

# Psychological Addiction Services

## HIPAA

### Policy#3.6

#### HISTORY:

In 1996, the Health Insurance Portability and Accountability Act was signed into law. The purpose of HIPAA is to establish a set of national standards for the protection of certain health information.

The US Department of Health and Human Services issued the Privacy Rule to implement the requirement of HIPAA.

Privacy Rule standards addresses the use and disclosure of the individuals health information called “protected health information” (PHI) by organizations subject to the Privacy Rule – called “covered entity” as well as standards for the individuals privacy rights to understand and control.

**The Office of Civil Rights (OCR)** has responsibility for implementing and enforcing the Privacy Rule with respect health information in electronic form.

**The Privacy Rule** applies to all health plans health care clearing houses and to any health care provider who transmits health in electronic form.

Health care providers regardless of size, who transmit health information in connection with certain transactions is covered entity. These transactions include claims, benefit eligibility inquires, referrals, authorization requests, or other transactions that HHS has established standards under the HIPAA Transactions Rule. Use of E-Mail services does not mean a health care provider is a covered entity; the transmission must be in connection with a standard transaction.

**The Privacy Rule** covers a health care provider whether it electronically transmits these transactions directly or uses a billing service or third party to do so on their behalf.

**Health Care Providers include** all “providers of services” hospitals, physicians, dentists and other “Providers of Medical or Mental Health Services” and any other person or organization the furnishes bills, or is paid for health care services.

**Business associate** is a person or organization other than the covered entity’s workforce that performs functions or activities on behalf of, or provides certain services to covered entity that involves the use of disclosure of individually identifiable health information.

**Individually identifiable** health information, including demographic data that related 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 can be used to identify the individual. Individual identifiers include common identifiers for ex. name, address, birthdate, social security number. The Privacy Rule protects all individually identifiable health information held or transmitted by a covered entity or business in any for of media, whether electronic, paper or oral. This information is called “protected health information” (PHI).

**Basic Principle of the Privacy Rule** is to define and limit the circumstances in which an individual’s protected health information may be used or disclosed by covered entities.

**Required Disclosures:** An entity must disclose protected health information in only two situations:(a) to individuals (or their personal representatives) when they request access to, or an accounting of disclosures of, their personal protected health information; and (b) to HHS when it is undertaking a compliance or review or enforcement action.

**Permitted Disclosures:** without an individual’s authorization may be done for the following purposes (1) To the Individual, (2) Treatment, Payment, and Health Care Operations (3) Opportunity to agree or object (4) incident to n otherwise permitted use and disclosure (5) Public Interest and benefit Activities (6) Limited Data for research purposes, public health or health care operations.

**Minimum Necessary:** Only the minimum amount of protected health information necessary to accomplish the intended purpose of use shall be disclosed. A complete medical record may not be released unless necessary to accomplish a certain task.

**Acknowledgement of Notice Receipt:** Any covered health care provider with a direct treatment relationship with individuals must make a good faith effort to obtain written acknowledgement from patients of receipt of the privacy practices notice.

