HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT
HIPAA

The School Board directs the Superintendent or designee to take steps to ensure compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), which grants individuals the right to receive notice of the uses and disclosures of their protected health information that may be made by the District, and sets forth the individual’s rights and the District’s legal obligations with respect to protected health information.

Confidentiality of Individually Identifiable Health Information

The District and its employees will not use or disclose an individual’s protected health information for any purpose without the properly documented consent or authorization of the individual or his/her authorized representative unless required or authorized to do so under state or federal law or this policy, unless an emergency exists or unless the information has been sufficiently de-identified that the recipient of the information would be unable to link the information to a specific individual.

Prior to releasing any protected health information for the purposes set forth above, the District representative disclosing the information shall verify the identity and authority of the individual to whom disclosure is made. This verification may include the examination of official documents, badges, driver’s licenses, workplace identity card, credentials or other relevant forms of identification or verification.

All employees of the District are expected to comply with the administration of the policy. Any violation of the HIPAA privacy or security standards or this policy shall constitute grounds for disciplinary action, up to and including termination of employment.

Any employee of the District who believes that there has been a breach of the integrity or confidentiality of any person’s protected health information shall immediately report such breach to his/her immediate supervisor the Board appointed Privacy/Security Officer. Any employee involved in retaliatory behavior or reprisals against another individual for reporting an infraction of this policy is subject to disciplinary action up to and including termination of employment.

If the Privacy/Security Officer determines that there has been a breach of this privacy policy or of the procedures of the District, he/she shall make a determination of the potentially harmful effects of the unauthorized use or disclosure and decide upon a course of action to minimize the harm. Any individual responsible for the unauthorized use or disclosure is referred to the Superintendent or his/her designee for appropriate disciplinary measures.

Documentation

Documentation shall be required in support of the policies and procedures of the District and all other parts of the HIPAA privacy regulations that directly require documentation, including, but not limited to, all authorizations and revocations of authorizations, complaints, and disposition of complaints. All documentations shall be kept in written or electronic form for a period of six years.

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