



Tom Green County HIPAA Policy

February 19, 2009

Master Policies Maintained in the County Treasurer's Office

This Copy Belongs to: _____
(Department Name)

Department -HIPAA Contact is:

(24 hour operational Departments will have a contact per shift and or location)

**Tom Green County HIPAA Privacy Officer is:
Dianna Spieker, County Treasurer**

This Policy was compiled from various sources which includes information received, data collected, and publications issued by the Texas Association of Counties, BLR HIPAA Guide, Comp Link, and various educational seminars.

Approved by Tom Green County Commissioners' Court December 23, 2003

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Section 1- Overview

1.01 HIPAA – What is it?

Health Insurance Portability and Accountability Act of 1996 (HIPAA 1996)

Standards for Privacy of Individually Identifiable Health Information (SPIIHI 2003)

Private Health Information, also known as PHI

The HIPAA Privacy Rule (known formally as the HIPAA Standards for Privacy of Individually Identifiable Health Information) was first published by the U.S. Department of Health and Human Services (HHS) on December 28, 2000, and modifications were adopted on August 14, 2002. The new rule provides the first comprehensive federal protection for the privacy of health information. HHS has stated that the Privacy Rule, as modified, is carefully balanced to provide strong privacy protections that do not interfere with a patients' access to, or the quality of, healthcare delivery.

The coverage of the HIPAA Privacy Rule is limited to three types of covered entities over which HHS has authority under HIPAA: Health Plans, Health Care Clearinghouses, and Health Care Providers who conduct certain healthcare transactions electronically. An Important Notation is the Privacy Rule does not regulate employers as such. It does regulate them in their role as sponsors of group health plans, as health insurers or HMO's, and as healthcare providers.

While the Privacy Rule establishes, for the first time, a foundation of federal protections for the privacy of protected health information, it does not replace any federal, state, or other law that grants individuals even greater privacy protections, and covered entities are free to retain or adopt more protective policies and practices.

The Privacy Rule provides that, in general, a covered entity may not use or disclose an individual's healthcare information without permission except for treatment, payment, or healthcare providers.

The Privacy Rule is broad in scope; thus, Tom Green County is taking a pro-active role. Therefore, within reason, the Privacy Rule will be incorporated into both employee and non-employee Private Health Information (PHI) regardless of origin, to the extent of maintaining the information in a confidential and secure manner within the spirit of the act.

1.02 Key Concepts

Protected Health Information (PHI)/Individually Identifiable Health Information

PHI is defined in the regulations as individually identifiable health information that is transmitted by electronic means, maintained in an electronic form, or transmitted or maintained in any other form or medium. Therefore, PHI includes almost all individually identifiable health information. *An important exclusion is employment records held by a covered entity in its role as an employer.*

Covered Entities

PHI has to be created or received by a covered entity. Covered entities are healthcare providers, healthcare clearinghouses, and healthcare plans. Employers in General are not covered entities.

Tom Green County is classified as a Hybrid Entity for the following reasons:

- Provides an employee Health Plan Benefit
- Provides Indigent Health Care
- Provides Limited Medical Services, in accordance with State Statutes for Crime Victims, Incarcerated Individuals.

Although these services are provided it is not Tom Green Counties Responsibility to pay for any medical treatment. Therefore, TGC acts as a clearinghouse for certain medical bills.

Provider- A healthcare provider is a healthcare facility, a provider of medical or health services, and any other organization who furnishes, bill, or is paid for health care in the normal course of its business. (Example: Indigent Health Care, Jail, and Employee Benefits)

Health Plans – Any group plan that provides or pays for the cost of medical care. A Group Health Plan is ER-ISA employee benefit welfare plans to the extent that it provides medical care whether insured or self-insured. Exclusions from Coverage as Health Plans Include Liability Insurance; Workers Compensation

Section 2.00 County Employer vs. County Employee

General guidelines stating Employer and Employee Responsibilities

2.01 Employer

An employer must be concerned with the Privacy Rule as it pertains to:

ADA-American with Disabilities Act- For ADA compliance, Tom Green County, may require medical information about an employee to determine if the employee has a protected disability, whether the employee can perform their job functions, and what reasonable accommodations could be made to allow a disabled employee to work. To obtain this information Tom Green County can request the employee to submit the information directly (no authorization required) or request the information from the respective provider (authorization required). If an employee refuses to obtain the information or refuses to sign an authorization, Tom Green County will consider the employee not cooperative in achieving a reasonable accommodation.

