

Great Rivers Behavioral Health Administrative Services Organization

Policy Title:	Confidentiality	Policy No. 1002.00
Category:	Administrative	Date Adopted: 01/10/2020 Date Revised: Date Reviewed:
Reference:	Revised Code of Washington 70.02, 71.05, 71.24, 71.34, 74.09.295; HIPAA Privacy Rule, 45 CFR Part 160 and Subparts A and E of Part 164 42 CFR Part 2 - CONFIDENTIALITY OF ALCOHOL AND DRUG ABUSE PATIENT RECORDS	

POLICY:

- 1.1. Great Rivers Behavioral Health Administrative Services Organization ("Great Rivers BH-ASO") shall protect both verbal and written confidential Individual of Service information from improper, intentional or inadvertent disclosure. Great Rivers BH-ASO, in an effort to be compliant with the Privacy Rule of HIPAA's Administrative Simplification provisions and 42 CFR Part 2, sets out, in this policy, procedural guidelines for the uses and disclosures for individuals with whom it has a direct relationship.

PROCEDURE:

- 2.1. General:
- 2.1.1. Abide by the Health Insurance Portability and Accountability Act (HIPAA) and 42 CFR Part 2 - confidentiality of mental health as well as alcohol and drug abuse patient records.
- 2.1.2. All written documentation containing protected health information shall be stored in locked file cabinets. "Protected health information (PHI)" is defined as:
- 2.1.2.1. Protected health information means individually identifiable health information:
- 2.1.2.1.1. Except as provided in paragraph (2) of this definition, that is:
- 2.1.2.1.2. Transmitted by electronic media;
- 2.1.2.1.3. Maintained in electronic media; or
- 2.1.2.1.4. Transmitted or maintained in any other form or medium.
- 2.1.2.2. Protected health information excludes individually identifiable health information:
- 2.1.2.2.1. In education records covered by the Family Educational Rights and Privacy Act, as amended, 20 U.S.C. 1232g;
- 2.1.2.2.2. In records described at 20 U.S.C. 1232g(a)(4)(B)(iv);
- 2.1.2.2.3. In employment records held by a covered entity in its role as employer; and
- 2.1.2.2.4. Regarding a person who has been deceased for more than 50 years.
- 2.1.2.3. Individually identifiable health information" is information that is a subset of health information, including demographic information collected from an individual; and

- 2.1.2.3.1. Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
 - 2.1.2.3.2. Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and
 - 2.1.2.3.3. That identifies the individual; or
 - 2.1.2.3.4. With respect to which there is a reasonable basis to believe the information can be used to identify the individual.
- 2.1.3. Electronic Protected Health Information (ePHI)" is defined as:
- 2.1.3.1. Electronic *protected health information* means information that comes within paragraphs (1)(i) or (1)(ii) of the definition of *protected health information* as specified in this section.
 - 2.1.3.2. Computer files containing ePHI shall be kept on secure computers which require the user to supply a unique password, thereby denying access to the files to unauthorized users.
 - 2.1.3.3. HHS has identified 18 "identifiers" the removal of which from records would be considered a "Safe Harbor" method of De-Identification [see Guidance Regarding Methods for De-Identification of Protecting Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule].
- 2.1.4. Email Procedure:
- 2.1.4.1. Individual of Service names may not be sent in an email message except as follows:
 - 2.1.4.2. A file may be attached with the information as long as it is password protected. Password must be sent under separate email;
 - 2.1.4.3. The sender shall inform the recipient that the file is password protected and they must call the sender in order to open said file;
 - 2.1.4.4. The recipient shall call the sender to verbally receive the password;
 - 2.1.4.5. Individual of Service initials may be used in emails if doing so does not identify the Individual of Service to unauthorized users;
 - 2.1.4.6. Use of the FTP site is suggested for Individual of Service identifying information; and
 - 2.1.4.7. Alternatively, an internal email that is encrypted may contain an Individual of Service name but only if initials would not be enough because of the recipient's need to know in order to perform a valid function.
- 2.1.5. Faxing Procedure:
- 2.1.5.1. All transmittals of confidential material shall clearly be marked 'CONFIDENTIAL.' Confidential material which is faxed shall include a cover sheet. Cover sheet should contain statement to effect that if recipient is not the proper person or company that they should refrain from reading the documents, shred the same and immediately notify the sender. Fax numbers should be checked twice before putting on cover sheet and checked again after entering into fax machine.
- 2.1.6. Confidentiality Statements:
- 2.1.6.1. Confidentiality statements (as follows) shall be signed by the following:

- 2.1.6.1.1. Great Rivers BH-ASO employees. Signed Oath of Confidentiality shall be retained in the employee's personnel file and/or Relias database.
- 2.1.6.1.2. Advisory and Governing Board BH-ASO members
- 2.1.6.1.3. Service people who might inadvertently see or hear an Individual of Service name while working on Great Rivers BH-ASO premises (i.e. computer repairmen, janitors, etc.)
- 2.1.6.1.4. Volunteers, including Quality Review Team and Quality Management Committee members, who may have access to Individual of Service names and information.

2.1.7. Public Meetings:

- 2.1.7.1. Care will be taken in all public meetings hosted or participated in by staff of Great Rivers BH-ASO that when reports are given or comments made they are to make sure to keep any unique identifiers from being used, especially the Individual of Service's name.

2.2. Any other issue related to Individual of Service confidentiality that is not addressed by this policy shall conform to applicable state and federal regulations to include, but not be limited to, RCW 71.05, RCW 71.24, RCW 71.34, and 42 CFR Part 2 - Confidentiality of Alcohol and Drug Abuse Patient Record.

POLICY SIGNATURE

DocuSigned by:
Edna J. Fund
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Edna J. Fund, Chair
Great Rivers BH-ASO Governing Board

4/14/2020

Date