



COMPENSATION DEPARTMENT

PRIVACY AND SECURITY PROCEDURES FOR USE AND DISCLOSURE OF CERTAIN PERSONAL HEALTH INFORMATION

1. **Purpose.** The Maricopa Community Colleges (“MCCCD”) or its contractors collect certain health information about employees, their dependents, spouses and partners, and former employees as a result of administering its medical, dental, and behavioral health plans, and flexible spending accounts (collectively “plans”). It does so through activities such as enrolling members, obtaining receipts for payment and assisting with the payment of claims. The objective of these procedures is to insure the confidentiality of that health information from inappropriate uses and disclosures as required by the Health Insurance Portability and Accountability Act of 1996, as amended (“HIPAA”). The personal health information covered by HIPAA is called “protected health information.”
2. **Applicability.** For purposes of these procedures, the Compensation Department (“Department”), and the human resources personnel at each non-District Office location for the limited purpose of assisting employees with health benefit enrollments, are considered separate entities from the remainder of MCCCD. These procedures apply only to them. Uses and disclosures of protected health information within MCCCD but outside of the Department must comply with these procedures and applicable law as if the use or disclosure is to an outside party. Additionally, electronic communication or transmission of protected health information within the Department adheres to the encryption requirements of federal law. Finally, Department personnel who handle the protected health information of MCCCD employees must complete the District Compensation Office’s HIPAA training.
3. **Types of Health Care Information.** The Department receives and maintains certain health information on a routine and recurring basis for the purposes of payment relating to and the operation of its plans, including:

For payment:

- To confirm eligibility for payment purposes, including to physicians, dentists and hospitals
- To facilitate payment to those health care providers
- To assist in claims management and plan administration
- To administer and maintain accounts for payroll deductions
- To enroll individuals

For operation of the plans:

- To assess and improve the quality of services
- To estimate the cost of future coverage
- To obtain audit, accounting, legal and actuarial services

4. **Limited Use and Disclosure.** The Department uses or discloses protected health information only to the extent necessary to accomplish the purpose of the use or disclosure.
5. **Access by Department Employees.** The employees of the Department have access to the protected health information described in these procedures for the purposes of performing their assigned duties within the Department relating to the administration of MCCCD’s plans. They do not use or disclose protected health information relating to any other duties that they may be assigned.
6. **Authorization Required.** Except as described in the next paragraph, the Department requests written authorization before it receives, uses or discloses an individual’s protected health information. The authorization form is available at the following web site:

<http://www.maricopa.edu/employees/divisions/hr/benefits/coverage/hipaa>

The individual providing the authorization may revoke it at any time in writing by submitting the revocation to the benefits specialist(s) working with the individual under the original authorization.

7. **Authorization Not Required.** The Department may use or disclose protected health information without an individual’s written authorization for the purposes of payment relating to or the operating of its plans to entities such as health insurance companies, health care providers (like doctors, pharmacies, and dentists)

and consultants who assist it in administering its plans. Some other instances in which the law permits the Department to use or disclose protected health information without the individual's written authorization are:

- Health care oversight activities by governmental entities such as investigations, audits, and licensure
- Law enforcement purposes
- Legal or administrative proceedings, such as lawsuits, in response to a court or administrative order, a subpoena or discovery request

8. Restrictions. An individual may request in writing that the Department restrict or limit the use or disclosure of his or her protected health information for purposes of payment relating to and the operation of its plans. However, the Department is not required to honor the request. The request must describe the information subject to the restriction. It must also state whether the individual wishes to limit use or disclosure or both, and include the names of individuals or organizations to which the restrictions apply.

9. Amendment. An individual may request that the Department amend his or her protected health information. This excludes changes in levels of coverage due to family status changes. The request must be in writing and provide reasons in support of the request. The Department will respond to the request within 60 days of receipt and, if it denies the request, provide the individual with a written statement of the basis for the denial that also informs the individual of certain rights relating to the denial.

10. Inspection and Copying. An individual whose protected health information is on file with the Department may request the opportunity to inspect or obtain a copy of it. To do so, the individual must submit a written request to the Department. The Department will act on the request within 30 days of receipt.

11. Family and Personal Representatives. The Department generally refuses to provide protected health information to family members, relatives or other third parties without the written authorization of the individual whose information has been requested. The Department will make exceptions to this procedure only under circumstances authorized by law and only with the guidance of MCCCCD's Legal Services Department.

12. Annual Notice.

The HIPAA Standards for Privacy of Individually Identifiable Health Information ("Privacy Rule") establishes a set of national standards to preserve the confidentiality of protected health information. The U.S. Department of Health and Human Services ("HHS") issued the Privacy Rule to implement HIPAA. MCCCCD maintains a HIPAA Notice of Privacy Practices describing how health information about individuals covered under MCCCCD's insurance plans may be used and disclosed. Detailed information regarding HIPAA regulations can also be found on the Benefits Web Site at <http://www.maricopa.edu/employees/divisions/hr/benefits/coverage/hipaa>.

13. Complaints. An individual may complain to MCCCCD Director of the Department if he or she believes that his or her privacy rights have been violated. Complaints may be filed only with respect to alleged violations occurring on or after April 14, 2003. The individual may also complain to the Secretary of the United States Department of Health and Human Services. Complaints to either the Director or the Secretary must:

- Be filed in writing, either on paper or electronically;
- Name the entity that is the subject of the complaint, for the complaints submitted to the Secretary, and, for all complaints, describe the acts or omissions believed to be in violation of the applicable law, particularly 45 Code of Federal Regulations, either part 160 or the applicable standards, requirements, and implementation specifications of subpart E of part 164; and
- Be filed within 180 days of when the complainant knew or should have known that the act or omission complained of occurred.

For complaints to the Secretary, individuals may file written complaints with Office of Civil Rights (OCR) by mail, fax or e-mail at the following address:

Region IX, Office for Civil Rights
U.S. Department of Health and Human Services
50 United Nations Plaza, Room 322
San Francisco, CA 94102
Voice Phone (415) 437-8310
FAX (415) 437-8329
TDD (415) 437-8311

For more information about the Privacy Rule:

www.hhs.gov/ocr/hipaa/

- 14. Recordkeeping.** The Department will maintain a copy of the notices, authorizations and other documents implementing these procedures for 6 years after the document is issued. The Department does not keep a record of uses and disclosures of protected health information made to the individual, pursuant to an authorization, or for purposes of payment relating to or the operation of the plans.
- 15. Notification of Breach.** Federal law requires that the Department notify you of any breach of unsecured health information as defined under HIPAA, as amended, whether the breach is known to have occurred or if the Department has a reasonable belief that it has occurred. Unsecured personal health information is defined by that law as information that is not secured by using a technology or methodology specified by the HHS. The Department will provide notice without unreasonable delay, but in no case later than 60 days after its discovery of the breach. Under certain circumstances, the Department must also report the breach to HHS.
- 16. Destruction of Personal Health Information.** The Department adheres to certain procedures when disposing of HIPAA-protected health information records in its files. The timing of the disposal is determined by applicable records retention standards determined by the State of Arizona. The disposal procedures are:

 - For paper records, shredding records so that the specific information is rendered unreadable, indecipherable, and otherwise incapable of reconstruction.
 - For records in electronic form, clearing, purging, or destroying the media containing the records.