FMLA-Family Medical Leave Act- FMLA requires that employees provide their employer with a medical certification completed by the provider to verify that the employee has a serious health condition. If the employee refuses to provide the medical certification or refuses to give authorizations for Tom Green County to obtain the information, the request for FMLA cannot be substantiated, and therefore, will be denied.

Paid Sick and Disability Leave- Tom Green County requires medical certifications in certain circumstances. Refer to the Personnel Policies of Tom Green County for additional information. Failure to comply with policies can result in paid sick leave being denied.

Workers Compensation- A covered entity may disclose PHI as authorized by and to the extent necessary, to comply with laws relating to worker's compensation or similar laws that provide benefits for work related injuries or illness without regard to fault. Disclosure without authorization may also be made to the extent the disclosure is required by state or other law. The disclosure must comply with and be limited to what the law requires. A covered entity may disclose workers compensation information for the purposes of obtaining payment for any health care provided to the injured or ill worker.

On-Site Clinics- Tom Green County does not have an on-site facility at this time.

Return to Work and Modified Duty – Employees are required to provide a note authorizing return to work. If the return to work note is submitted directly to Tom Green County by the provider, then the employee must have signed a consent form. However, if the employee provides the return to work note, no consent form is needed.

Pre-Employment Physicals- Tom Green County will provide all prospective employees with a consent form, to be signed by the prospective employee, authorizing the provider to submit the results of the pre-employment testing directly to Tom Green County.

2.01 Employer Cont.

Substance Abuse Testing Programs A substance abuse testing facility may need to follow the Privacy Rule. If the Facility does fall in this category then an authorization form will be needed.

Occupational Health and Safety Requirements To the extent that an examination is conducted at the request of the employer for the purpose of such workplace medical surveillance or work related illness or injury, and Tom Green County needs the information to comply with MSHA; or similar state law, an authorization form is not needed to meet such legal obligations. However, the employee will be provided with written notification when disclosures are requested.

Law enforcement- Tom Green County may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

2.02 Employee

It is the employee's responsibility not to discuss personnel health information to other employees of Tom Green County. Tom Green County is not liable for Personal Health Information (PHI) passed among co-workers that is originally disclosed by the employees themselves.

2.03 Management

Management staff may ask for PHI as required to maintain compliance with Personnel Policies. This need to know information includes, but not limited to, Job performance; Family Medical Leave Act; Sick Leave Pool; Workers Compensation; Drug Testing; Physicals and Quarantines, and Leave Requests

Employees involved in discussions that include protected health information are to take reasonable measures to make sure that such discussions are not overheard.

Employee PHI collected, whether Verbal or Written, will be kept confidential. Records will be maintained as follows:

- Secured separate files
- Only authorized personnel shall have access
- Only management has access within department
- Data will not be disclosed to co-workers
- Transmittal of information will comply with HIPPA Privacy act unless State and Federal Laws, Court Orders or Open Records Act is required
- For security purposes individuals will be assigned a unique Identification Number

Non- Employee PHI collected, whether Verbal or Written, will be kept confidential. Non-Employee PHI is not subject to HIPAA, however the following will apply:

- Records will be maintained in secured files
- Access will be limited to authorized personnel
- A reasonable effort will be made to keep PHI confidential
- Transmittal of information will comply with State and Federal Laws, Court Orders or Open Records Act as needed and required
- For security purposes individuals will be assigned a unique Identification Number

2.04 Information Technology

Tom Green County Information Technology Department maintains security of any computerized data by password-protected access and by installing firewall protections. For details on Technological Security refer to the Information Technology Policies and Procedures Manual.

Section 3-PHI Inventory

3.01 Categories of PHI

In an effort to protect the Protected Health Information (PHI) of Tom Green County employees and non-employee PHI, an inventory assessment was conducted. To properly access PHI, it was necessary to determine the categories of the information held in each office. Individual Departments may have additional requirements refer to Section 3.02 for more information.

