## SOUTHERN LEHIGH SCHOOL DISTRICT

SECTION: CLASSIFIED EMPLOYEES

TITLE: PRIVACY OF INDIVIDUALLY

IDENTIFIABLE HEALTH

**INFORMATION** 

ADOPTED: 12/05/2005

REVISED: 09/12/2016

### PRIVACY OF INDIVIDUALLY IDENTIFIABLE HEALTH INFORMATION

#### 1. Purpose

This policy is intended to promote awareness of the confidential nature of the medical information that is collected, maintained and disseminated by the group health plans (the "Plans") sponsored by the Southern Lehigh School District (the "District"). The Plans are considered "group health plans" and "covered entities" under the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder. This policy and those procedures reflect the commitment of the District to protecting the confidentiality of its plan participants' private health information or "PHI".

#### 2. Structure

This Privacy Policy shall be overseen by the Privacy Official, who shall report on privacy issues, as needed, to the Superintendent. The Privacy Official shall be appointed by the Superintendent and shall have authority and responsibility for implementation and operation of the policy and will have the discretion to delegate any of his or her responsibilities or functions to another individual (the "Designee").

## 3. Applicability

This Privacy Policy will apply to all group health plans sponsored by the District.

# 4. Designated Record Set

The Designated Records Set of the District will include all information in the files maintained by the Business Office. These files may include information about claims and enrollment in the Plans.

## 5. Collection and Receipt of Protected Health Information

The Plans will collect only the minimum necessary protected health information ("PHI") that is needed for the particular purpose for which it is collected. The following District employees will be permitted to receive and/or have access to PHI: the Human Resources Administrator and Business Office staff. The Privacy Official shall make the final determination, if necessary, of information that may be requested or received.

# 6. Access to Protected Health Information by Plan Participants

The Plans will provide all plan participants with the right to access and copy their own PHI that has been collected and is maintained by the Plans (see (4) above, "Designated Records Set"). Requests shall be made in writing to the Privacy Information Officer. Reasonable copying fees may be charged by the District. This right of access does not apply to information compiled in anticipation of disciplinary action, or a criminal or civil legal action.

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7. Amendment of Protected Health Information	The Plans will allow plan participants to request amendment of any PHI that is created and/or maintained by the Plans with respect to that plan participant. All requests shall be made in writing to the Privacy Officer. PHI that was not created by the Plans or that is accurate and complete, as determined by the privacy Official or the Designee, is not subject to amendment.
8. Uses and Disclosures of Protected Health Information	The Plans, the Plan Sponsor and/or any business associate of the Plans will use and disclose the PHI they create, collect and/or maintain for the following purposes: to enroll employees and their dependents in the Plans or to make changes to one of these enrollments; to evaluate renewal proposals or new health plan or reinsurance vendors; to conduct cost-management and planning-related analyses such as formulary development and administration and development or improvement of payment methods; and to perform any related functions.
	All PHI collected by the Plans will be disclosed only to the following "valid recipients" or in the following situations: (1) to the plan participant; (2) if the plan participant is a minor, to the plan participant's parent or legal guardian; (3) to an insurance company, reinsurance company, TPA or a business associate of the Plans, (4) to the plan participant's representative, agent, or any other person with a signed authorization from the plan participant; (5) in response to legal process: (6) to investigate possible insurance fraud; (7) to help settle a claim dispute for benefits under a medical benefit plan or insurance policy; or (8) to the Plan Sponsor, in accordance with provisions of HIPAA.
	PHI will not be discussed in an open area; documents containing PHI shall be inaccessible to employees other than those named specifically under (5) above.
9. Notice of Privacy Practices	It is the Policy of the Plans to maintain and provide to all plan participants upon request a Notice of Privacy Practices that describes the Plans' required and permitted uses and disclosures of PHI, all individual rights with respect to PHI and any other required information.
10. Training	The Privacy Official, or the Designee, will train, or oversee training for, all current staff and new employees on the requirements of this Privacy Policy.
11. Complaints	The Plans will accept and respond to complaints relating to this Privacy Policy, procedures, and compliance efforts relating to the privacy of PHI.
12. Recording	The Plans will retain all documentation related to this Privacy Policy for a minimum of six (6) years from the date the documentation was created or the date that it was last in effect, whichever is later.
13. Sanctions	The Plan Sponsor, on behalf of the Plans, will appropriately discipline any staff member who fails to comply with this Privacy Policy.

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14. Mitigation of Wrongful Disclosures	The Plans will attempt to mitigate any disclosures of PHI that are in violation of this Privacy Policy by, for example, requesting return of any written PHI that was improperly disclosed, or by admonishing the recipients of any wrongly-disclosed PHI of their obligation not to further disclose the PHI.
15. Refraining from Intimidating or Retaliatory Acts	It is the policy of the Plans to prohibit any intimidation, threats, coercion, discrimination or other retaliatory acts against any person for the exercise of his or her rights under this Privacy Policy, for filing a complaint with the Department of Health and Human Services, or for assisting in an investigation of any act made unlawful by the Health Insurance Portability and Accountability Act.