

## **RESTRICTIONS ON GOVERNMENT ACCESS TO HEALTH INFORMATION**

[45 CFR Part 160, Subpart C; 164.512(f)]

### **Background**

Under the HIPAA Privacy Rule, government-operated health plans and health care providers must meet substantially the same requirements as private ones for protecting the privacy of individual identifiable health information. For instance, government-run health plans, such as Medicare and Medicaid plans, must take virtually the same steps to protect the claims and health information that they receive from beneficiaries as private insurance plans or health maintenance organizations (HMO). In addition, all Federal agencies must also meet the requirements of the Privacy Act of 1974, which restricts what information about individual citizens – including any personal health information – can be shared with other agencies and with the public.

The only new authority for government involves enforcement of the protections in the Privacy Rule itself. To ensure that covered entities protect patients' privacy as required, the Rule requires that health plans, hospitals, and other covered entities cooperate with efforts by the Department of Health and Human Services (HHS) Office for Civil Rights (OCR) to investigate complaints or otherwise ensure compliance.

### **Frequently Asked Questions**

To see Privacy Rule FAQs, click the desired link below:

[FAQs on Disclosures for Rule Enforcement](#)

[FAQs on Disclosures for Law Enforcement Purposes](#)

[FAQs on Privacy Rule: General Topics](#)

[FAQs on ALL Privacy Rule Topics](#)

(You can also go to [http://answers.hhs.gov/cgi-bin/hhs.cfg/php/enduser/std\\_alp.php](http://answers.hhs.gov/cgi-bin/hhs.cfg/php/enduser/std_alp.php), then select "Privacy of Health Information/HIPAA" from the Category drop down list and click the Search button.)