or lessen a serious and imminent threat to the health or safety of a person or the public; and (ii) is to a person or persons reasonably able to prevent or lessen the threat, including the target of the threat.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to uses and disclosures of PHI to prevent or lessen a threat to the health or safety of a person or the public. Therefore, be sure to follow the additional HIPAA requirements in these cases.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-5.6 Management of TB; outpatient basis</p> <p>(e) A health officer's order or court order for DOT may be rescinded based upon the recommendation of the health care provider. The local health officer shall base his or her decision to rescind DOT upon <i>review of the patient's medical record</i>, and if deemed necessary by the local health officer, independent review by another health care provider.</p>	45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment for healthcare operations.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-5.12 Procedures for commitment by local health officers</p> <p>(a) The local health officer may request assistance from the local police department(s), in accordance with N.J.S.A. § 26:1A-9, if the local health officer determines that there is a reasonable likelihood that a person will attempt to avoid commitment or detention. (b) If assistance is requested, the <i>local health officer shall provide the police with the order</i> under which commitment or detention, as the case may be, is authorized. The local health officer may seek assistance of the police before providing a copy of the order.</p>	None.	N/A
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-5.14 Confidentiality of records</p> <p>(a) Patient medical information or information concerning reportable events pursuant to any section of this subchapter shall not be disclosed except under the following circumstances: [1] For research purposes, provided that the study is reviewed and approved by the applicable Institutional Review Board, and is done in a manner that does not identify any person, either by name or other identifying data element; [2] With written consent of the person identified;</p>		Generally, this State law is “more stringent” than HIPAA and must be followed because HIPAA permits the use and disclosure of PHI for a number of public policy reasons where this State law provision limits the circumstances under which such information may be disclosed without prior consent. Therefore,

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	<p>[3] When the Commissioner, or his or her designee, determines that such disclosure is necessary to <i>enforce public health laws</i>;</p> <p>[4] When the Commissioner, or his or her designee, determines that such disclosure is necessary to or to <i>protect the life or health of a named party</i>, in accordance with applicable State and Federal laws; or</p> <p>[5] Pursuant to a valid court order.</p>	<p><u>With respect to [1]:</u> 45 C.F.R. 164.512 allows a covered entity to use and disclose PHI without an Authorization for research purposes, provided an IRB or privacy board has approved the waiver of the Authorization.</p> <p><u>With respect to [2]:</u> 45 C.F.R. 164.508 allows a covered entity to use and disclose PHI in accordance with a valid Authorization that contains specified elements.</p> <p><u>With respect to [3]:</u> 45 C.F.R. 164.512(b) allows a covered entity to use and disclose PHI for public health activities.</p>	<p>when disclosing PHI under this provision, limit the scope of HIPAA “permissible disclosures” to those listed in this State law.</p> <p><u>Otherwise, with respect to [1]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p> <p><u>With respect to [2]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI after obtaining a written consent referred to under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to the required elements of the consent (called an “Authorization” under HIPAA). Therefore, be sure your consent forms contain the additional HIPAA requirements relating to Authorizations.</p> <p><u>With respect to [3]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and</p>

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		<p><u>With respect to [4]:</u> 45 C.F.R. 164.512(j) allows the use and disclosure of PHI if the covered entity believes it is necessary to (i) prevent or lessen a serious and imminent threat to the health or safety of a person or the public; and (ii) is to a person or persons reasonably able to prevent or lessen the threat, including the target of the threat.</p> <p><u>With respect to [5]:</u> 45 C.F.R. 164.512(f) allows a covered entity to use and disclose PHI in compliance with and as limited by the relevant requirements of a court order or court-ordered warrant or a subpoena or summons issued by a judicial officer or an administrative request.</p>	<p>HIPAA requirements.</p> <p><u>With respect to [4]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to disclosures of PHI to prevent or lessen a threat to the health or safety of a person or the public. Therefore, be sure to follow the additional HIPAA requirements in these cases.</p> <p><u>With respect to [5]:</u> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>