Category 1- Employee

- Employee PHI
- Family Medical Leave Act
- Health Benefits
- Liability Insurance
- Non-Employee PHI
- Requirements of Personnel Policies and Procedures
- Sick Leave Pool
- Workers Compensation
- Leave Requests

Category 2 – Employee – County Offices

- Employee PHI as required to comply with TGC Personnel Policies
- Limited to Immediate Office Staff
- PHI is not maintained in this office

Category 3 – Non-Employee – Courts, Law Enforcement, & Probation

- Victims of Crime
- Court Defendants and Plaintiffs
- Law Enforcement PHI is not subject to HIPAA
- Probationers

Category 4 – Non-Employee – Indigent Health Care, Detention/Treatment Facilities, Veteran’s Office and Extension Offices

- Indigent Health Care Clients
- Incarcerated Individuals
- Individuals in Treatment Facilities
- Participants in Extension Activities may be required to offer a Health Statement in order to participate in certain activities or field trips.
- PHI is not subject HIPAA requirements, however
- PHI is subject to limited HIPAA requirements
- Veteran’s may be required to offer Health Statements to receive benefits or assistance from the Veteran’s County Service Office
- Privacy will be maintained subject to Section 2.03

3.02 PHI-By Department

Category 1 Departments

Treasurer-

- County Treasurer – Dianna Spieker – HIPAA Privacy Officer
- Accounts Payable and Accounts Receivable
- Billing Information
- Chairs HIPAA review Committee
- Employee – PHI Relating to Personnel Policy Compliance
- Employee Benefits, Employee Files, Employee HIPAA
- HIPAA request
- Non-Employee PHI
- Maintains HIPAA Procedures and Policies
- May have access to PHI received by any office, as deemed necessary
- May View Both Employee and Non-Employee PHI
- Office Staff – PHI Relating to Personnel Policy Compliance
- Sick Leave Pool
- Workers Compensation, FMLA, Liability Insurance, including Bid Specifications, as necessary
- Other PHI not previously described

Auditor-

- May view PHI in an audit review capacity
- May have access to PHI received by any office as deemed necessary
- May View Both Employee and Non-Employee PHI
- Office Staff – PHI Relating to Personnel Policy Compliance

Information Technology-

- May have access to PHI while maintaining computer security
- Office Staff – PHI Relating to Personnel Policy Compliance

Commissioner's Court Administrative Assistant-

- As Supervisor to Risk Management and Personnel Departments, individual has access to PHI handle in those offices.
- Admin Services Staff – PHI Relating to Personnel Policy Compliance

Risk Manager-

- Liability Insurance
- Workers Compensation
- Pre-Employment Testing and Post Accident Testing
- May have access to certain Employee Records held in the Treasurer's as necessary to maintain compliance with other Tom Green Policies
- Office Staff – PHI Relating to Personnel Policy

Personnel-

- Family Medical Leave Act
- Pre-Employment Testing
- Sick Leave Pool
- Office Staff – PHI Relating to Personnel Policy

Cont. 3.02 PHI-By Department

Category 2 Departments- Employee – County Offices

Building Maintenance
Environmental Health
Library
Purchasing
County Shop
Extension Service

Elections
Housekeeping
Parks
Road and Bridge Departments
Tax Assessor-Collector (Auto)
Records Management

- Office Staff – PHI Relating to Personnel Policy Compliance
 - Limited to Immediate Office Staff
 - PHI is not maintained in this office
- (Records Management will house other Departments PHI, but is not eligible to review)

Category 2 & 3 Departments

Community Supervision and Corrections (CSCD)
County Clerk
County Constables
County Attorney
Justice Courts
District Courts

District Clerk
Mental Health Unit
District Attorney
County Courts

- Office Staff – PHI Relating to Personnel Policy Compliance
- Non-Employee PHI may be maintained, as required by
 - o State or Federal Statute
 - o Court Jurisdiction
 - o Law Enforcement Requirements
 - o Criminal Justice Standards
- Privacy will be maintained subject to Section 2.03

Cont. 3.02 PHI-By Department

Category 2, 3, & 4 Departments

Court Residential Treatment Center (CRTC)
Juvenile Justice
Indigent Health Care
Jail

Veteran Services Offices
Juvenile Probation
Sheriff

- Office Staff – PHI –Relating to Personnel Policy Compliance
- Non-Employee PHI may be maintained, subject to compliance issues, as required by
 - o Court Jurisdiction
 - o Criminal Justice Standards
 - o Federal and State Veteran’s Procedures
 - o Law Enforcement Requirements
 - o State or Federal Statute
 - o Texas Council Alcohol and Drug Abuse
 - o Texas Department of Health
 - o Texas Health and Safety Code
 - o Texas Juvenile Probation Commission
- Privacy Standards will be kept in accordance with Section 2.03

All efforts will be made to train employees to understand privacy procedures. The Privacy Contact of each Department will be the Department Head. The Department Head may delegate the Privacy Contact duties to a member of their staff, (refer to front page of manual). In addition, all PHI will be maintained in a secure environment with authorized access only.

