

FERNDALE AREA SCHOOL DISTRICT

SECTION: OPERATIONS

TITLE: PRIVACY OF HEALTH
INFORMATION (HIPAA)

ADOPTED: MARCH 17, 2004

REVISED: FEBRUARY 21, 2007

<p>1. Purpose</p> <p>20 U.S.C. Sec. 1232g 34 CFR 99</p> <p>45 CFR 160 et seq</p> <p>2. Delegation of Responsibility</p>	<p style="text-align: center;">826. PRIVACY OF HEALTH INFORMATION (HIPAA)</p> <p>It shall be the policy of the Board to protect and safeguard the protected health information (PHI) created, acquired, and maintained by the district, consistent with the Standards for Privacy of Individually Identifiable Health Information (Privacy Rule), pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), any case law arising from the interpretation thereof, and applicable state laws.</p> <p>For purposes of this policy, all health information created and maintained by the district and its agents that is considered part of a student’s education record under FERPA (Family Educational Rights and Privacy Act) is not subject to this policy.</p> <p>The Board and administration recognize that, as an employer and health plan sponsor, and a provider of health care services, certain components within its organization engage in HIPAA-covered functions and must comply with the HIPAA Privacy Rule; however, there are other components of the district that engage in noncovered functions and are not required to comply with the HIPAA Privacy Rule. Therefore, the district hereby designates itself as a “Hybrid Covered Entity” under HIPAA and its rules and regulations.</p> <p>The Board shall designate the Business Manager as the district’s Privacy Officer, who will undertake the following tasks to ensure compliance with the HIPAA Privacy Rule:</p> <ol style="list-style-type: none"> 1. Conduct a thorough initial assessment of all existing policies, procedures, and practices for creating, maintaining, using, disclosing, and destroying health information to determine where the gaps may be with respect to meeting HIPAA and/or FERPA standards, and as to whether there are reasonable administrative, technical, and physical safeguards to protect the privacy of health information. 2. Draft, adopt, and maintain administrative policies and procedures to allow the district to meet the requirements of the HIPAA Privacy Rule as they may apply to the employee health plan and/or its other covered component(s).
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<p>3. Guidelines</p>	<ol style="list-style-type: none">3. Draft and adopt a Notice of Privacy Practices that describes, among other things, the uses and disclosures that the district is permitted or required to make under the HIPAA Privacy Rule, its obligations under HIPAA, and the rights related thereto for employees, students, and/or other individuals who may receive services from the district's covered component(s).4. Draft and adopt HIPAA-compliant written authorizations to use or disclose PHI for purposes unrelated to treatment, payment, health care operations, and other designated purposes under the HIPAA Privacy Rule.5. Identify business associates and enter into business associate agreements with all third parties that access PHI when providing services on behalf of the district in relation to its employee health plan and/or health care provider components.6. Establish a training program for all members of the district workforce on HIPAA and the Board's policies and procedures, as necessary and appropriate for said employees to carry out their functions. Such training program shall include refresher courses.7. Develop a process for handling complaints, including the designation of a specific individual to handle such complaints and appropriate procedures for documenting said complaints and the disposition thereof. <p>The Privacy Officer, in conjunction with the Superintendent, shall ensure the appropriate development and implementation of sanctions against those members of the workforce who fail to comply with this policy.</p> <p>In addition to ensuring that Board policies and procedures are adopted and implemented to ensure compliance with the HIPAA Privacy Rule, the Board and administration will mitigate, to the extent possible, any harmful effects of improper disclosures of PHI and will refrain from any activity that may intimidate, threaten, coerce, discriminate against, or retaliate against an individual for exercising his/her rights under HIPAA.</p> <p>This policy and any administrative procedures developed and implemented under the authority of the Privacy Officer shall replace any existing policies and procedures relating to the use and disclosure of PHI. Any separate policies and procedures relating to the use and disclosure of health information may only be maintained to the extent that they do not conflict with this policy.</p>
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