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<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-6.13 Institutional records required</p> <p>(b) All New Jersey institutions of higher education shall maintain immunization record forms in a manner which <i>allows accessibility to health officials, yet insures the confidentiality</i> of the student's other records. Student immunization histories may be entered into an institution's secure electronic database.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for: (1) public health activities and (2) for health oversight activities.</p> <p>45 C.F.R. 164.530(c) requires a covered entity to have in place appropriate administrative, technical and physical safeguards to protect the privacy of PHI.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-6.13 Institutional records required</p> <p>(d) All New Jersey institutions of higher education shall, upon request of a student who is transferring to another institution, <i>send the</i> student's original record of immunization, or an authenticated copy thereof, or electronically print out an authenticated copy of the student's immunization history in the same manner as a college transcript, with any attached statements, to the other institution.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.</p> <p>* Note: “Education Records” under the Family Educational Rights Protection Act (“FERPA”) are not PHI for purposes of HIPAA. As such, FERPA may contain additional requirements that must be followed when such health information is transferred to another educational institution.</p>
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-6.13 Institutional records required</p> <p>(e) All New Jersey institutions of higher education shall, upon request, <i>release to a student</i> his or her immunization records or an authentic electronic printout of that record. Request for such records shall be honored for three years following a student's graduation, termination, transfer, or departure from the institution.</p>	<p>45 C.F.R. 164.524 provides an individual with the right to access to his/her PHI except for psychotherapy notes; information compiled in anticipate of, or for use in a civil, criminal or administrative action or proceeding and PHI maintained subject to CLIA. A covered entity may deny an individual access if a licensed health care professional has determined, in the exercise of professional judgment,</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>

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		that the access requested is reasonably likely to endanger the life or physical safety of the individual or another person.	
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-6.14 Reports to be submitted to the Department of Health and Senior Services</p> <p>(a) A report of the immunization status of students in every institution <i>shall be sent each year</i> to the Department of Health and Senior Services. This report shall be submitted by the official designated pursuant to <u>N.J.A.C. 8:57- 6.7(b)</u> to be responsible for the administration and enforcement of this subchapter and for the maintenance of immunization records. . . (e) Each four year institution of higher education <i>shall also submit</i> an annual meningococcal report provided by the Department of Health and Senior Services by December 1, for each academic year which begins in September of the same year.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-6.15 Records available for inspection</p> <p>All institutions shall maintain centralized records of their students' immunization status. Upon 24 hours notice, those records <i>shall be made available</i> for inspection by authorized representatives of the Department of Health and Senior Services or the local board of health in whose jurisdiction the institution of higher education is located.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 57 Communicable Diseases</p>	<p>8:57-6.17 Reporting requirements</p> <p>Each New Jersey institution of higher education <i>shall report</i> the suspected presence of any reportable communicable disease, as identified at N.J.A.C. 8:57-1.3 and N.J.A.C. 8:57-1.4, to the local health officer having jurisdiction over the locality in which such institution is located.</p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are “required by law.” Therefore, a covered entity should follow this State law.
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p>	<p>8:57-7.5 Inspection of records</p> <p>(a) Records or other such evidence of compliance required by this subchapter <i>shall</i></p>	45 C.F.R. 164.512(a) allows a covered entity to use and disclose PHI without an Authorization as “required by law”.	This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and

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<p><u>Chapter 57</u> Communicable Diseases</p>	<p><i>be made available</i> for inspection by representatives of the New Jersey Department of Health and Senior Services upon request.</p>		<p>HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; and, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits uses and disclosures of PHI that are "required by law." Therefore, a covered entity should follow this State law.</p>

