

## CONFIDENTIAL PATIENT INFORMATION

Confidential patient information may not be given to unauthorized individuals. A student must follow the sponsoring organization's policy regarding access to patient information.

Responsibility: Students, Program Director  
Standard: Information Management

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To protect the patient's privacy, divulgence of any aspect of a patient's care (financial, medical, or personal data) except as required in the performance of clinical responsibilities or for education purposes in a classroom situation, will result in Corrective Action. Inquiries concerning patients or their families may be directed to the supervisor, Health Information Management Department, or the attending physician.

For the purposes of complying with Public Law 104-191, Section 160.102, Regional West Health Services shall be designated a "**covered entity**" as a health care provider which transmits health information in multi-media formats, including electronic information.

Section 164.501 defines Protected Health Information as any information whether oral or recorded in any form or medium, created or received by a health care provider.

**Protected Health Information** (PHI): PHI that is the subject of this policy is information created or received by RWHS and relates to the past, present, or future physical or mental health or condition of a patient; the provision of health care of a patient; or the past, present or future payment for the provision of health care of a patient; and that identifies the patient or for which there a reasonable basis to believe the information can be used to identify the patient. PHI includes information of persons living and deceased. The following components of a patient's information are also considered PHI:

1. Names
2. Street address, city, county, precinct, zip code
3. Birth date, admission dates, discharge date and date of death
4. Telephone number, fax numbers and electronic mail addresses
5. Social Security numbers
6. Medical record numbers
7. Health plan beneficiary numbers
8. Account numbers
9. Certificate/license number
10. Vehicle identification and serial numbers
11. Device identification and serial numbers
12. Web Universal Resource locate
13. Biometric identifier
14. Photographic images
15. Any other unique identifying number, character or code

The Health Insurance Portability and Accountability Act (HIPAA): Standards for privacy of individually identifiable health information: 45CFR parts 160 and 164.

Individuals with access to patient information will be required to sign Confidentiality Statement and must comply with the general rules of uses and disclosures of Protected Health Information, Section 164.502 of Public Law 104-191.

### **Job Shadowing**

Job shadowing will be provided in accordance with Regional West Medical Center's current policies and procedures to ensure the confidentiality of protected health information.

### **Access to a Student's Own Medical Records**

A student is restricted in access to his or her protected health information and to prevent the inappropriate use of clinical information systems for reviewing personal health information of others. HIPAA permits an individual's access to his or her own protected health information subject to procedural guidelines established by the health care facility. The sponsoring organization RWHS clinical and medical information systems are provided to access patient records and shall be accessed by the student to view his or her own medical records only as hereinafter provided.

### **PROCEDURE**

- A. The student may only access protected health information (e.g., electronic, hard copy) through health information systems for purposes necessary to perform his or her educational experiences in the clinical or didactic environment
- B. A student may obtain a copy of his or her own medical record from each facility's medical records department following applicable policies and procedures.
- C. Medical records will be subject to random HIPAA privacy and security audits for inappropriate use.
- D. Inappropriate access may result in disciplinary action against the student including dismissal from the Program.
- E. Under no circumstance may a student edit or make changes to his or her protected health information.
- F. A student shall not access (through the information systems) any protected health information of family members, other students, employees, friends or other individuals for personal or non-educational related purposes.

DEFINITIONS

**MEDICAL RECORD:** Any item, collection, or grouping of information that includes protected health information and is maintained, collected, used or disseminated by or for a covered entity.

**PROTECTED HEALTH INFORMATION (PHI):** PHI that is the subject of this policy is information created or received by RWHS and relates to the past, present, or future physical or mental health or condition of a patient; the provision of healthcare to a patient; or the past, present, or future payment for the provision of health care to a patient; and that identifies the patient or for which there is a reasonable basis to believe the information can be used to identify the patient.

PHI includes information of persons living or deceased. The following components of a patient's information are also considered PHI: (a) names; (b) street address, city, county, precinct, zip code; (c) birth date, admission date, discharge date and date of death; (d) telephone numbers, fax numbers and electronic mail addresses; (e) Social Security numbers; (f) medical record numbers; (g) health plan beneficiary numbers; (h) account numbers; (i) certificate / license number; (j) vehicle identification and serial numbers; (k) device identification and serial numbers; (l) Web Universal Resource locator; (m) biometric identifier; (n) photographic images; and (o) any other unique identifying number, character or code. The Health Insurance Portability and Accountability Act (HIPAA): Standards for privacy of individually identifiable health information; 45 CFR Parts 160 and 164.

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Signature  
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Program Director

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Director of Imaging Services

Reference: Hospital Policy # 500.4.101, 500.4.102, and 103.0.23

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