

**CREVE COEUR SCHOOL DISTRICT NO. 76
HEALTH BENEFIT PLAN**

**POLICIES AND PROCEDURES FOR COMPLIANCE WITH
INDIVIDUAL'S RIGHTS REGARDING
PROTECTED HEALTH INFORMATION**

The Creve Coeur School District No. 76, as the Plan Sponsor and the Plan Administrator of the Health Benefit Plan, on behalf of the Plan, hereby adopts the following Policies and Procedures that shall be instituted and followed by the Plan with regard to an individual's rights in relation to protected health information:

1. Defined Terms. The following terms shall have the meanings set forth below when used in this document:

“Designated Record Set” shall mean a group of records maintained by or for the Plan that is enrollment, payment, claims adjudication and case or medical management record systems maintained by or for the Plan; or used in whole or in part by or for the Plan to make decisions about Individuals. Information used for quality control or peer review analyses and not used to make decisions about Individuals is not in the Designated Record Set.

“HIPAA” shall mean the Health Insurance Portability and Accountability Act of 1996, as amended.

“Plan” shall mean both the Creve Coeur School District 76 Health Benefit Plan.

“Plan Administrator” shall mean Creve Coeur School District No. 76.

“Plan Sponsor” shall mean Creve Coeur School District No. 76.

“Privacy Official” or **“Privacy Officer”** shall mean the Superintendent who has been designated as such by the Plan Administrator.

“Privacy Standards” shall mean the Standards for Privacy of Individually Identifiable Health Information enacted pursuant to HIPAA.

“Protected Health Information” or **“PHI”** shall mean individually identifiable health information, as more specifically defined in the Privacy Standards.

- 2. Compliance with the Privacy Standards.** The Plan at all times shall comply with the requirements of the Privacy Standards regarding Individual's rights with respect to PHI. In the event the Privacy Standards are amended, these Policies and Procedures shall be deemed to be amended in accordance therewith.
- 3. Right to Request Restrictions on PHI Uses and Disclosures.** An Individual may request the Plan to (a) restrict uses or disclosures of his or her PHI to carry out treatment, payment or health care operations; or (b) restrict disclosures to family members, other relatives, close personal friends, or other persons identified by the Individual who are involved in his or her care or payment for that care. However, the Plan is not required to agree to a requested restriction.

If the plan agrees to a requested restriction, the Plan shall not use or disclose PHI in violation of such restriction, except that, if the Individual requested a restriction and later is in need of emergency treatment and the restricted PHI is needed to provide the emergency treatment, the Plan may use the restricted PHI, or it may disclose such information to a health care provider, to provide such treatment to the Individual. If restricted PHI is disclosed to a health care provider for emergency treatment, the Plan shall request that such health care provider not further use or disclose information.

A restriction agreed to by the Plan is not effective to prevent uses or disclosures permitted or required under Sections 164.502(a) (2) (ii) or 164.512 of the Privacy Standards.

The Plan may terminate its agreement to a restriction if:

- The Individual agrees to or request the termination in writing;
- The Individual orally agrees to the termination and the oral agreement is documented; or
- The Plan informs the Individual that it is terminating its agreement to a restriction, except that such termination is only effective with respect to PHI created or received after the Plan has informed the Individual of the termination.

If the Plan agrees to a restriction, the Plan will document the restriction by maintaining a written or electronic record of the restriction. The record of the restriction will be retained for six years from the date of its creation or the date when it last was in effect, whichever is later.

An Individual or his or her personal representative will be required to request restrictions on uses and disclosures of PHI in writing. Such requests should be addressed to the contact person specified in the Plan's Notice of Privacy Practices.

The Plan shall maintain forms for requesting, and responding to requests for, restrictions on PHI uses and disclosures.

4. Right to Request Confidential Communications of PHI. An Individual may request to receive communications of PHI from the Plan by alternative means or at alternative locations if he or she clearly states that the disclosure of all or part of the information to which the request pertains could endanger the Individual. The Plan will accommodate all such reasonable requests. However, the Plan may condition the provision of a reasonable accommodation on:

- When appropriate, the information as to how payment, if any, will be handled; and
- Specification by the Individual of an alternative address or other method of contact.

