

GENERAL PERSONNELHIPAA Privacy Policy

The purpose of this policy is to assist the District, the Board of Education, and its officials and employees and agents in complying with the privacy standards of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), and to protect the confidentiality and integrity of protected health information acquired through the administration of the District’s Health Benefit Plan and other similar employee benefit plans maintained by the District for the benefit of its employees. The District, as a “plan sponsor” and “plan administrator” under HIPAA, shall comply with this policy when dealing with protected health information of any individual covered by the District’s Health Benefit Plan or similar employee benefit plan maintained by the District for the benefit of its employees. Further, the District shall separate its actions as a “plan sponsor” and employer from its actions as the “Plan” or “plan administrator”.

Definitions

For the purposes of this policy, the following definitions shall apply:

Business Associate is an entity of person who assists with the administration of the Plan or Plan-related functions or otherwise works with the Plan in the manner as defined in HIPAA regulations.

Group Health Plan (the “Plan”) is the District’s Health Benefit Plan, which is a group health plan offered and administered by the District. The Plan shall also include any other similar employee benefit plan maintained by the District for the benefit of its employees.

Individually Identifiable Health Information is health and demographic information that relates to the past, present, or future health care of an individual or payment for such health care that identifies or can be used to identify the individual.

Plan Document is the plan documents that govern the District’s Health Benefit Plan or other similar employee benefit plan maintained by the District for the benefit of its employees.

Protected Health Information (“PHI”) is individually identifiable health information that is maintained in or transmitted by electronic media, such as computers or the internet, or maintained or transmitted in any other form or medium, including transmissions via paper, voice, telephone, e-mail or facsimile. Protected Health Information excludes individually identifiable health information in education records covered by the Family Educational Rights and Privacy Act (FERPA) or employment records held by the District.

Plan Sponsor is the Creve Coeur School District 76, which offers and maintains the District’s Health Benefit Plan and any other similar employee benefit plan for the benefit of its employees.

Confidentiality of PHI

The Plan, all Board of Education members, and all District officials and employees shall endeavor to maintain the confidentiality and integrity of protected health information. In general, all District officials and employees acting on behalf of either the Plan or the Plan Sponsor shall make reasonable efforts to limit the use, disclosure, and request of protected health information to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request. Except as noted in the “Notice of Privacy Practices” for the Plan, protected health information shall not be used or disclosed without the proper consent or authorization unless such use or disclosure is specifically authorized by law. Protected health information shall not be used or disclosed for marketing or directory purposes. Further, protected health information shall not be used or disclosed to a relative or a friend acting on behalf of an individual unless the individual has authorized such use of disclosure or the relative or friend is an authorized personal representative acting under proper legal authority. The District shall handle protected health information of a deceased individual in the same manner as other protected health information.

Protected health information shall not be used or disclosed under any circumstances by the District for employment-related actions or decisions or in connection with any other employee benefit or employee benefit plan offered by the District.

Privacy Officer

The Superintendent is designated as the Privacy Officer for the Plan. The Superintendent may designate additional administrative personnel and staff to assist with the duties of the Privacy Officer and with administering the Plan. Such additional administrative personnel and staff shall be designated in the Plan’s policies and procedures. The Privacy Officer shall ensure that all District personnel granted access to protected health information pursuant this policy and Plan policies and procedures are properly trained regarding the proper use, disclosure, security, and maintenance of protected health information.

For the purpose of ensuring compliance with this policy and the privacy standards of HIPAA, only the Privacy Officer and the designated administrative personnel or staff shall have access to protected health information. The Privacy Officer is authorized to and shall take all reasonable steps to protect the privacy of protected health information, including but not limited to, ensuring that administrative, physical, and technical safeguarding procedures are established and enforced. All documentation required by HIPAA or other applicable law shall be maintained by the Superintendent as the Privacy Officer and all questions regarding the use or disclosure of protected health information should be directed to the Superintendent’s Office.

The Privacy Officer shall develop and implement all required notices, policies, procedures, and forms to ensure HIPAA compliance effective April 14, 2004, and thereafter. Additionally, the Privacy Officer shall certify that the Plan Document has been properly updated and that both the

Plan Document and the Plan comply with HIPAA. The Privacy Officer shall enter into Business Associate agreements on behalf of the Plan with all business associates of the Plan.

The Privacy Officer shall draft and implement the following:

Policies and Procedures:

- Policy for separation of the Plan and the Plan Sponsor
- Policy for firewalls and limiting employee access to PHI
- Procedure for maintenance and destruction of PHI
- Procedure to ensure “minimum necessary” requirements of HIPAA
- Procedures for addressing improper disclosure of PHI
- Procedures for complying with participant’s rights regarding PHI

Forms and Notices:

- Notice of Privacy Practices (for participants)
- Request for Participant Access of PHI
- Response to Request for Participant Access to PHI
- Request for Amendment to Participant PHI
- Response to Request for Amendment to Participant PHI
- Request to Restrict Access to Participant PHI
- Response to Request to Restrict Access to Participant PHI
- Request for Accounting to Disclosure of Participant PHI

Disclosure of PHI in Violation of This Policy

In the event any person, including those persons listed above as having access to or control of protected health information, do not comply with this Board Policy, the person shall be subject to appropriate disciplinary measures, which may include an oral warning (first offense), a written warning (second offense), and suspension or termination of employment with the District. A more severe sanction may be imposed if warranted by the nature of the violation. All sanctions imposed shall be documented in the employee’s personnel file and shall be maintained with the District’s HIPAA compliance records.

Legal Ref.: 45 CFR 160.103
45 CFR 164.501
45 CFR 164.502
45 CFR 164.504
45 CFR 164.520
45 CFR 164.530
42 U.S.C.A 1320d et seq.

Adopted May 2004

