POLICY

Privacy of Confidential Information

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PURPOSE: The purpose of this policy is to ensure that Yakima Valley Memorial and Workforce Members protect the confidentiality and integrity of Protected Health Information (PHI) and Individually Identifiable Information (III), otherwise known as Confidential Information that has been entrusted to the organization for use and safekeeping. Yakima Valley Memorial has both ethical and legal obligations to recognize that patients, employees and donors have a right of privacy and to respect those rights.

SCOPE: *All Workforce*

POLICY: Yakima Valley Memorial Workforce Members will:

1. Protect the Privacy and Security of PHI and III by accessing and using only the information necessary to perform job related duties.

2. Act as a responsible information steward and treat all health information, financial, demographic, and lifestyle information as confidential and will:
    a. Provide patients with a current Notice of Privacy Practices.
    b. Not divulge PHI or III unless the patient or their authorized representative has properly authorized the release or the release is permitted or authorized by law.
    c. report any concerns related to the Privacy of PHI or III to:
        i. immediate supervisor
        ii. Compliance-Integrity Hot Line
        iii. Patient Safety Alert System
        iv. Privacy Office
        v. Information Security Officer
        vi. Vice President of Quality and Compliance

3. Investigate patient and Workforce Member concerns or complaints of potential breaches of Privacy and Security.

4. Not access the PHI or III of friends or family members, including minor children. A patient may submit written authorization to allow an individual to obtain a copy of their medical record through the Release of Information process or be granted access to their information as publically offered by YVM, e.g. via the Patient Portal.

5. Not access their own PHI unless granted access to their information via the Patient Portal. A Workforce Member may obtain a copy of their medical record through the Release of Information process.

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6. If PHI needs to be transported to locations other than Yakima Valley Memorial sites for patient care or business related reasons, the PHI must be kept secure and within the Workforce Member's direct control.

7. The Privacy Office will perform routine auditing of accesses made to the electronic medical record, including regular review records of audit logs, access reports, and incident tracking reports. The Privacy Office may perform these audits as part of a routine plan, following patient or Workforce Member complaint, based on the status of a patient (i.e. family member, media coverage, co-worker or VIP), or other circumstances. Any questionable accesses will be further investigated. YVM Workforce Members and Business Associates are required to cooperate with an investigation.

DEFINITIONS:

Breach means the acquisition, access, use or disclosure of Protected Health Information (PHI) in a manner not permitted under the privacy regulations, which compromises the security or privacy of the PHI.

Business Associates shall mean an outside entity or person who or which:

1) on behalf of Yakima Valley Memorial creates, receives, maintains or transmits PHI for a function or activity regulated by HIPAA including but not limited to claims processing or administration; data analysis, processing or administration; utilization review; quality assurance; patient safety activities; billing; benefit management; practice management; and re- pricing; or 2) provides services such as but not limited to legal, actuarial, accounting, consulting, data aggregation; management, administrative, accreditation or financial services, where the provision of services involves the disclosure of PHI to the person or entity.

Confidential Information is defined to include any of the following:

- Protected Health Information (PHI)
- Individually Identifiable Information (III)

Covered Entity: Health plans, clearinghouses and health care providers that conduct billing and claims payments electronically, among other "standard transactions."

Disclosure: Release of PHI in any form (written, oral, or electronic) to a person or entity not a part of Yakima Valley Memorial. Release of PHI to Yakima Valley Memorial Employee Self- Insured Health Plan or to Yakima Valley Memorial's employer operations is considered a disclosure.

Health Information: Any information, whether oral or recorded in any form or medium, that is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and 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.

HIPAA shall mean the Health Insurance Portability and Accountability Act of 1996, and its corresponding regulations issued under 45 CFR Parts 160– 164.

Individually Identifiable Information means information that: identifies an individual, or which might be used to identify an individual (including the individual's name, address, names of relatives, employer, date of birth, telephone or fax number, e-mail address, social security number, patient identification

number, certificate or license number, web URL, IP address, finger and voice prints, photographic image or other unique identifying number, characteristic or code).
Patient Portal: Software application that allows patients to interact and communicate with YVM providers.

Privacy: An individual's right to expect that personally identifiable health information will be used only for the purposes for which it was provided or generated.

Protected Health Information (PHI): is any information, including demographic information that has the potential of tying the identity of the patient to their health record. Applies to information transmitted or maintained in any form or medium, including electronic, paper, and oral. It is the subset of individually identifiable health information to which the privacy protections of the HIPAA Privacy Regulations and rights of individuals apply. (This term does not include educational records governed by FERPA, and employment records.)

Security: The ability to control access and protect health information from accidental or intentional disclosure to unauthorized persons and from alteration, destruction, or loss.

Standard Transactions: When computers are used to perform certain interactive business transactions (tasks) without human intervention, it is referred to as "electronic data interchange" or "EDI." Certain EDI transactions between providers and payers have been standardized under federal law: claims, claim payment, claim status report, coordination of benefits, eligibility inquiries and responses, enrollment and disenrollment in a health plan, premium payments, referral certification, and claims attachments. 45 C.F.R. Part 162.

Use: Refers to a covered entity's internal utilization of protected health information. Covered entities are not insulated from compliance merely because they are sharing or otherwise using such information strictly with colleagues and co-workers.

Vendor: Vendor shall mean an outside contractor who does not have Yakima Valley Memorial as his or her primary site of operations.

Workforce: All individuals working on behalf of *Yakima Valley Memorial Hospital*, including staff and non-staff.

REFERENCES: (Note: Regulatory references should only be listed above)

KEYWORD Indexes: HIPAA, Confidentiality, PHI, Privacy

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YAKIMA VALLEY MEMORIAL

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