

SUBJECT: USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION - GENERAL RULES	REFERENCE #1001
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	REVISED:

DEFINITION:

- An individual’s right of access generally applies to the information that exists within a covered entity’s designated record set(s), including:
 - A healthcare provider’s medical and billing records
 - A health plan’s enrollment, payment, claims adjudication, and case or medical management record systems
 - Any information used, in whole or in part, by or for the covered entity to make decisions about individuals
- A record is any item, collection or grouping of information that includes protected health information (PHI) and is maintained, collected, used, or disseminated by or for the covered entity. See 45 CFR § 164.501 (definition of “designated record set”).
- The right of access applies regardless of the information’s format. The term “designated record set”, therefore, cannot be limited to information contained in an electronic record, but also will include any non-duplicative, electronic or paper-based information that meets the term’s definition.

POLICY:

_____ shall protect the privacy of individual protected health information. Because of this, the amount of information accessible in response to a request for information is limited to the purpose or need for the information.

PROCEDURE:

- Determine if the request for individual protected health information is permitted. Permitted reasons include:
 - In response to a request for information by the patient
 - To carry out treatment, payment or healthcare operations after receiving a consent from the patient

SUBJECT: USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION FOR MARKETING	REFERENCE #1028
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POLICY:

- _____ shall not use or disclose protected health information for marketing without a disclosure, except:
 - If the marketing communication occurs in a face-to-face encounter with the patient
 - If the marketing communication concerns products or services of a nominal value
 - If the marketing communication concerns health-related products or services of the organization or of a third party
- The organization may disclose protected health information for the purposes of marketing communications to a business associate only if the business associate is assisting the organization with the marketing communication.

PROCEDURE:

- Marketing communications must:
 - Identify the organization as the source of the communication
 - State if the organization is going to receive, either directly or indirectly, any remuneration for the communication
 - Identify how a patient may opt-out of receiving any future types of communications
 - If the communication is contained within a newsletter or similar type of general communication that is distributed to a broad base of patients, employees or other individuals opting-out does not need to be provided.

SUBJECT: ACCESS OF INDIVIDUALS TO PROTECTED HEALTH INFORMATION	REFERENCE #1038
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POLICY:

- _____ shall supply protected health information to patients upon request.
 - Information that is not supplied to the patient includes psychotherapy notes or any information compiled for use in a court of law.
 - The organization may deny providing a patient a copy of his/her protected health information if the patient is an inmate of a correctional facility and if the information could jeopardize the health, safety, security, custody or rehabilitation of the patient or other inmates, or the safety of any officer, employee or other person at the facility responsible for the transportation of the inmate.
 - A patient may be denied access to his/her protected health information if the patient is involved in research that includes treatment and he/she has consented to not have access to his/her protected health information while the research is in progress. Access to the protected health information will resume upon completion of the research.
 - A patient may be denied access to his/her protected health information if the information was obtained from a source other than the organization with the promise of confidentiality.

PROCEDURE:

- If a patient requests to read or wants a copy of his/her protected health information:
 - Determine if the patient has any grounds for the request to be denied.
 - An employee determines that the patient’s life or physical safety might be in jeopardy if he/she have access to his/her protected health information.
 - Another person’s life or physical safety might be in jeopardy if the patient has access to his/her protected health information.
 - The information contains reference to another person and this information could cause harm to that person.

SUBJECT: PHYSICAL SAFEGUARDS - DEVICE AND MEDIA CONTROLS - DATA BACKUP AND STORAGE	REFERENCE #2047
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POLICY:

_____ shall backup and store electronic protected health information while being used within the organization, so that an exact copy of electronic protected health information can be created, if necessary.

PROCEDURE:

- The organization’s leadership will determine the conditions in which a replication of electronic protected health information may need to be created. This list will be given to the Information Systems Department Director/Systems Administrator.
- The list of conditions will be reviewed prior to removing or storing any equipment.
- Specific employees identified by the Information Systems Department Director/Systems Administrator are responsible for backing up and storing electronic protected health information. These employees are:

_____	_____
_____	_____
_____	_____
_____	_____

- These employees are responsible for:
 - Logging when protected health information was backed up and stored
 - Recreating electronic protected health information before moving, removing or relocating a piece of hardware, if required
 - Creating electronic tape backups of the computer systems