

Operational Policy

Policy Title:	General Privacy		
Policy Number:	OHA-100-001		
Original Date:	09/20/2013	Last Update:	10/03/2016
Approved:	Mark Fairbanks, OHA CFO		

Purpose

This policy is one of a series that describes Oregon Health Authority (OHA) guidelines and expectations for the necessary collection, storage, protection, use, and disclosure of confidential information about individuals in order to provide services and benefits to individuals, while maintaining reasonable safeguards to protect the privacy of information.

Description

This policy is a general overview of OHA’s approach to collecting, maintaining, using, transmitting, sharing, disclosing, storing and protecting information about individuals. The policy offers guidelines on how to conform to the required standards and OHA policies regarding the privacy and protection of an individual’s information. It also provides a general overview of staff training requirements.

Applicability

This policy applies to all OHA staff including employees, volunteers, interns and agency contractors.

As keepers of the public trust, all agency employees have a responsibility to comply with state and agency policies, administrative rule, and state and federal law. The agency takes this responsibility seriously and failure to fulfill this responsibility is not treated lightly. Employees who fail to comply with state or agency policy, administrative rule, or state and federal law may face progressive discipline, up to and including dismissal from state service.

Policy

1. OHA collects, maintains, uses, transmits, shares, stores and protects large amounts of confidential information. OHA will safeguard confidential information about individuals consistent with federal and state statute, rules and regulations, and OHA policies and procedures.
2. OHA will carry out agency functions and use information about individuals to the extent needed to administer OHA programs, services and activities, in a manner that is consistent with federal and state confidentiality requirements applicable to the program, service or activity.

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3. OHA, its employees, partners, and business associates will respect and protect the privacy of records and information about individuals who request or receive services from OHA including but not limited to information about:
 - a. Applicants or recipients of Medicaid or other health related services or assistance;
 - b. Persons who apply for or are admitted to a state-operated residential treatment facility or a state hospital; or
 - c. Persons committed to the custody of OHA.
 4. OHA, its employees, partners, and business associates will:
 - a. Safeguard the protected health information (PHI) and personal identifiable information (PII) of individuals.
 - b. Inform individuals about OHA privacy practices.
 - c. Adopt procedures at the program level to reasonably safeguard client information.
 - d. Respect individual privacy rights to the full extent required under this series of policies.
 5. OHA will safeguard confidential information about licensees and providers consistent with federal and state statutes, rules and regulations, other OHA policies and program procedures.
 - a. Information regarding the qualifications of licensees and providers are public record.
 - b. When OHA obtains information about an individual from a provider to determine payment responsibility for a claim or other request, such information remains confidential.
 - c. OHA is authorized to evaluate the performance of licensees and providers as part of its health oversight and other review activities. Individual's information obtained during these activities is confidential.
 6. OHA shall make available the OHA Notice of Privacy Practices (NPP) as required by federal law.
 - a. The NPP shall describe the responsibility of OHA to maintain the privacy of protected information and shall clearly inform the client of the types of uses and disclosures permitted or required by OHA.
 - b. The NPP shall contain all information required under Health Insurance Portability and Accountability Act (HIPAA).
 - c. OHA will provide all individuals in direct care settings an OHA *NPP* and request the client's signature on an *NPP Acknowledgment of Receipt* form.
 7. All members of the OHA workforce shall complete training on OHA privacy and security policies each year. This training outlines the employee's role and responsibilities in protecting the privacy of OHA clients.
 8. The OHA workforce shall follow all OHA policies and procedures regarding the confidentiality of individuals' information in all OHA programs, services and activities.
 - a. In the event that more than one policy applies but compliance with all policies cannot reasonably be achieved, the OHA employee shall seek guidance from a supervisor.
 - b. If, after consultation with the OHA supervisor, compliance cannot reasonably be achieved or questions remain, OHA staff shall consult with the Privacy Compliance Officer or a representative of the OHA Privacy Program in the Information Security and Privacy Office.
 9. All members of the OHA workforce shall take reasonable steps to safeguard confidential information from any intentional or unintentional use or disclosure, as required under state and federal statute, rules and regulations and OHA policies and procedures.
 10. Federal and state statute, rules and regulations, and OHA's policies, procedures and Notice of Privacy Practices outline:
 - a. An individual's right to access their own information.
 - b. Some exceptions to the right of access.
 - c. How an individual can request restrictions or amendments to their record.
 - d. How an individual can file complaints.

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11. OHA will not use or disclose any information about an individual without a signed authorization for release of information from the individual, or the individual's personal representative, unless authorized by OHA policy as otherwise allowed or required by state or federal law.
 12. All members of the OHA workforce shall make a reasonable effort to use or disclose only the minimum amount of information necessary to provide services and benefits and shall use or disclose information only to the extent provided for in federal and state statute, rules and regulations, and OHA policies and procedures.
 13. If OHA policy conflicts with federal or state statute, administrative rule or court order, the federal or state statute, administrative rule or court order, will take precedence unless the OHA policy provides more protection.

References

In addition to the links provided below, employees should also refer to related process maps and protocols, including agency guidelines, departmental or program best practices and program procedure manuals.

[45 CFR Part 160](#)

[45 CFR Part 164](#)

[OAR 125-055-0100 – 125-055-0130](#)

[OAR 407-014 Privacy and Confidentiality](#)

[ORS 413.042](#)

[Oregon Consumer Identity Theft Protection Act - ORS 646A.600 to 646A.628](#)

[Federal HIPAA Privacy & Security Rule](#)

[Privacy/Security Glossary of Common Terms](#)

[Link to forms](#)

Forms

[OHA Notice of Privacy Practices \(NPP\)](#)

[DHS/OHA Notice of Privacy Practices, Acknowledgment of Receipt form
Incident Reporting Form \(MSC 2092\)](#)

Policies that apply

(TBD)

[DHS/OHA Information Security Policies](#)

[DHS Information Access Control Policy-090_003](#)

Contact

Information Security and Privacy Office (ISPO)

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Policy History

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To request this policy in another format or language, contact the Publications and Design Section at 503-378-3486, 711 for TTY, or email dhs-oha.publicationrequest@state.or.us

Keywords

Participant, Licensee, provider, OHA Notice of Privacy Practices