

GRAND RAPIDS FIRE DEPARTMENT

POLICY AND PROCEDURE

TITLE: Health Insurance Portability and Accountability Act (HIPAA) – FD101	SERIES: 100
EFFECTIVE DATE:	DATE ISSUED:
CHIEF:	DATE:

101.01 PURPOSE.

The purpose of this policy is to explain the Health Insurance Portability and Accountability Act of 1996 and its relevance to the Grand Rapids Fire Department.

101.02 POLICY.

Given the nature of our work, it is imperative that we maintain the confidentiality of patient information that we receive in the course of our work. The Grand Rapids Fire Department prohibits the release of any patient information to anyone outside the organization unless required for purposes of treatment, payment, or healthcare operations. Discussions of Protected Health Information (PHI) within the organization should be limited. Acceptable uses of PHI within the Department include, but are not limited to, exchange of patient information needed for the treatment of the patient, billing, and other essential healthcare operations, peer review, internal audits, and quality management activities. The Grand Rapids Fire Department provides services to patients that are private and confidential. Each member has a professional responsibility to respect the privacy rights of patients. It is often necessary during service delivery that patients provide PHI. This information may exist in a variety of forms such as electronic, oral, written, or photographic material. All such information is strictly confidential and protected by federal and state laws. Grand Rapids Fire Department members must comply with all confidentiality policies and procedures set in place by the department during their employment or association with the department. If a member knowingly or inadvertently breaches patient confidentiality policies and procedures at any time, the member must immediately notify the Chief of Grand Rapids Fire Department.

101.03 HISTORY

Health Insurance Portability and Accountability Act of 1996 (HIPAA) rules cover all health information, regardless of form, including electronic records, paper records, and oral communication. HIPAA rules also provide healthcare consumers with control over their health information, set boundaries on medical record use and release, ensure the security of personal health information, and establish accountability for medical record use and release. Some specific points include:

- A. Patients have the right to review and copy their medical records, as well as request amendments and corrections to these records.
- B. Healthcare providers must obtain written permission from patients before information for routine matters, such as billing and treatment, can be shared with others.
- C. Healthcare providers must tell patients to whom they are disclosing their information and how it is being used.
- D. Healthcare providers must restrict the amount of information to the "minimum necessary" to achieve the purpose of the use or disclosure.
- E. Healthcare providers must establish business practices that are "privacy-aware." Some of these practices include:
 - 1. Training staff about privacy issues - Training must be given to each employee appropriate to each job function. This applies to current employees as well as future hires. Retraining shall be given as policies and procedures change. Written records shall be kept as to whom training has been given, where, when and how.
 - 2. Appointing a "Privacy Officer" - A Privacy Official shall be appointed to develop, implement and oversee privacy policies and procedures and to train the workforce. A Privacy Contact shall also be appointed to receive complaints from patients who feel their rights have been violated. The Fire Chief will be appointed for both of these positions.
 - 3. Safeguards - Protective measures to safeguard all patients' PHI shall be taken. From the time the request for emergency medical service is received, information regarding the patient shall be kept confidential. Radio transmissions shall be secure from citizens having personal scanners. Nevertheless, Emergency Medical Service (EMS) personnel and the dispatcher shall be careful to not mention any identifying information over the radio unless it is absolutely necessary. Then, only information that is reasonably necessary to complete required duties shall be given. The EMS incident report shall be completed away from public view. All completed paperwork regarding the patient shall be placed in a locked file drawer at Grand Rapids Fire Department facilities as soon as possible after completion and shall not be left in open view prior to completion or after. A backup key will be kept in a locked file drawer. When no one is in the office containing the PHI, the door shall be locked at all times. For information that is stored electronically, a password shall be used to access the information.

101.04 COMPLIANCE:

Violation of this policy could result in disciplinary action up to and including dismissal. In addition to any other civil or criminal proceeding that could result from their actions.