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<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 59 WORKER AND COMMUNITY RIGHT TO KNOW ACT RULES</p>	<p>8:59-8.5 Employee health and exposure records</p> <p>(a) Within 30 days of a request by the department, an employer shall provide the department with copies of employee health and exposure records, including those maintained for, and supplied to, the Federal government. (b) When the department requests <i>employee medical records</i> that include the individuals' names, the employer shall, within 10 days, grant the department access to the employees, either in person or by supplying home addresses, in order to request permission to review their medical records . . . (e) The Commissioner's authority to obtain employee health and exposure records on behalf of the public's health is further set forth in <u>N.J.S.A. 26:1A-16</u> and <u>N.J.S.A. 26:1A-37</u>.</p>	<p>45 C.F.R. 164.502 places the burden on a covered entity to be responsible for compliance with the rules relating to use and disclosure of PHI.</p> <p>45 C.F.R. 160.103 defines a "covered entity" as a "health plan," a "health care clearinghouse" or a "health care provider who transmits any health information in electronic form in connection with a transaction covered by this chapter.</p>	<p>An employer is generally not a "covered entity" unless the employer is acting in the capacity as an administrator of an employee health plan or fits the definition of a "health care provider." Therefore, more than likely, HIPAA does not apply to this disclosure. Since HIPAA does not apply, follow State law.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p><u>Chapter 59</u> Worker and Community Right to Know Act Rules</p>	<p>8:59-8.9 Inspection procedures</p> <p>(a) Right to Know Enforcement Officers of the Department of Health and Senior Services <i>are authorized</i> to enter during normal operating hours any facility or other area where work is performed by a public or private employee of an employer; to inspect and investigate during normal operating hours within reasonable limits and in a reasonable manner, any such facility; and to review records required by the Act and rules and regulations promulgated pursuant thereto, and other records which are directly related to the purpose of the inspection.</p>	<p>45 C.F.R. 164.512 allows a covered entity to use and disclose PHI for a variety of public policy purposes without an Authorization, including for health oversight activities.</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 60 Asbestos Licenses and Permits</p>	<p>None Identified.</p>	<p>N/A</p>	<p>N/A</p>
<p><u>N.J.A.C. Title 8</u> Department of Health and Senior Services</p> <p>Chapter 61 Attendance and Participation at School by Persons with HIV Infection; AIDS Drug Distribution Program; HIV/AIDS Counseling and Testing of Pregnant Women for HIV; and Disclosure of Children's HIV/AIDS Status</p>	<p>8:61-5.1 Disclosure of information to full-time caregivers</p> <p>The contents of a child's HIV/AIDS records may be disclosed by health care providers to the Division of Youth and Family Services. The Division of Youth and Family Services may disclose such information on a need-to-know basis to private adoption agencies certified by the Division of Youth and Family Services and to foster care agencies with which the Division of Youth and Family Services contracts. The Division of Youth and Family Services, private adoption agencies certified by the Division of Youth and Family Services, and foster care agencies with which the Division of Youth and Family Services contracts may disclose the contents of a child's HIV/AIDS record on a need-to-know basis for the care and treatment of the child to any full-time caregiver. Individuals receiving such information shall keep the information confidential, pursuant to N.J.S.A. 26:5C-10.</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment purposes.</p> <p>45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: "as required by law"; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may use and disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>