An Individual or his or her personal representative will be required to request confidential communications of PHI in writing. Such requests should be addressed to the contact person specified in the Plan's Notice of Privacy Practices.

The Plan shall maintain forms for requesting, and responding to requests for, confidential communications or PHI.

5. Right to Inspect and Copy PHI. Except as provided herein, an Individual has a right of access to inspect and obtain a copy of his or her PHI contained in a Designated Record Set, for as long as the Plan maintains PHI in the Designated Record Set, except for psychotherapy notes; information compiled in reasonable anticipation of, or for use in, a civil, criminal or administrative action or proceeding; and other health information not subject to the right to access information under the Privacy Standards.

The Plan shall act on a request for access no later than 30 days after receipt of the request. However, if the request for access is for PHI that is not maintained or accessible to the Plan on-site, the Plan shall take action no later than 60 days from the receipt of such request. The Plan shall take action as follows: if the Plan grants the request, in whole or in part, the Plan shall inform the Individual of the acceptance and provide the access requested. However, if the Plan denies the request, in whole or in part, the Plan shall provide the Individual with a written denial. If the Plan cannot take action within the required time, the Plan may extend the time for such action by no more than 30 days if the Plan, within the applicable time limit, provides the Individual with a written statement of the reasons for the delay and the date by which it will complete its action on the request.

If the Plan provides access to PHI, it shall provide the access requested, including inspection or obtaining a copy, or both, of the Individual's PHI in a Designated Record Set. The Plan shall provide the Individual with access to the PHI in the form or format requested if it is readily producible in such form or format; or, if it is not, in a readable hard copy form or such other form or format as agreed to between the Individual and the Plan. The Plan may provide the Individual with a summary of the PHI requested, in lieu of providing access to the PHI, or may provide an explanation of the PHI in which access has been provided if the Individual agrees in advance to

such summary or explanation and any fees associated therewith. The Plan will arrange with the Individual for a convenient time and place to inspect or obtain a copy of the PHI, or mail a copy of the PHI at the Individual's request. If an Individual requests a copy of PHI or agrees to a summary or explanation of PHI, the Plan may impose a reasonable, cost-based fee. Such fee shall include on the cost of (a) copying, including the cost of supplies for and labor of copying, the PHI requested; (b) postage, when the Individual has requested the copy, or the summary or explanation, be mailed; and (c) preparing the explanation or summary of the PHI, if agreed to by the Individual as set forth above.

If the Plan denies access to PHI in whole or in part, the Plan shall, to the extent possible, give the Individual access to any other PHI requested, after excluding PHI as to which the Plan has grounds to deny access. If access is denied, the Individual or his or her personal representative will be provided with written denial setting forth the basis for the denial; if applicable, a statement of his or her review rights, including a description of how the Individual may exercise those review rights; and a description of how the Individual may complain to the Plan or to the Secretary of the U.S. Department of Health and Human Services ("HHS") (including the name, or title, and telephone number of the contact person specified in the Plan's Notice of Privacy Practices). If an Individual requests review of a decision to deny access, the Plan will refer the request to a designated licensed health care professional, who was not directly involved in the denial, for review. The reviewing official will determine, within a reasonable period of time, whether to deny the access requested. The Plan will promptly provide the Individual with written notice of that determination and take any other action required by the Privacy Standards to carry out determination.

Unreviewable grounds for denial. The Plan may deny an Individual access with providing the Individual an opportunity for review, in the following circumstances; (a) the PHI is excepted from the right of access by the Privacy Standards; (b) the PHI is contained in records that are subject to the Privacy Act, 5 U.S.C. 552a, if denial would meet the requirements of that law; and (c) the PHI was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information.

Reviewable grounds for denial. The Plan may deny an Individual access, provided the Individual is given the right to have such denials reviewed, where: (a) a licensed health care professional has determined that such access is reasonably likely to endanger the life or physical safety of the Individual or another person; (b) the PHI makes reference to another person (unless such other person is a health care provider) and a licensed health care professional has determined that the access requested is reasonably likely to cause substantial harm to such other person; or (c) the request for access is made by the Individual's personal representative and a licensed health care professional has determined that the provision of access to such personal representative is reasonably likely to cause substantial harm to the Individual or other person.

