

 <p>GEORGIA DEPARTMENT OF COMMUNITY HEALTH</p>	<p>Procedure Number: 906</p> <p>Effective Date: April 14, 2003</p> <p>Revision Date:</p>
<p>Privacy Procedures</p>	<p>Documentation</p>
<p>Originating Work Unit: Privacy Office</p>	<p>Category: Legal Compliance</p>

PURPOSE

DCH is required to document policies and procedures either on paper or in electronic form. Any change to a policy, procedure or a practice must also be documented. In addition to policies and procedures, any authorization pertaining to the accounting of disclosures by DCH must be documented.

PROCEDURE:

- ✓ The key to compliance with the Privacy Rule is documentation.
 - ✓ All documentation must be maintained for six (6) years.
 - ✓ DCH must maintain the policies and procedures required by the Privacy Rule in writing.
 - ✓ Any other communication, action, activity, or designation that must be documented by the Privacy Rule must be documented in writing.

 - ✓ Notice of Privacy Practices. DCH is required to provide adequate notice to individuals of the uses and disclosures of PHI that it may make. The Department must document its compliance with the notice requirements by retaining copies of the notices it issues.
 - a. If a DCH has not reserved its right under 45 C.F.R § 164.520(b)(1)(v)(C) to change a privacy practice described in the notice, the DCH is bound by the privacy practices stated in the notice with respect to PHI created or received while the notice is in effect.

 - b. DCH may change a privacy practice stated in the notice without having reserved the right to do so, provided that the change meets the implementation requirements described in the section and the change is effective only for PHI created or received after the effective date of the notice.

 - ✓ Right to request restriction of use and disclosure of PHI.
 - a. DCH must permit an individual to request that DCH restrict uses and disclosures of PHI about the individual to carry out treatment, payment and health care operations.
 - b. DCH does not have to agree to the restrictions. If DCH does agree, it must document the restrictions.
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- ✓ Access of individuals to PHI.
 - a. An individual has the right of access to inspect and obtain a copy of PHI about him/her in a designated record set, for as long as DCH maintains the PHI in the designated record set.
 - b. DCH must document the designated record sets that are subject to access by individuals,
 - c. DCH must document the titles of the persons or offices responsible for receiving and processing requests for access by individuals.
- ✓ Amendment of PHI.
 - a. An individual has the right to have DCH amend PHI about him/her in the designated record set, for as long as DCH maintains the PHI in the designated record set.
 - b. DCH must document the titles of the persons or offices responsible for receiving and processing requests for access by individuals.
- ✓ Accounting of disclosures of PHI. An individual has the right to receive an accounting of disclosures of PHI made by DCH in the six (6) years prior to the date on which the accounting is requested. DCH must document and retain:
 - a. Date of disclosure
 - b. Name and address of entity or individual who received the information
 - c. Brief description of the information disclosed
 - d. Brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure (or a copy of the individual's authorization or a copy of a written request for a disclosure for which authorization is not required.)
 - e. The written accounting provided to an individual requestor
 - f. Titles of persons or offices responsible for receiving and processing requests for accountings of disclosures.
- ✓ In addition to the documentation noted above, DCH must maintain documentation for:
 - a. Any signed authorization
 - b. All complaints received, and their disposition, if any
 - c. All sanctions that are applied as a result of non-compliance
 - d. Any use or disclosure of PHI for research without the individual's authorization
- ✓ Disclosures made pursuant to an authorization are exempt from the Accounting.

REPORTING VIOLATIONS:

Violations should be reported to the DCH Privacy Officer.

LEGAL AUTHORITY:

Unless otherwise noted, all citations are in 45 C.F.R.:

- §160.310 Responsibilities of covered entities
- §164.508 Uses and disclosures for which an authorization is required
- §164.512(i) Uses and Disclosures for Research: Documentation Requirements of IRB
- §164.520(e) Notice of Privacy Practices for protected health information – Implementation specification: documentation
- §164.522 Rights to request privacy protection for protected health information
- §164.524(e) Access of individuals to protected health information – Implementation specification: documentation
- §164.526(f) Amendment of protected health information – Implementation specification: documentation
- §164.528(d) Accounting of disclosures of protected health information – Implementation specification: documentation
- §164.530(j) Administrative requirements – Standard: documentation

Final Privacy Rule, 65 Federal Register 82461, 82802 (December 28, 2000):

Preamble, pg. 82498 – Each entity must assess its own needs

Preamble, pg. 82517 – Items required in Authorization Requests

Preamble, pg. 82535-6 – Documentation Requirements of Internal Review Board

SANCTIONS:

See DCH Sanctions Policy and Procedure.