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		government functions; and to authorized worker's compensation programs established by law.	
<p>N.J.A.C. Title 8 Department of Health and Senior Services</p> <p>Chapter 62 Standards for Lead Certification</p>	None Identified.	N/A	N/A
<p>N.J.A.C. Title 10 DEPARTMENT OF HUMAN SERVICES</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-2.2(a) Report to court and the Division of Motor Vehicles following noncompliance.</p> <p>Failure on the part of the client to appear at an Intoxicated Driver Resource Center shall result in a referral to Division of Motor Vehicles for appropriate action, and, referral to the court of conviction for appropriate action.</p>	45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow State law.
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-2.9 Confidentiality of computer data base</p> <p>Access to all Intoxicated Driver Resource Center <i>computer data files</i> shall be limited to Intoxicated Driver Resource Center or Intoxicated Driving Program personnel, through a coding mechanism.</p>	45 C.F.R. 164.514(d) - A covered entity must make reasonable efforts to limit access to PHI by member of the workforce to those individuals who need the information to carry out their duties.	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law specifically limits the access to certain health information to only <u>specific</u> individuals while HIPAA only states that a covered entity must itself define and document the scope of employee access to PHI. Therefore, follow but be sure to document the limitations as required by HIPAA.
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-2.10 Data collection</p> <p>The Intoxicated Driver Resource Center shall file monthly operational data reports with the Intoxicated Driving Program.</p>	45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.	This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are

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			"required by law." Therefore, follow State law.

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<p><u>N.J.A.C. Title 10</u> Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-3.2 Scheduling clients convicted of refusal to take a chemical test</p> <p>[T]he Intoxicating Driving Program shall refer the driver to an Intoxicating Driver Resource Center in accordance with N.J.S.A. 39:4-50.4(a) or N.J.S.A. 12:7-57 et seq. for this program.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p><u>N.J.A.C. Title 10</u> Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-3.5(a) Transfers from one county to another prior to initial attendance at an Intoxicated Driver Resource Center</p> <p>A client may be transferred from one county’s program to another with the consent of the Intoxicated Driver Resource Center Director</p>	<p>45 C.F.R. 164.502 allows a covered entity to disclose PHI without an Authorization for treatment, payment for healthcare operations.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits uses disclosures of PHI for purposes of treatment, where State law requires the consent of the Intoxicated Driver Resource Center Director). Therefore, follow the State law restrictions when disclosing PHI under this provision.</p>
<p><u>N.J.A.C. Title 10</u> Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-3.5(b) Transfers from one county to another prior to initial attendance at an Intoxicated Driver Resource Center</p> <p>[T]he Intoxicated Driver Resource Center transferring the client shall forward all client records (maintaining a copy) to the receiving Intoxicated Driver Resource Center with a brief statement of the reason for the transfer.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p><u>N.J.A.C. Title 10</u> Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-3.6 Second offender treatment referral and monitoring</p> <p>If a 48 hour program sends a second offender to treatment, the Intoxicating Driver Resource Center in the client’s home county shall monitor treatment. All client records shall be sent to the monitoring county.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under</p>

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			this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow State law.
<p data-bbox="110 289 379 375">N.J.A.C. Title 10 Department of Human Services</p> <p data-bbox="110 407 379 493">Chapter 162 Intoxicated Driving Program</p>	<p data-bbox="419 289 1346 316">10:162-3.7 Scheduling and monitoring of third and subsequent offenders</p> <p data-bbox="419 349 1413 493">Third and subsequent offenders <i>shall</i> be referred to the 12 hour Intoxicated Driver Resource Center for evaluation, referral to treatment and/or self-help group participation, pursuant to N.J.A.C. 10:162-4.2, and N.J.A.C. 10:162-4.5. Third and subsequent offenders <i>shall</i> be monitored by the Intoxicated Driver Resource Center for one full year from the time the client begins treatment.</p>	<p data-bbox="1454 289 1956 461">45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p data-bbox="1983 289 2413 646">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow State law.</p>
<p data-bbox="110 657 379 743">N.J.A.C. Title 10 Department of Human Services</p> <p data-bbox="110 776 379 862">Chapter 162 Intoxicated Driving Program</p>	<p data-bbox="419 657 881 685">10:162-4.1(d) Evaluation procedures</p> <p data-bbox="419 717 1392 769">[a] The records release <i>authorization form shall be filled out</i> to allow information to be released to:</p> <p data-bbox="419 776 989 987">[1] the court, [2] Intoxicated Driving Program, [3] the Division of Alcoholism and Drug Abuse, [4] the treatment program, [5] the Division of Motor Vehicles, [6] the Intoxicated Driver Resource Centers, and [7] the client's attorney.</p> <p data-bbox="419 1019 1346 1071">[b] In addition, the client may authorize any other persons to receive protected information by so indicating on the form.</p>	<p data-bbox="1454 657 1956 1138"><u>With regard to [a]</u>: 45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: "as required by law"; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for specialized government functions; and to authorized worker's compensation programs established by law.</p> <p data-bbox="1454 1170 1903 1256"><u>With regard to [b]</u>: 45 C.F.R. 164.508 allows an individual to authorize the disclosure of his/her PHI.</p>	<p data-bbox="1983 657 2413 1073"><u>With regard to [a]</u>: This State law is "more stringent" than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits disclosures of PHI for a number of public policy reasons, such as for judicial purposes, where State law requires an Authorization). Therefore, follow the State law restrictions when disclosing PHI under this provision.</p> <p data-bbox="1983 1170 2413 1502"><u>With regard to [b]</u>: This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may disclose PHI after obtaining a written authorization form referred to under this State law provision without violating HIPAA. However, HIPAA has more specific requirements with respect to the required elements of</p>