If the Plan does not maintain the PHI that is the subject of the Individual's request for access, and the Plan knows where the requested information is maintained, the Plan will inform the Individual where to direct the request for access.

An Individual or his or her personal representative will be required to request access to the Individual's PHI in writing. Such requests should be addressed to the contact person specified in the Plan's Notice of Privacy Practices.

In addition to the actions set forth above, the Plan shall:

- Document what constitutes the Designated Record Set that includes PHI; for example, the Plan may include all records relating to an Individual's enrollment, eligibility, claims or appeals, but exclude records related to audits of individual claims for quality review purposes;
- Ensure that Designated Record Sets are kept separate from employment-related documents and employee personnel files;
- Determine whether requested information is subject to the inspection and copying requirements of the Privacy Standards;
- Date and time-stamp written requests when they are received to ensure that either responses are generated within 30 days or that extensions are requested;
- Log all requests and assign a supervisor to monitor the log on a weekly basis; and
- Log all inspections and/or copies made of PHI.

The Plan shall maintain forms for requesting, and responding to requests for, inspection and copying of PHI.

6. Right to Amend PHI. An Individual has the right to request the Plan to amend his or her PHI or a record about him or her in a Designated Record Set for as long as the PHI is maintained in the Designated Record Set.

The Plan may deny an Individual request for amendment if it determines that the PHI or record that is the subject of the request:

- Was not created by the Plan, unless the Individual provides a reasonable basis to believe that the originator of PHI is no longer available to act on the requested amendment;
- Is not part of the Designated Record Set;
- Would not be available for the Individual's inspection under the Privacy Standards; or
- Is accurate and complete.

The Plan has 60 days after the request is made to act on the request. A single 30-day extension is allowed if the Plan is unable to comply within that deadline provided that the Plan, within the original 60-day time period, gives the Individual a written statement of the reasons for the delay and the date by which it will complete its action on the request. If the Plan accepts the requested

amendment, the Plan shall make the appropriate amendment to the PHI or record that is the subject of the request by, at a minimum, identifying the records in the Designated Record Set that are affected by the amendment and appending or otherwise providing a link to the location of the amendment. The Plan shall timely inform the Individual that the amendment is accepted and obtain his or her identification of and agreement to have the Plan notify the relevant persons with which the amendment needs to be shared as provided in the Privacy Standards. The Plan shall make reasonable efforts to inform and provide the amendment within a reasonable time to (a) persons identified by the Individual as having received PHI about the Individual and needing amendment; and (b) persons, including Business Associates (as defined in the Privacy Standards) of the Plan, that the Plan knows have the PHI that is the subject of the amendment and that may have relied, or could foreseeably rely, on such information to the detriment of the Individual.

If the request is denied in whole or in part, the Plan shall provide the Individual with a written denial that (i) explains the basis for the denial, (ii) sets forth the Individual's right to submit a written statement disagreeing with the denial and how to file such a statement, (iii) states that, if the Individual does not submit a statement of disagreement, he or she may request that the Plan provide his or her request for amendment and the denial with any future disclosures of the PHI that is subject to the amendment, and (iv) includes a description of how the Individual may complain to the Plan or to the Secretary of HHS (including the name, or title, and telephone number of the contact person specified in the Plan's Notice of Privacy Practices). The Plan may reasonably limit the length of a statement of disagreement. Further, the Plan may prepare a written rebuttal to a statement of disagreement, which will be provided to the Individual. The Plan shall, as appropriate, identify the record or PHI in the Designated Record Set that is the subject of the disputed amendment and append or otherwise link the Individual's request for an amendment, the Plan's denial of the request, the Individual's statement of disagreement, if any, and the Plan's rebuttal, if any, to the Designated Record Set. If a statement of disagreement has been submitted, the Plan will include the above-referenced material, or, at the Plan's election, an accurate summary of such information, with any subsequent disclosure of the PHI to which the disagreement relates. If the Individual does not submit a written statement of disagreement, the Plan must include his or her request for amendment and its denial, or an accurate summary of such information, which any subsequent disclosure of the PHI only if requested by the Individual.

If the Plan is informed by another Covered Entity (as defined in the Privacy Standards) of an amendment to an Individual's PHI, the Plan shall amend the PHI in Designated Record Sets as required by the Privacy Standards.

