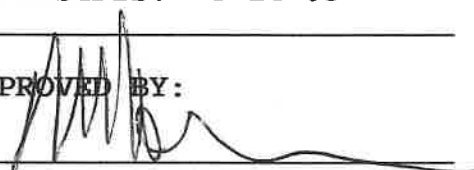


COUNTY OF IMPERIAL  
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES

POLICY AND PROCEDURE MANUAL

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| <b>SUBJECT:</b> Policies and Procedures - HIPAA<br>Privacy Rule | <b>POLICY:</b> 01-62   |
| <b>SECTION:</b> Administration                                  | <b>EFFECTIVE DATE:</b> 9-27-04   |
| <b>REFERENCE:</b> 45 C.F.R. Section 530(i)                      | <b>PAGE:</b> 1 of 2  |
| <b>AUTHORITY:</b> 45 C.F.R. Part 164                            | <b>SUPERSEDES:</b> 4-14-03   |
|   | <b>APPROVED BY:</b><br> |

**PURPOSE:** To establish a policy regarding the implementation of policies and procedures with regard to protected health information that are reasonably designed to ensure compliance the HIPAA Privacy Rule.

**SCOPE:** The information in this document applies to all members of the workforce which includes employees, contract employees, volunteers, trainees, etc., granted access to protected health information (PHI).

**NOTES:** None

**DEFINITIONS:** Policies: Guidelines that regulate organizational action.

Procedures: Procedures supplement the policy guidelines by outlining the specific step employees are expected to take and the sequence in which to perform those steps.

Protected Health Information (PHI): Individually identifiable information relating to past, present, or future physical or mental health condition of an individual, provision of health care to an individual, or the past, present, or future payment for health care provided to an individual transmitted or maintained in any form or medium including oral, written, or electronic communication.

Workforce means employees, volunteers, trainees, and

other persons whose conduct, in the performance of work for the department, is under the direct control of the department, whether or not they are paid by the department.

**POLICY:** Imperial County Behavioral Health Services (ICBHS) will implement policies and procedures with respect to PHI that are reasonably designed to ensure compliance with the standards, implementation specifications, or other requirements of the HIPAA Privacy Rule. The policies and procedures will also be consistent with applicable state law and other laws that are not preempted by HIPAA. [45 C.F.R. Section 160.530(i)(1)]

All policies and procedures will be documented in both written and electronic format. Documentation of policies and procedures will be in compliance with Policy 01-75 Documentation - HIPAA Privacy Rule.

Each policy and procedure will display the effective date of the document. A list of and copies of the most current versions of all policies and procedures will be maintained by the privacy officer. [45 C.F.R. Section 160.530(i)(3)]

Changes to the policies and procedures will be made when necessary and appropriate to comply with changes in the law, including standards, requirements and implementation specification of the HIPAA Privacy Rule. When such changes in law occur, ICBHS will promptly revise and section implement the affected policy or procedure. [45 C.F.R. Section 160.530(i)(2)(ii)]

When revisions to policies and procedures affect a practice stated in the Notice of Privacy Practices, the Notice of Privacy Practices must be revised accordingly. Revisions to the Notice of Privacy Practices will be made in accordance with the Policy 01-63, Notice of Privacy Practices. The effective date of a revised policy or procedure may not be prior to the effective date of the revised Notice of Privacy Practices. [45 C.F.R. Section 160.530(i)(4)(i)(c)]

Training of employees on the revisions, if necessary, will be conducted in accordance with the Policy 01-86, Training Requirements.

The ICBHS privacy officer is the designated person for maintenance and revision of policies and procedures related to the HIPAA Privacy Rule.