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			the authorization <u>and</u> specifically prohibits “blanket authorizations”. Therefore, be sure the authorization form meets the additional HIPAA requirements.
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-4.2(b) Criteria for client referral to treatment</p> <p>A referral to treatment or for further evaluation shall take into consideration the following facts as relevant to a client’s need for treatment or further evaluation:</p> <p>[8] Outside information. The Intoxicated Driver Resource Center/Intoxicated Driving Program staff <i>may receive</i> information from outside sources such as a client’s family, treatment facilities counselors or physicians. Such information <i>may be utilized</i> if the source of the information is disclosed to the client and he or she is given the opportunity to review and comment on the information</p>	<p>45 C.F.R. 164.502 allows a covered entity to use and disclose PHI without an Authorization for treatment, payment or healthcare operations.</p>	<p>This State law is “more stringent” than HIPAA and must be followed because it restricts a use or disclosure in circumstances under which the use or disclosure would be permitted under HIPAA (i.e., HIPAA permits a use and disclosure of PHI for purposes of treatment, payment and healthcare operations). Therefore, under this State law provision, be sure to provide disclosure to the client/patient of the source AND provide him/her the opportunity to review and comment prior to using and disclosing PHI received from an outside source.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-4.6(f) & (h) Referral procedures</p> <p>[f] All clients referred to treatment <i>shall sign a records release authorization</i> prior to leaving the Intoxicated Driver Center in order to allow the Court, the Intoxicated Driver Resource Center, the Intoxicated Driving Program, the Division of Addiction Services, and Division of Motor Vehicles, the client’s attorney, the treatment program and other specifically named individuals or entities to exchange information.</p> <p>[h] The client’s refusal to sign the form shall not interfere with any <i>lawful right</i> of the above agencies to communicate.</p>	<p><i>With respect to [f]:</i> 45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p> <p><i>With respect to [h]:</i> 45 C.F.R. 164.512 allows a covered entity to disclose PHI for a variety of public policy purposes without an Authorization, including: “as required by law”; for public health activities; with respect to victims of abuse or neglect; for health oversight activities; for judicial and administrative proceedings; for law enforcement purposes; with respect to information about decedents; for cadaveric organ, eye or tissue donation purposes; for research purposes; to avert a serious threat to health or safety; for</p>	<p><i>With respect to [f]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p> <p><i>With respect to [h]:</i> This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirements.</p>

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		specialized government functions; and to authorized worker's compensation programs established by law.	

