

Policy:	Privacy Policy	Date First Created:	13 November 2011
Version:	1.0	Date This Version Approved:	21 November 2011
Authorization:	Board of Directors	Applicable to:	All AFPD

1. PURPOSE

To the extent Agate Fire Protection District (AFPD) is a covered entity under the privacy regulations issued under the Health Insurance Protection and Portability Act of 1996 (HIPAA), the compliance policy of AFPD is set forth below effective this 21st day of November, 2011 as required by 45 CFR 164.530(j). Agate Fire Protection District (AFPD) will respect and protect the privacy of its patients, customers, members, employees, and agents whilst undertaking its work in accordance with its objectives under HIPAA.

All employees and volunteers need to be aware of the legislative obligations in relation to the collection, use, disclosure, integrity, access to and storage of personal information. Protecting the privacy of individuals is mandatory under Federal and State legislation.

2. SCOPE

This policy applies to all activities of AFPD where personal and/ or health information is collected, used, stored and disclosed. Personal and health information can include, but is not limited to, information which identifies patients, customers, members, employees, and agents.

3. RESPONSIBILITY

All AFPD employees and volunteers are responsible for complying with this policy.

4. POLICY STATEMENT

To the extent AFPD (Entity) is a covered entity under the privacy regulations issued under the Health Insurance Protection and Portability Act of 1996 (HIPAA), the compliance policy of Entity is set forth below as required by 45 CFR 164.530(j).

Accounting for Disclosure. Disclosure of Protected Health Information (PHI) shall be documented as to date, name and address or person to whom disclosed, description of the PHI and the reason for the disclosure, and individuals shall be accorded an accounting of that information upon their request in accordance with 45 CFR 164.528.

Business Associates. Disclosures of PHI to a Business Associates shall be pursuant to a written business associate agreement between Entity and the Business Associate which shall comply with 45 CFR 165.504(e).

Complaints. The contact person for complaints and requests for records and information under the privacy regulations shall be Privacy Officer, P.O. Box 146, 40160 County Road 153 Agate, CO 80101, and Phone: (719) 764-2771, of the Agate Fire Protection District. Complaints received by the contact person shall be forwarded to the senior EMS provider of Entity who shall investigate the complaint and advise the contact person in writing of the findings and such remedial and/or disciplinary action as may be warranted. The contact person shall advise the complaining party of the findings and any action taken. Complaints and their disposition shall be documented.

Confidential Communication. Individuals shall be afforded the right to request privacy protection for protected health information and to confidential communications in accordance with 45 CFR 164.522(b) and to request restrictions of disclosures as provided in 45 CFR 164.522(a).

Designated Record Set. The designated record set for a patient shall be:

- The ambulance run sheet for the patient;
- The billing record for the patient, if any; and
- The remittance record for the patient, if any.

Unless disclosure is prohibited by state or federal law, the designated record set for a patient shall be disclosed to the patient within 21 days working days of the request for disclosure by the patient or other individual authorized by law.

Discipline and Mitigation. Employees or volunteers who violate the requirements of HIPAA or other laws and regulations regarding confidentiality of health care information shall be disciplined in accordance with the disciplinary policies of Entity, but no retaliation shall be taken against any individual for exercising rights provided by the privacy regulations as provided by 45 CFR 164.530(g). Entity shall mitigate any improper disclosure of PHI to the extent practicable as provided 45 CFR 164.530(f).

Minimum Necessary Disclosure. When using or disclosing PHI or when requesting PHI from another covered entity, an entity shall make reasonable efforts to limit PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request as provided under 45 CFR 164.502.

Notice of Privacy Policy. Disclosure of the privacy policy of Entity shall be by a written policy notice in accordance with 45 CFR 164.520 which shall be posted in the station and displayed on Entity's WEB page, if any. Except in emergency situations, EMS providers shall make and document good faith efforts to have each patient acknowledge in writing the receipt of the written policy notice. Entity shall participate in and abide by a joint notice with other EMS units in its Jurisdictional EMS Operational Program under the privacy regulations as a member of an organized health care arrangement under 45 CFR 164.520(d).

Privacy Official. The privacy official for the Entity shall be the Privacy Officer.

Privacy Policy Document Retention. Written documentation of this policy, patient authorizations, complaints and documents related thereto shall be retained by Entity for 6 years.

Protected Health Information (PHI) as defined by the privacy regulations shall be maintained and disclosed in accordance with the privacy regulations and Colorado law. Entity will provide appropriate administrative, technical, and physical safeguards to protect the privacy of PHI. PHI shall only be disclosed for the following purposes:

Treatment, Payment and Health Care Operations as provided in 45 CFR 164.506(c);
Disclosures permitted under a valid authorization;
Disclosures to public health authorities under 45 CFR 164.512(b); and
Such other disclosures as may be allowed by law.

Training. Each employee or volunteer of the EMS component of AFPD shall receive appropriate training in connection with the requirements of the privacy regulations as well as the handling of confidential patient information.

5. POLICY REVIEW

The AFPD Board of Directors will be responsible for reviewing and updating this Policy biennially.

6. DEFINITIONS

Availability Data, information and information systems being accessible and useable on a timely basis in the required manner.

Confidentiality, The characteristic of data and information being disclosed only to authorized persons, entities and processes at authorized times and in the authorized manner.

Customer, All persons (not including AFPD staff or volunteers) from which AFPD has occasion to collect personal identifying information.

Data, A representation of facts, concepts or information in a formalized manner suitable for communication, interpretation or processing.

Employee, Any person who is associated with AFPD as a volunteer, member, or director whether paid or unpaid.

Health information , Personal information about a person that relates specifically to health (including aged care, emergency and disability services).

Individual, A natural person.

Information privacy, The right of an individual to control the dissemination of personally identifying information about themselves.

Integrity, The characteristic of data and information being accurate and complete and the preservation of accuracy and completeness.

Personal information, Information about a person that identifies them or that could be used with other readily available information to identify them.

Third party, A person or organization / entity being neither the subject of the data to be disclosed, nor the subject's health care provider.

Adopted November 21, 2011

Barry Hollembeak, President

Vic Craven, Secretary/Treasurer