

Regions Hospital

Subject	Attachments
CONFIDENTIALITY OF PATIENT/MEMBER INFORMATION - EMPLOYEE ACCESS AND USE	□ Yes ⊠ No
Key words Discipline, Acknowledgement, Privacy, Medical Records, Protected Information, Computers, Security, Data, Monitoring	Number RH-HR-HR-60-10-32
Category Human Resources (HR)	Effective Date
	August 1, 2005
Manual Human Resources	Last Review Date
	July 2011
Issued By Human Resources	Next Review Date July 2012
Applicable All Regions Hospital Employees, Vendors, Contractors, Interns, Trainees, Volunteers, Other members of the workforce for purposes of this Policy, these individuals shall be referred to as "employees"	Origination Date August 1, 2005
	Retired Date
	Not Applicable
Review Responsibility Human Resources, Corporate Integrity	Contact
	Human Resources

I. PURPOSE

The purpose of this Policy is to provide employees with specific guidance and expectations regarding the appropriate access to and use of "Protected Information" in order to perform their work. This guidance and expectations are pursuant to the Privacy Policy, which sets forth Regions Hospital's overall policies regarding the protection of Protected Information.

II. POLICY

Employees shall access Protected Information only to the extent necessary to perform their assigned duties. Employees must not use Protected Information for their individual or personal use except as specifically provided in this Policy.

All employees must exercise every reasonable precaution in safeguarding Protected Information in their possession or control. This includes, but is not limited to:

- A. Keeping confidential patient/member charts and other confidential documents and information where they will not be readily visible or accessible by unauthorized persons
- B. Not conducting conversations involving Protected Information where other employees or patients/members can overhear them (e.g., elevators, hallways, common areas, break rooms etc.)
- C. Disposing of documents that contain Protected Information in an appropriate manner designed to preserve confidentiality, (e.g., confidential document destruction containers, shredding)

COMMUNICATING PROTECTED INFORMATION

Employees must not discuss or communicate Protected Information with any other person, including a co-worker, or organization unless it is necessary in the performance of assigned duties. Protected Information must not be disclosed to parties outside the organization without appropriate written patient or member consent or authorization or as otherwise permitted in accordance with the Privacy Guidelines established pursuant to the Privacy Policy or other written privacy procedures established by the employee's Department.

MONITORING OF PROTECTED INFORMATION

Employees' access to Regions Hospital's information systems, databases and files may be monitored on a regular or occasional basis.

EMPLOYEE ACCESS TO HIS/HER PROTECTED INFORMATION

Employees may, *on a limited basis*, access their own Protected Information (e.g., own medical or dental record, appointment schedule information, pharmacy information, claims information, etc.) through Regions Hospital's systems or files. However, such personal access shall only be on an incidental and occasional basis and shall not interfere with normal business activities or adversely impact the employee's or a co-worker's job performance. In addition, employees may not modify, print, copy, or forward their Protected Information or in any way perform transactions involving their own Protected Information. Thus, employees' access to their own Protected Information via Regions Hospital's systems is permitted on a *view only* basis.

An employee may not use employment at Regions Hospital to access his/her Protected Information either directly or indirectly by asking another employee to access this Protected Information. An employee's ability or permission to access any Employer system containing Protected Information is dependent upon whether that person's job responsibilities require such system access. Accordingly, employees may not request or receive access rights to systems that contain his/her Protected Information for the purpose of viewing his/her information.

EMPLOYEE ACCESS TO PROCTECTED INFORMATION OF FAMILY MEMBERS

Protected Information about employees' family members, including minor children, must be treated in the same manner as that of other patients/members. The employee may not gain access to a family member's Protected Information as a result of his/her employment with Regions Hospital.

If an employee wishes to access the medical record, any medical information, laboratory results, appointment schedule information, pharmacy information, claims information, or any Protected Information of which his/her family member (including a minor child) is the subject, the employee may only access this information as would a non-employee patient/member – for example, with required written authorization from the family member through Member Services or the clinic, or, in the case of information available on-line, through member or patient portals.

