 <p>Heritage Provider Network &amp; Affiliated Medical Groups</p>	Program: HIPAA Compliance			
	Policy No.	Effective Date: 01/01/2012	Page - 1 -	
	Authored by: Compliance Sub Committee	Date: 01/01/2012	Revised by: Sandy Finley	Date: 02/02/2015
	Approved by: Compliance Committee	Date: 02/02/2015		
Title of Policy: Confidentiality of Member Information				

**PURPOSE:**

To ensure the privacy of medical information is in compliance with local, state, and federal laws, rules, and regulations which govern the release of medical information.

**POLICY:**

It is the policy of Heritage Provider Network and its Affiliated Medical Groups (HPN) to recognize and protect the right of privacy as set forth in the HIPAA Privacy Standards and the Confidentiality of Medical Information Act, which govern the release of patient-identifiable information by hospitals and other health care providers.


**RESPONSIBILITY:**

Compliance Officer, Corporate Compliance Officer, All Employees, and All Business Associates

**PROCEDURES:**

**I. Confidentiality of Patient Information**

1. HPN complies with federal and state laws and regulations, including HIPAA, regarding the confidentiality of patients’ medical, financial, personal, and other information regarding the member.
2. In order to ensure the confidentiality of patient information, HPN takes all efforts to educate both members and employees of their rights and responsibilities regarding the access and disclosure of patient health information (PHI) (please refer to HPN’s “Confidentiality Related to PHI” policy).
3. HPN adheres to HIPAA federal regulations in that only the “minimum necessary” information is disclosed regarding a patient issue.
4. HPN further protects against any unauthorized or inadvertent disclosure of information to any individual who does not have an identifiable need for the information. Access to PHI is restricted and only available to authorized users and follows the procedures as listed in the HPN “Confidentiality Related to PHI” policy.

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5. HPN follows all federal and state laws in the event a third party requests a release of a member's PHI. Legal requests such as subpoenas or court orders are immediately directed to the Compliance Officer and will be handled according to the Release of Medical Information policy.

## II. Confidentiality Policies and Procedures

1. HPN ensures that all of its Medical Groups and their employees are compliant with HIPAA policies and procedures by conducting audits on each group's electronic data on a semi-annual basis (HIPAA Compliance Oversight policy).
2. HPN further ensures that all covered entities, including employees, contractors, and business associates, are trained on the policies and procedures with respect to PHI required by HIPAA and the HITECH Act by providing new hire training (for new employees) and ongoing training to ensure entities are aware, knowledgeable, and in compliance. HPN informs all entities of any written revision and/or changes in the Confidentiality policies and procedures (Employee Privacy Orientation and Training policy; HIPAA Compliance as it Relates to Business Associates policy).

## III. Compliance Officer

1. HPN requires the adherence of all policies regarding the confidentiality of PHI and makes it the responsibility of the Compliance Officer to ensure that all entities are in compliance.
2. The Compliance Officer also has the responsibility of overseeing all ongoing activities related to the development, implementation, maintenance of, and adherence to the organization's policies and procedures cover the privacy of, and access to, patient health information in compliance with federal and state laws and the healthcare organization's information privacy practices. Further information regarding the Compliance Officer's duties may be found in the job description of the Compliance Officer.

### REFERENCE:

Compliance Officer Job Description; Confidentiality Related to PHI Policy; Employee Privacy Orientation and Training Policy; HIPAA Compliance as it Relates to Business Associates Policy; HIPAA Compliance Oversight Policy