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<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-6.1(b) Intake evaluation</p> <p>The treatment program shall conduct an independent evaluation of the client's need for treatment . . . Clients shall be advised that failure to participate in treatment will result in license suspension and a minimum two day jail sentence. The treatment agency shall establish a contract with the client regarding the treatment plan. The client shall sign a records release authorization during the intake process. The form shall be completed to allow the court, the Intoxicated Driver Resource Center, the Intoxicated Driving Program, the Division of Alcoholism and Drug Abuse and the Division of Motor Vehicles, the client's attorney, and the treatment program to exchange information.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-6.2 Client intake form</p> <p>The client intake form and the results of the [intake] evaluation by the treatment program shall be sent to the Intoxicated Driver Resource Center within seven working days after the intake with the records release authorization. The client's full name, address and phone number, driver license number, the evaluation, the counselor's signature, name of program and the date shall be included in the material sent to the Intoxicated Driver Resource Center.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-6.5(a) Failure to comply with treatment requirements</p> <p>Once a client has been accepted for treatment, any failure to comply with the treatment program shall be reported by the treatment program to the Intoxicated Driver Resource Center in writing within seven working days</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-6.9 Evaluation of client progress</p> <p>The progress of the client shall be monitored and recorded by the treatment program staff on a weekly basis. A client who may be in need of additional treatment, such as detoxification, intensive outpatient, or inpatient treatment, may be assigned to such treatment, with approval from the Intoxicated Driver Resource Center. Clients who continue to abuse alcohol/drugs, or otherwise fail to comply with program requirements, shall be reported to the Intoxicated Driving Program by the Intoxicated Driver Resource Center.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA</p>

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<p data-bbox="110 224 379 310">N.J.A.C. Title 10 Department of Human Services</p> <p data-bbox="110 345 357 431">Chapter 162 Intoxicated Driving Program</p>	<p data-bbox="419 224 822 251">10:162-6.11 Family involvement</p> <p data-bbox="419 285 1413 524">Each client may be requested to have one counseling session with a member of his or her family or a friend. The counselor may make every effort, with the client's consent, to involve the family in the treatment process, including one session on family aspects of alcohol and drug abuse. If necessary, marriage and family counseling shall be available to the client and can be substituted for regular group sessions. If family or friend refuse to attend, or the client does not desire to reveal that he or she is in treatment to the family and friends, this is not non-compliance on the part of the client. Self help group information should also be made available.</p>	<p data-bbox="1454 224 1956 1157">45 C.F.R. 164.510 allows a covered entity to disclose PHI to a family member, other relative or close personal friend of the individual or any other person identified by the individual, the PHI directly relevant to such person's involvement with the individual's care or payment related to the individual's care, but only if the individual is present for, or otherwise available prior to, a use or disclosure and has the capacity to make healthcare decisions and the covered entity obtains the individual's agreement or provides that the individual with an opportunity to object and the individual does not express an objection or reasonably infers from the circumstances, based on the exercise of professional judgment that the individual does not object to the disclosure OR if the individual is not present for or the opportunity to agree or object to the use or disclosure cannot practicably be provided because of the individual's incapacity or an emergency circumstance, the covered entity may, in the exercise of professional judgment determine whether the disclosure is in the best interests of the individual and, if so, disclose only the PHI that is directly relevant to the person's involvement with the individual's health care.</p>	<p data-bbox="1983 134 2400 215">permits disclosures of PHI that are "required by law." Therefore, follow State law.</p> <p data-bbox="1983 224 2400 459">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirement.</p>
<p data-bbox="110 1174 379 1260">N.J.A.C. Title 10 Department of Human Services</p> <p data-bbox="110 1295 357 1382">Chapter 162 Intoxicated Driving Program</p>	<p data-bbox="419 1174 1279 1201">10:162-6.12 Client transfers from one treatment program to another</p> <p data-bbox="419 1235 1413 1382">Client transfers from one treatment program to another are permitted, if approved by the Intoxicated Driver Resource Center, and if a client is in compliance and a conflict between a program and a client has progressed to the point that treatment is jeopardized Transfer of records shall be channeled through the Intoxicated Driver Resource Center office . . .</p>	<p data-bbox="1454 1174 1956 1352">45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is "required by law" and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p data-bbox="1983 1174 2400 1498">This State law is not "contrary to" HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are "required by law." Therefore, follow</p>