An employee may not use employment at Regions Hospital to access the Protected Information of his/her family members either directly or indirectly by asking another employee to access this Protected Information.

EMPLOYEE ACCESS TO PROCTECTED INFORMATION OF CO-WORKERS

Protected Information about employees of Regions Hospital must be treated in the same manner as that of other patients/members. The employee may not gain access to another employee of Regions Hospital confidential patient/member information as a result of his/her employment with Regions Hospital. Employees may only access such Protected Information if it is necessary in the performance of the employee's assigned duties.

EMPLOYEE ACCESS TO PROTECTED INFORMATION FOR TRAINING

Employees may not access or use Protected Information of family members or co-workers for training purposes, except with the written authorization of the family member/co-worker and with the express approval of the employee's supervisor.

III. PROCEDURE(S)

Several of Regions Hospital's information systems and databases contain built-in security functions to automatically monitor inappropriate access to Protected Information and supervisors/managers receive reports on such access. Systems without automatic security functions may be monitored manually.

Departments may institute special operating procedures for managing Protected Information of coworkers.

DISTRIBUTION

All new employees are informed about confidentiality and this Policy during New Employee Orientation and shown where to access this Policy in Compliance 360. Employees must sign the Orientation Outline indicating that the employee has received information on confidentiality.

If a new employee does not attend New Employee Orientation, this will be covered during a 1:1 session with Human Resources. The Employee must sign the Orientation Outline as stated above. The Orientation Outline will be retained in the employee's personnel file in Human Resources.

SUPERVISOR/MANAGER RESPONSIBILITY

Supervisors/managers are responsible for ensuring that all employees are aware of this Policy and for periodically reviewing this Policy with employees under their supervision.

It is recommended that for employees whose job requires regular access to Protected Information this Policy be reviewed at least on a yearly basis and that the supervisor/manager have the employee sign the Standards of Conduct Form on a yearly basis.

Supervisors/managers are responsible for reviewing and monitoring reports regarding employees' access to Protected Information.

Supervisors/managers are responsible for the daily administration of this Policy.

IV. DEFINITIONS

"Protected Information" means information, including demographic, health or financial information that:

- A. Identifies (or could reasonably be used to identify) a patient or member; and
- B. Is not generally known by or made available to the public; and
- C. Is collected or received by or on behalf of Regions Hospital (or any related organization) from
 - 1. a member (or his/her authorized representative);
 - 2. a patient (or his/her authorized representative);
 - 3. a member's or patient's health care provider or his/her agents; or
 - 4. a member's or patient's third party payer or health plan sponsor or his/her agents; and
- D. Relates to or facilitates the past, present or future physical or mental health condition of the member or patient, or the past, present or future provision of health care to the member or patient.

"Protected Information" includes, but is not limited to:

- A. Information contained in medical, dental, eye, mental health, or other patient charts
- B. Information contained in Health Plan files, e.g., Claims, Membership Accounting, Member Services, etc.
- C. Information contained in electronic systems and databases, e.g., electronic medical or dental records, Claims databases, Patient Accounting databases, Membership Accounting databases, Member Services databases, etc.
- D. Appointment schedules
- E. Other Protected Information maintained by Regions Hospital in conducting it business

Protected Information may be recorded or unrecorded, oral, written, or electronically stored.

V. <u>COMPLIANCE</u>

Failure to comply with this Policy or the procedures may result in disciplinary action, up to and including termination.

VI. ATTACHMENTS

NOT APPLICABLE

VII. OTHER RESOURCES

In addition to compliance with this Policy, an employee must also comply with any additional policies, procedures, or protocols that are established for the employee's specific job and/or area.

Policy on Privacy and Protection of Patient and Member Information ("Privacy Policy) - Cl002

Code of Conduct

Discipline for Breaches of Privacy and Privacy Policies – RH-HR-HR 60-10-31

Privacy Guidelines for Care Delivery, Health Plan and Health Research

VIII. APPROVAL

Beth Heinz, Vice President of Operations

IX. ENDORSEMENTS

Human Resources Leadership Team, Corporate Integrity