

Great Rivers Behavioral Health Administrative Services Organization

Policy Title:	Oversight of Protected Health Information	Policy No. 4004.01
Category:	Compliance	Date Adopted: 1/10/2020 Date Revised: 05/14/2021 Date Reviewed: 04/21/2021
Reference:	Washington Health Care Authority Contract with Great Rivers Behavioral Health Administrative Services Organization; 45 CFR 164.308; 164.310 and 164.312.	

Policy:

- 1.1. Great Rivers Behavioral Health Administrative Services Organization (Great Rivers BH-ASO) maintains a framework to protect individuals' rights by securing and protecting Protected Health Information (PHI). Great Rivers BH-ASO also maintains a structure that develops methods to prevent, detect, and resolve risks to PHI and individual's rights.
- 1.2. Great Rivers BH-ASO will create and regularly review administrative, physical, and technical safeguards implemented to secure Electronic Protected Health information (ePHI).
 - 1.2.1. Great Rivers BH-ASO will ensure the confidentiality, integrity, and availability of ePHI that Great Rivers BH-ASO or business associate creates, receives, maintains, or transmits.
 - 1.2.2. Great Rivers BH-ASO will strive to protect against anticipated threats or hazards to the security and integrity of ePHI.
 - 1.2.3. Great Rivers BH-ASO will take reasonable measures to anticipate uses or disclosures whether incidental, inadvertent or intentional that are not permitted by the Health Insurance Portability and Accountability Act (HIPAA).
- 1.3. Great Rivers BH-ASO will complete a risk assessment that identifies changes at Great Rivers BH-ASO that may compromise the confidentiality, integrity, and availability of ePHI that Great Rivers BH-ASO or business associates create, receive, maintain, or transmit.

Procedure:

- 2.1. **Framework**
 - 2.1.1. The Privacy and Security Officers are responsible for carrying out the functions of implementing policies and procedures, monitoring and auditing, training, receiving reports on violations, investigating, reporting to necessary authorities, and coordinating with the Compliance Committee to ensure individual rights and confidentiality are maintained in accordance with federal and state regulations.
 - 2.1.2. The Security Officer is responsible for the oversight of the safeguards and to work with Great Rivers BH-ASO's Compliance Committee to maintain confidentiality, integrity, and availability of ePHI at Great Rivers BH-ASO.

2.1.3. The Compliance Committee assists the Privacy Officer and Security Officer in meeting the guidelines established by federal and state law related to confidentiality and security and reviewing the policies on an annual basis.

2.2. **Assessment of Safeguards.**

2.2.1. An Assessment of Safeguards is to be completed for Great Rivers BH-ASO business functions that need to be further addressed on an annual basis or when major changes occur.

2.2.2. A plan will be created to address the areas as defined as not reasonably meeting the safeguard.

2.2.3. The assessment and plan will be brought to the management team for their understanding of current barriers and to support and advise future steps that will be happening at Great Rivers BH-ASO to meet the reasonable and appropriate standards.

2.3. **Risk Assessment**

2.3.1. The Risk Assessment and Management Plan will be completed annually or upon any major change. The Security Officer will be responsible for a risk assessment and management plan related to ePHI and the Privacy Officer will be responsible for a risk assessment and management plan related to PHI.

2.3.2. The Risk Assessment and Management Plan will be brought to the management team to evaluate and determine if the plan can be carried out with resources available.

2.3.3. The Compliance Committee will monitor the Risk Assessment and Management Plan for any additional support or concerns that may arise.

2.4. **Monitor**

2.4.1. The Privacy Officer or designee will complete an annual internal review to identify potential deficiency and areas of improvement within Great Rivers BH-ASO.

2.5. **Documentation**

2.5.1. Information created for the oversight of federal and state guidelines related to protected health information will be maintained for ten (10) years.

2.5.2. Storage of documentation will be in accordance with established Great Rivers BH-ASO document storage and record management procedures.

POLICY SIGNATURE

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Trinidad L. Medina
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6/24/2021

Trinidad Medina,
Chief Executive Director

Date