

## **Policies for the Use and Disclosure of Protected Health Information (PHI)**

It is our obligation as a Healthcare Provider to keep clients' Protected Health Information (PHI) confidential, whether the information is transmitted verbally, on paper, or electronically. Jewish Family Services maintains a confidentiality policy that is in keeping with the Health Insurance Portability and Accountability Act of 1996 (HIPAA, see Appendix H), the Ethical Code of Social Work, and the laws of the State of Virginia. All staff members, interns, and volunteers are trained in and obliged to abide by these regulations. JFS maintains a written record that training has been provided. Confidentiality must be included in the orientation of every new staff member, intern, and volunteer.

All Jewish Family Services employees perform a variety of duties that bring them into necessary contact with PHI. This includes filing of charts, intake interviews, and staffing the client greeting and waiting area. Thus, all employees have access to PHI and are properly trained in the privacy regulations and procedures.

### **Disclosure of Protected Health Information**

All Protected Health Information is to be kept confidential unless the client completes a signed and properly-dated Authorization for Use and Disclosure for PHI . (See Appendix F1 ). **If the client is deemed unable to give informed consent, such as in the case of a mentally disabled adult, legal guardian will have to give the consent to release information.** In situations where unauthorized disclosure is needed, such as that of a subpoena or life-threatening emergencies, the decision to disclose will be based on the more restrictive standard in either the Ethical Code of Social Work or HIPAA

(Appendices E and H). However, even in such situations, an attempt to obtain authorization is preferred, if possible. A log will be maintained in each client's PHI that accounts for all disclosures of information, except routine disclosures for client billing and health insurance billing purposes (See Appendix F4).

Jewish Family Services may Disclose Protected Health Information to a Business Associate and allow the Business Associate to create or receive Protected Health Information on Jewish Family Services' behalf if Jewish Family Services has entered into a written contract under which the Business Associate appropriately safeguards the Protected Health Information. JFS has determines those entities which fall under the category of Business Associate and enters into Business Associate Contracts (see Appendix F2) with these entities. These contracts are maintained in both electronic and hard-copy form by the Privacy Officer.

Disclosure of PHI will be limited to the minimum necessary to achieve the purpose of the disclosure. Any question about what is minimum necessary will be answered via consultation with the Privacy Officer, Directors of Homecare and Psychological Services, and consultation of the appropriate ethical codes and HIPAA regulations.

Clients have the right to know how their PHI is used, disclosed, and protected. Each client receives, prior to their first session, a copy of the JFS Notice of Privacy Practices (see Appendix F3). Vocational counseling clients do not receive this notice, as their service does not fall under HIPAA regulations, but their records are subject to the normal confidentiality requirements that govern the field of social work. The client will be asked to sign a written acknowledgement of receipt of the Notice of Privacy Practices

(see Appendix F3a). Where clients may not be able to read English or understand the Notice, JFS will make arrangements to translate or explain the practices in a fashion that is understandable to the client.

Any changes in HIPAA or in state regulations or ethical codes will be immediately entered into this manual and into the JFS Notice of Privacy Practices. Amended Privacy Practices will be made available to all clients by request on or after the day of revision. Furthermore, a copy of the JFS Notice of Privacy Practices will be posted in an area accessible and in full visibility of clients, and one will be prominently posted on the JFS web site and made available electronically through the web site.

Clients have the right to request restrictions of disclosures revocation of authorizations, amendments of PHI, access to PHI, copies of PHI, and accountings of PHI disclosures. Furthermore, JFS will accommodate reasonable requests by patients to receive communications of Protected Health Information (Appendices F 5-9) by alternative means or alternative locations. All such requests will be reviewed by the Privacy Officer and either the Director of Homecare or the Director of Psychological Services, depending on what service the client was receiving. These decisions will be made in accordance with the Ethical Code of Social Work and HIPAA. All such decisions will be issued in writing to the client and will be documented in the client's PHI, as well as in a separate record log. Additionally, all complaints and rebuttals from the client will be included in the PHI, as well as in a separate complaint log, maintained by the Privacy Officer.

The use of case material for research and/or publication shall be limited to professional staff and interns under agency supervision. All PHI used for such purposes

will be handled in accordance with the Ethical Code of Social Work and HIPAA, including the de-identifying of PHI. Similarly, authorization will be required before any marketing materials are sent to clients, or when client information is used for marketing purposes.

Jewish Family Services designates a Privacy Official who is responsible for the development and implementation of the policies and procedures of Jewish Family Services, for receiving complaints regarding its compliance with the HIPAA privacy regulation and who is able to provide further information about matters covered under its Notice of Privacy Practices. JFS maintains a written and electronic record of these personnel designations for six (6) years from the date of their creation or the date when they were last in effect, whichever is later.

Jewish Family Services will apply appropriate sanctions against members of its workforce who fail to comply with its privacy policies and procedures or the requirements of the HIPAA privacy regulation. In addition, Jewish Family Services will maintain a written or electronic record of the sanctions that are applied, if any (see Appendix F11). Jewish Family Services will retain such documentation for six (6) years from the date of a sanction's creation or the date when it last was in effect, whichever is later.

Jewish Family Services will mitigate, to the extent practicable, any harmful effect that it knows of regarding a Use or Disclosure of Protected Health Information in violation of its privacy policies and procedures or the requirements of the HIPAA privacy regulation by its workforce or a Business Associate.