An Individual or his or her personal representative will be required to request amendment to PHI in a Designated Record Set in writing. Such requests should be addressed to the contact person specified in the Plan's Notice of Privacy Practices. All requests for amendment of PHI must include a reason to support the requested amendment.

In addition to the actions set forth above, the Plan shall:

- Document what constitutes the Designated Record Set that includes PHI; for example, the Plan may include all records related to an Individual's enrollment, eligibility, claims or appeals, but exclude records to audits of individual claims for quality review purposes;
- Ensure that Designated Record Sets are kept separate from employment-related documents and employee personnel files;
- Determine whether the Information requested is subject to the amendment requirements of the Privacy Standards;
- Date and time-stamp written requests when they are received to ensure that either responses are generated within 60 days or that extensions are requested;
- Log all requests and assign a supervisor to monitor the log on a weekly basis;
- If the request to amend is approved, log the result and include in the log how the Designated Record Set will be changed and how the Individual was notified of the approval; and
- Ensure that related future disclosures include documentation regarding the amendment.

The Plan shall maintain forms for requesting, and responding to requests for, amendment or correction of PHI.

7. Right to Receive an Accounting of PHI Disclosures. At an Individual's request, the Plan shall provide the Individual with an accounting of disclosures by the Plan of his or her PHI during the six years prior to the date on which the accounting is requested. However, such accounting need not include PHI disclosures made (a) to carry out treatment, payment, or health care operations; (b) to individuals about their own PHI; (c) incident to a use or disclosure otherwise permitted or required by the Privacy Standards; (d) pursuant to an authorization; (e) to certain persons involved in the Individual's care or payment for that care; (f) to notify certain persons of the Individual's location, general condition or death; (g) as part of a "Limited Data Set" (as defined in the Privacy Standards), which largely relates to research purposes; or (h) prior to the compliance date of April 14, 2004. An Individual may request an accounting of disclosures for a period of time less than six years from the date of the request.

The accounting will include disclosures of PHI that occurred during the six years (or such shorter time period, if applicable) prior to the date of the request for an accounting, including disclosures to or by Business Associates of the Plan. Except as otherwise provided below, for each disclosure, the accounting will include:

- The date of the disclosure;
- The name of the entity or person who received the PHI and, if known, the address of such entity or person;
- A brief description of the PHI disclosed; and
- A brief statement of the purpose of the disclosure that reasonably informs the Individual of the basis for the disclosure, or, in lieu of such statement, a copy of the Individual's written authorization or a copy of a written request for disclosure.

If during the period covered by the accounting, the Plan has made multiple disclosures of PHI to the same person or entity for a single purpose, the accounting may, with respect to such multiple disclosures, provide the above-referenced information for the first disclosure; the frequency, periodicity, or number of the disclosures made during the accounting period; and the date of the last disclosure.

If during the period covered by the accounting, the Plan has made disclosures of PHI for a particular research purpose for 50 or more Individuals, the accounting may, with respect to such disclosures for which an Individual's PHI may have been included, provide certain information as permitted by the Privacy Standards. If the Plan provides an accounting for such research disclosures, and if it is reasonably likely that an Individual's PHI was disclosed for such research activity, the Plan shall, at the Individual's request, assist in contacting the entity that sponsored the research and the researcher.

If the accounting cannot be provided within 60 days after receipt of the request, an additional 30 days is allowed if the Individual is given a written statement of the reasons for the delay and the date by which the accounting will be provided.

If an Individual requests more than one accounting within a 12-month period, the Plan shall charge a reasonable, cost-based fee for each subsequent accounting unless the Individual withdraws or modifies the request for a subsequent accounting to avoid or reduce the fee.

An Individual or his or her personal representative will be required to request an accounting of PHI disclosures in writing. Such requests should be addressed to the contact person specified in the Plan's Notice of Privacy Practices.

The Plan shall maintain forms for requesting, and responding to requests for, accountings of PHI disclosures.

8. Effective Date. This Policy shall be effective on April 14, 2004, and shall be thereafter implemented by the Privacy Officer. Accordingly, the School District, as the Plan Sponsor and the Plan Administrator, has executed this Policy as of the effective date set forth below.

Effective the 14th day of April, 2004.

Superintendent: _____

Attest:

Bookkeeper: _____

Adopted June 2004

