

HIPAA/CONFIDENTIALITY

Protecting Client Information

What is Information?

- Verbal or recorded in any form.
- Relates to the past, present, or future physical or mental condition.
- That which identifies the individual or could reasonably be used to identify the individual.

Examples of information that could reasonably identify a person:

Name
Address
Birth Date
Social Security Number
Race

This = Protected Health Information

Why Protect Information? Ethics, Laws, and Regulations.

Mental Health Code Section 330.1748, JCAHO, 42CFR, BBA, HIPAA

- It's required
- It's a matter of respect
- It's your right and the right of others to have personal health information protected.
- Everyone who does not have a guardian and receives services has the right to **review his/her record**.

HIPAA

(The Health Insurance Portability and Accountability Act of 1996)

Privacy Notice

- Required to make this Notice available to any person who requests and must be provided to any person upon intake.
- Required to make a good faith effort to obtain a written acknowledgement from the person.
- HIPAA Notice must be posted at each site.

HIPAA Standards

- Transaction: rules for sharing electronic transactions between two parties (portability).
- Security: the rules for keeping others from getting information you didn't mean to share.
- Privacy: the rules for sharing information.

HIPAA Privacy

- Provides restrictions on uses and disclosures of PHI; how information will be used within North Country CMH or disclosed to outside parties.
- Requires North Country CMH to include certain privacy language in contracts with "Business Associates" regarding safeguarding patient information.
- Requires all covered entities have HIPAA Privacy Officer.
- Requires privacy policies and procedures.
- Requires privacy education to all employees.
- Gives the person receiving services the right to inspect and copy their record, to amend, restrict use and disclosure, file written complaints and receive NOTICE of North Country CMH privacy policies.

HIPAA Security

- Physical Safeguards (doors).
- Control of Media (Locking cabinets, screensavers).
- Technical Security (passwords, e-mail policies).

North Country Community Mental Health Security Procedures

1. Staff shall take precautions not to inadvertently disclose PHI.

2. All PHI will be kept in securely locked areas. The use of locking cabinets is required.
3. Any clinical record being removed from the filing system will be signed out.
4. Any clinical record being transported will be done in a locked case.
5. Workstations: Any client information that is being worked on should be kept from inadvertent viewing of others (i.e. Screensavers, logging off computer, turning papers over, close office door).
6. E:mail: It is never appropriate to transmit consumer names or any PHI over the Internet or Intranet or e:mail systems.
7. Downloading: Downloading of any type must not be done without the prior approval of the Network Administrator. Under no circumstances should downloaded software be installed on a PC without this approval. (This includes screensavers, pictures, games, utilities, and conference brochures.)
8. Safe Information Practices: Any person to whom information is communicated must be authorized to receive the information and have a need to know.

OTHER EXAMPLES:

- Refrain from discussing clients when within hearing range of other individuals (this includes other North Country CMH staff members). Use only first names when speaking to clients in front of others such as calling them from the waiting room.
- Keep appointment books, charts, computer screens, and other PHI out of sight.
- Dispose of all waste containing PHI (phone messages, drafts of materials, copies of bills, etc.) only by shredding.

Everyone is responsible for information security

Understand the reasons for confidentiality and agree to abide by confidentiality policies and procedures.

Keep confidential information confidential at all times.

Report suspected or known breaches of confidentiality to a supervisor and privacy/security officer.

This is not an all-inclusive list of policies or procedures involving confidentiality of protected health information. Please refer to the North Country Community Mental Health Administrative Manual or ask your Recipient Rights Officer for more details.