

Policy/Procedure	Description
<b>Privacy Policies</b>	
Verification of the Identity and Authority of the Individual Requesting Disclosure of PHI Policy	The purpose is to describe the situation in which an organization's employees may disclose Protected Health Information (PHI) and in each case the employee making the disclosure must verify the individual requesting the information is authorized to receive it.
Safeguarding Transmission of PHI to External Vendors or Entities Policy	The purpose is to ensure that Protected Health Information (PHI) transmitted outside of the organization to other businesses under contract with the organization is protected and limited to that information needed for providing clinical and administrative services.
Confidentiality of Health Information Related to Minors Policy	The purpose is to ensure that the organization's employees abide by the rules and regulations set forth by state laws related to confidentiality of health information for minors.
Designated Record Sets Policy	The purpose is to designate what is considered a record set of the organization for purposes of accessing and amending Protected Health Information (PHI).
Minimum Necessary Policy	The purpose is to establish the general rule regarding the minimum necessary limitation on the use or disclosure of Protected Health Information (PHI) as set forth by the HIPAA Privacy Rule (45 CFR 164.502(b), 164.514(d)).
Reporting of Accidental or Intentional Disclosures to Self-Funded Groups Policy	The purpose is to report accidental or intentional disclosures to all self-funded groups.
Revocation of an Authorization Policy	The purpose is to ensure that employees abide by the requirements set forth by the HIPAA Privacy Rule (45 CFR 164.508) as well as policies developed by the organization.
Routine and Recurring Disclosures of PHI Policy	The purpose is to establish the disclosures of PHI that are routine and recurring.
Safeguarding PHI Policy	The purpose is to establish guidelines to help safeguard PHI from being seen, heard or disclosed to those who are not authorized to see or hear it as set forth by the HIPAA Privacy Rule (45 CFR 164.530(c)), as well as other policies developed by the organization.

Use and Disclosure of Protected Health Information (PHI) for Treatment, Payment, and Healthcare Operations Policy	The purpose is to set forth the circumstances in which the organization and its personnel may use and disclose protected health information (PHI) for treatment, payment, and Health Care Operations (TPO), and when patient authorization is required to do so.
Access to PHI Policy	The purpose is to describe the right that members have to inspect or to receive a copy of their Protected Health Information (PHI) in the organization's records as set forth by the HIPAA Privacy Rule (45 CFR 164.524). Some exceptions apply, as defined further in this policy.
Accounting of Disclosures Policy	The purpose is to describe the right individuals have to receive an accounting of disclosures of their Protected Health Information (PHI) as set forth by the HIPAA Privacy Rule (45 CFR 164.528).
Requests to Amend Records Policy	The purpose is to describe the process for a patient/member to amend their record.
Uses and Disclosures of PHI Requiring Patient/Member Authorization Policy	The purpose is to ensure that the member of the workforce making the disclosure will verify the individual requesting the information is authorized to receive it as set forth by the HIPAA Privacy Act (45 CFR 164.514(h)).
Use and Disclosure of Mental Health Information Policy	The purpose is to describe the appropriate use and disclosure of mental health information.
Disclosures of Protected Health Information (PHI) Relating to Communicable Diseases Policy	The purpose is to describe when the organization's personnel may disclose a patient's Protected Health Information (PHI) relating to a communicable disease.
Use and Disclosures of Protected Health Information (PHI) for Health Oversight Activities Policy	The purpose is to describe when the organization's personnel may disclose a patient's Protected Health Information (PHI) for the purposes of health oversight activities.
Disclosures of Protected Health Information (PHI) To Law Enforcement Officials Policy	The purpose is to set the requirements that the organization's personnel will meet before disclosing a person's Protected Health Information (PHI) to law enforcement officials.
Disclosures of Protected Health Information (PHI) Relating to Judicial and Administrative Proceedings Policy	The purpose is to set the rules for the organization's personnel to disclose Protected Health Information (PHI) in connection with judicial and administrative proceedings.
Use or Disclosure of Protected Health Information (PHI) for Marketing Purposes	The purpose is to describe the reasons for which patients can be contacted, and Protected Health

Policy	Information (PHI) is used or disclosed, for marketing purposes that is conducted by or on behalf of the organization.
Facility Directory (Patient Census) Disclosures for Inpatients Policy	The purpose is for the organization personnel to understand who they may include in the Facility Directory, and to whom this information may be disclosed.
Access, Use, Disclosure and Safeguarding PHI in the Conduct of Research Policy	The purpose is to describe the access, use, disclosure and safeguarding of Protected Health Information (PHI) in the conduct of research.
Identifying Protected Health Information (PHI) Policy	The purpose is to define the criteria for determining when information held by the organization should be treated as Protected Health Information (PHI).
Patient/Member Requests for Restrictions of Uses and Disclosures for Treatment, Payment and Health Care Operations Policy	The purpose is to describe the process for patient/member requests for restriction of uses and disclosures for Treatment, Payment and Health Care Operations.
Patient/Member Requests for Confidential Communications Policy	The purpose is to describe patient/member requests for confidential communications.
Management of Patient Privacy Complaints Policy	The purpose is to establish a complaint process through which the organization's patients may resolve concerns about the privacy and confidentiality of their health information.
Mitigation of Harm Resulting from Unauthorized Use or Disclosure of PHI Policy	The purpose is to establish a procedure to mitigate, to the extent practicable, any harmful affect that results from an unauthorized use or disclosure of Protected Health Information (PHI).
Prohibition of Intimidating or Retaliatory Acts Policy	The purpose is to provide guidance to the organization's patients and personnel regarding prohibition of intimidation or retaliatory acts.
Confidentiality Agreement for Workforce Member Policy	The purpose is to require each member of the organization's workforce to follow confidentiality requirements and to sign the Acknowledgement of Confidentiality form.
Notice of Privacy Practices Policy	The purpose is to ensure the organization abides by the requirements set forth by the HIPAA Privacy Rule (45 CFR 164.520), state and federal laws regarding a Notice of Privacy Practices.
Sample Notice of Privacy Practices	The purpose is to describe how medical information about a patient may be used and disclosed and how

	the patient can get access to this information.
Reporting PHI Privacy Breach (Security Incidents) Policy	The purpose is to establish a process for reporting a breach of PHI privacy or a PHI (or electronic PHI – (EPHI)) security incident to the affected organization.
Intranet Policy	The purpose is to provide guidelines for ensuring the quality and security of the organization's Intranet.
HIPAA Privacy Definitions	The purpose is to provide the organization's employees with the HIPAA Privacy definitions for terms that may appear in the HIPAA Privacy policies.
Personal Representative Policy	The purpose is to define a Personal Representative for the organizations purposes.
Facsimile Transmission of PHI Policy	The purpose is to ensure that the organization's employees safeguard PHI when transmitting PHI by facsimile.

Figure 1: Summary of Privacy Policies