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<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-6.14(d) Client treatment procedures</p> <p>If a client is not able to safely resume driving after a year of continuous treatment, the Intoxicated Driver Resource Center/ Intoxicated Driving Program shall report this to the Division of Motor Vehicles.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-6.17 Treatment program</p> <p>Each Intoxicated Driver Resource Center <i>shall</i> update its approved treatment lists quarterly and shall send a copy of the list to the Intoxicated Driving Program.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-7.1(a)2. Intoxication at the Intoxicated Driver Resource Center</p> <p>[I]f the client is incapacitated, the Intoxicated Driver Resource Center may call the police, Service Force, or Emergency Medical Service and have the client removed to a hospital or other facility for detoxification . . .</p>	<p>45 C.F.R. 164.512(j) allows a covered entity to disclose PHI in order to protect the individual or another person from serious injury.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. An entity covered by HIPAA may disclose PHI under this State law provision without violating HIPAA. Therefore, follow both State law and HIPAA requirement.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p>Chapter 162 Intoxicated Driving Program</p>	<p>10:162-8.1(a)2. Failure to attend the Intoxicated Driver Resource Center/ Intoxicated Driving Program or pay the required fees</p> <p>[I]f the client remains in noncompliance, the Intoxicated Driver Resource Center/Intoxicated Driving Program, within 10 working days of mailing the notice of noncompliance, may issue a noncompliance report . . . (ii) If the client is a new law offender, a copy of the report shall be mailed to the court of conviction with a copy of the original notice of noncompliance.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p>N.J.A.C. Title 10</p>	<p>10:162-8.2 Failure to contact treatment facility</p>	<p>45 C.F.R. 164.512(a) allows a covered</p>	<p>This State law is not “contrary to”</p>

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<p>Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>When the Intoxicated Driver Resource Center/Intoxicated Driving Program has been notified that a client has not contacted the treatment facility by the contact date, the Intoxicated Driver Resource Center/Intoxicated Driving Program shall . . . mail a copy of the treatment agreement to the court of conviction.</p>	<p>entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-8.3 Failure to comply with the treatment program</p> <p>Upon receipt of a Client Treatment Release form indicating that the client did not comply with the treatment program requirements, the Intoxicated Driver Resource Center/Intoxicated Driving Program shall, for new law clients, in addition to the other documents, mail a copy of the treatment agreement to the court of conviction.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-8.4 Other noncompliance</p> <p>If the client is found to be in noncompliance for any reason, the Intoxicated Driver Resource Center/Intoxicated Driving Program will follow the procedures . . . and shall, for new law clients, mail any necessary documents to the court of conviction.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are “required by law.” Therefore, follow State law.</p>
<p>N.J.A.C. Title 10 Department of Human Services</p> <p><u>Chapter 162</u> Intoxicated Driving Program</p>	<p>10:162-8.7 Noncompliance with treatment</p> <p>The treatment programs shall notify the Intoxicated Driver Resource Center/ Intoxicated Driving Program of any noncompliance in writing within seven working days. The Intoxicated Driver Resource Center shall notify the courts and the Intoxicated Driving Program utilizing the noncompliance report.</p>	<p>45 C.F.R. 164.512(a) allows a covered entity to disclose PHI to the extent that such use or disclosure is “required by law” and the use or disclosure complies with and is limited to the relevant requirements of such law.</p>	<p>This State law is not “contrary to” HIPAA as it is not impossible to comply with both State law and HIPAA. This provision of State law <u>requires</u> certain disclosures to be made; therefore, an entity covered by HIPAA may disclose PHI under this provision of State law without violating HIPAA because HIPAA permits disclosures of PHI that are</p>

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