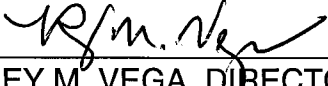


<b>Guam Behavioral Health and Wellness Center</b>		
TITLE: Consumer Privacy, Confidentiality & Release of Information	POLICY NO.: AD - 16	PAGE: 1
APPLICABILITY: Administrative	REFERENCES: HIPAA Privacy Rule	
APPROVED BY:  REY M. VEGA, DIRECTOR	EFFECTIVE: <b>JUL 18 2016</b>	
	REVISED:	

**POLICY:**

- A. The Guam Behavioral Health and Wellness Center is committed to protecting the privacy of its consumer and ensuring that the personal information it receives from consumers are kept safe, secure, confidential, accurate and up to date.
- B. GBHWC employees who have access to the Electronic Behavioral Health Record, shall abide by the Health Insurance Portability and Accountability Act (HIPAA) in protecting the privacy of its consumer, and is bound by ethical standards and HIPAA Privacy Rule.
- C. Access to client information is limited to; GBHWC employees and student interns involved in delivering direct services and personnel gathering data for quality improvement purposes and other administrative related work requiring client information.
  - a. Any GBHWC employee found unnecessarily accessing a consumer's medical record not under his/her direct care or without administrative authority shall be sanctioned and would be liable under the Health Insurance Portability and Accountability Act (HIPAA).
- D. Weekly audit of the electronic behavioral health record usage shall be conducted by MIS and or System Administrator or designee to detect any unauthorized and unnecessary activity on a consumer's medical record.
- E. GBHWC obtains client consent before collecting, using, sharing or releasing client information, except as set out in this policy or permitted or required by law.
- F. GBHWC abides by HIPAA Privacy Rule not to use or disclose protected health information, except either
  - a. As the Privacy Rule permits or requires
  - b. As the individual who is the subject of the information authorizes in writing
- G. GBHWC, may use and share consumer's personal information without a consumer authorization in accordance with the HIPAA privacy rule for the following purposes (see HIPAA rules for guidance) such as;
  - a. To the individual who is the subject of the information
  - b. Treatment, Payment, Health Care Operation such as referral for other services

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- c. "Uses and Disclosures with Opportunity to Agree or Object" such as an Informal Permission or in an emergency situation where the individual is incapacitated ( see HIPAA for additional guidance)
- d. Incidental Use and Disclosure to an otherwise permitted use and disclosure (see HIPAA for additional guidance)
- e. Public Interest and Benefit Activities such as;
  - i. Required by law (including by statute, regulation or court orders)
  - ii. Public Health Activities
  - iii. Victims of abuse, neglect, or domestic violence
  - iv. Health Oversight Activities
  - v. Judicial and Administrative proceedings
  - vi. Law Enforcement Purposes; under the following six circumstances, and subject to specified conditions:
    - 1. as required by law (including court orders, court-ordered warrants, subpoenas) and administrative requests;
    - 2. to identify or locate a suspect, fugitive, material witness, or missing person;
    - 3. in response to a law enforcement official's request for information about a victim or suspected victim of a crime;
    - 4. to alert law enforcement of a person's death, if the covered entity suspects that criminal activity caused the death;
    - 5. when a covered entity believes that protected health information is evidence of a crime that occurred on its premises; and
    - 6. by a covered health care provider in a medical emergency not occurring on its premises, when necessary to inform law enforcement about the commission and nature of a crime, the location of the crime or crime victims, and the perpetrator of the crime
  - vii. Decedents; Covered entities may disclose protected health information to funeral directors as needed, and to coroners or medical examiners to identify a deceased person, determine the cause of death, and perform other functions authorized by law.
  - viii. Cadaveric Organ, Eye. Or Tissue Donation
  - ix. Research; provided the covered entity obtains either:
    - 1. documentation that an alteration or waiver of individuals' authorization for the use or disclosure of protected health information about them for research purposes has been approved by an Institutional Review Board or Privacy Board;
    - 2. representations from the researcher that the use or disclosure of the protected health information is solely to prepare a research protocol or for similar purpose preparatory to research, that the researcher will not remove any protected health information from the covered entity, and

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that protected health information for which access is sought is necessary for the research; or

3. representations from the researcher that the use or disclosure sought is solely for research on the protected health information of decedents, that the protected health information sought is necessary for the research, and, at the request of the covered entity, documentation of the death of the individuals about whom information is sought.<sup>38</sup>
  - x. **Serious Threat to Health and Safety:** Covered entities may disclose protected health information that they believe is necessary to prevent or lessen a serious and imminent threat to a person or the public, when such disclosure is made to someone they believe can prevent or lessen the threat (including the target of the threat).
  - xi. **Essential Government Functions:** Such functions include: assuring proper execution of a military mission, conducting intelligence and national security activities that are authorized by law, providing protective services to the President, making medical suitability determinations for U.S. State Department employees, protecting the health and safety of inmates or employees in a correctional institution, and determining eligibility for or conducting enrollment in certain government benefit programs.
  - xii. **Workers' Compensation**
- f. **Limited Data Set** for the purposes of research, public health and or health care operation such as reviewing client files to ensure high quality of service and documentation for quality improvement purposes

**DEFINITION:**

Individually Identifiable health Information is information, including demographic data, that relates to: the individual's past, present or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number).

Protected Health Information: The Privacy Rule protects all "*individually identifiable health information*" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information "protected health information (PHI)."

Limited Data Set: A limited data set is protected health information from which certain specified direct identifiers of individuals and their relatives, household members, and employers have been removed

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**REFERENCES:**

Summary of the HIPAA Privacy Rule; <http://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/>

**SUPERSEDES:**

A. Title; Policy No.; Effective date/signature date; Approving individual's name