

# POLICY & PROCEDURE



<b>TITLE: Confidentiality</b>				
<b>Scope/Purpose:</b> Employees must treat patient information confidentially and maintain security of information in accordance to HIPAA regulations.				
<b>Division/Department:</b> All HealthPoint Clinics			<b>Policy/Procedure #:</b>	
<b>Original Date:</b> 2006			<input type="checkbox"/> <b>New</b> <input checked="" type="checkbox"/> <b>Replacement for: Same</b>	
<b>Date Reviewed:</b>	<b>Date Revised:</b>	<b>Implementation:</b>	<b>CPIC Approved:</b>	<b>Board Approved:</b>
	06/26.2014		07/08/2014	
<b>Responsible Party: Director Compliance/QA; Privacy Officer</b>				

## DEFINITIONS:

### **Protected Health Information (PHI)**

Patient information communicated and/or stored in any manner, including verbally, fax or other telecommunication means, on paper, or in any other electronic form. PHI includes any information, whether oral or recorded in any form or medium: (1) that relates to the past, present or future physical or mental condition of a member; the provision of health care to a member; or the past, present or future payment for the provision of health care to a member; and (2) that identifies the member or with respect to which there is a reasonable basis to believe the information can be used to identify the member.

### **PHI Identifiers**

The 18 identifiers considered as protected health information include: patient name, address, telephone number, fax number, dates directly related to an individual (birth date, date of service, date of admission, etc.), electronic mail addresses, social security number, medical record number, health plan number, account numbers, certificate/license numbers, vehicle identifiers and serial numbers, device identifiers and serial numbers, Web Universal Resource Locators (URLs), Internet Protocol (IP) addresses, biometric identifiers (including finger and voice prints), full face photographic images, and any other unique identifying number, characteristic, or code.

## POLICY:

HealthPoint employees are to maintain patient confidentiality in accordance to the Health Information Portability and Accountability Act of 1996 (HIPAA) as amended under the Health Information Technology for Economic and Clinical Health Act (the "HITECH Act").

Inappropriate use or disclosure of PHI or other confidential information is cause for disciplinary action, up to and including termination from employment (or contract), and may result in civil and/or criminal liability.

PROCEDURES FOR MAINTAINING PATIENT CONFIDENTIALITY:

1. Employees must verify patient's identity prior to services or the release of patient information. At minimum staff must request patient full name, date of birth, address and phone number.
2. Employees must follow HealthPoint policies and procedures pertaining to the release of records.
3. Employees are only allowed to access the patient information needed to perform their job duties.
4. Employees are never to discuss the patient's information with anyone without the patient's permission (including family and/or friends) at work or outside the workplace.
5. Employees must safeguard patient information by:
  - Using passwords for computer access
  - Protection of passwords from unauthorized use (do not share password with others)
  - Logging off of computers when not in use
  - Shredding papers with PHI or dispose of in secure shredding containers
  - Protecting computer screens from unauthorized viewing (privacy screens or positioning of computer)
6. Employees must not leave confidential information on an answering machine that other people can access.
7. Employees should not leave PHI on fax machines, copiers, desktops or work counters accessible by patients or visitors.
8. Employees must be aware of surroundings and conduct conversations with patients as quietly and privately as possible.

RELATED POLICY:

Release of Records Policy and Procedure  
BVCAA, Inc. Computer Use Policy

REFERENCES:

HIPAA regulations

REQUIRED BY:

Federal HIPAA regulations

ATTACHMENTS/ENCLOSURE

**POLICY/PROCEDURE TRACKING FORM**

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	06/26/14	07/08/14	07/08/14	
<b>Date of Revision</b>	<b>Description of Changes</b>			
June 2014	Updated to reflect HIPAA/HITECH Act rules			