Section 4 – HIPAA Guidelines for Employees

4.01 PRIVACY NOTICE FOR TOM GREEN COUNTY EMPLOYEES

Notice of Health Information Practices Maintained in the County Treasurer's Office

This notice describes how information about you may be used and disclosed and how you can obtain access to this information. Please review it carefully.

The County Treasurer's office collects the following types of information in order to provide benefits:

- Information that you provide during open insurance enrollment, including personal information such as your:
 - o Address
 - o Telephone number
 - o Date of birth
 - o Social Security number.
- Plan contributions and account balance information.
- The fact that you are or have been enrolled in the plans.
- Information regarding your health status, including diagnosis and claims payment information, if you the employee provide this information directly to the Treasurer to receive assistance as you request or require
- Changes in plan enrollment (e.g., adding or dropping a participant, adding or dropping a benefit).
- Payments of plan benefits.
- Other information about you necessary in providing you with health benefits.

4.02 Understanding Your Health Record/Information

Each time you visit a hospital, physician, or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment.
- Means of communication among the many health professionals who contribute to your care.
- Legal document describing the care you received.
- Means by which you or a third-party payer can verify that services billed were actually provided.
- Tool in educating health professionals.
- Source of data for medical research.
- Source of information for public health officials charged with improving the health of the nation.
- Source of data for facility planning and marketing.
- Tool with which the plan sponsor can assess and continually work to improve the benefits offered by the group healthcare plan.

Understanding what is in your record and how your health information is used helps you to:

- Ensure its accuracy.
- Better understand who, what, when, where, and why others may access your health information.
- Make more informed decisions when authorizing disclosure to others.

4.03 Tom Green County Employee Benefit Providers and Contacts

Zesch and Pickett 653-1448
Herring and Martin Insurance 658-3099

Tom Green County has contracted with the following entities:
Medical Coverage – Blue Cross Blue Shield
Dental Coverage – Ameritas
Life Coverage – Madison Life

4.04 Your Health Information Rights

Although your health record is the physical property of the plan, the healthcare practitioner, or the facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on otherwise permitted uses and disclosures of your information for treatment, payment, and healthcare operations purposes and disclosures to family members for care purposes.
- Obtain a paper copy of this notice of information practices upon request, even if you agreed to receive the notice electronically.
- Inspect and obtain a copy of your health records by making a written request to the plan privacy officer.
- Amend your health record by making a written request to the plan privacy officer that includes a reason to support the request.
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Section 5 - Policy and Procedure:

5.01 Privacy Rule Compliance

Tom Green County will follow the federal HIPAA privacy regulations with respect to the confidentiality of health information records.

Any information disclosed subject to HIPAA-protected health information (PHI) is treated as “confidential.” Access to PHI will be only for group healthcare plan administration functions, and PHI will be released only to the minimum extent necessary to carry out such functions as enrollment, changes in enrollment, payroll deductions, filing benefit claims, paying benefits, explanations of benefits, coordination of benefits, denial of benefits, etc. It is Tom Green County’s intent to only permit the use and disclosure of PHI consistent with the HIPAA privacy regulations.

The following classes of individuals may access Employee HIPAA-protected health information (PHI): Treasurer, Treasurer Staff, Risk Manager, Personnel, and Insurance Agents.

Any information that is on file shall be available to the participant, except as provided in the HIPAA privacy regulations.

Business associates of the plan or the plan sponsor (such as providers of claims processing, claims processing administration, data analysis, utilization review, quality assurance, billing, benefit management, or practice management; or legal, accounting, actuarial, or financial consulting) will be required to agree to comply with applicable HIPAA privacy regulations if they receive PHI.

Tom Green County will not permit PHI to be used in employment-related actions or in connection with any other employee-benefit plan. Before any PHI is released to a plan sponsor or administrator who is also an employer, that entity will be required to agree that PHI will not be used in employment-related actions or in connection with any other employee-benefit plan, and to report any impermissible use or disclosure of PHI.

The participant may request that any PHI be corrected, amended, or deleted. The participant may request an accounting of PHI disclosures. The plan will issue a notice of privacy practices to participants.

Tom Green County Commissioners’ Court designated Dianna Spieker, Tom Green County Treasurer as the HIPAA Privacy Officer to implement and enforce this policy, adopt additional policies and procedures consistent with this policy, adopt policies and procedures consistent with any future HIPAA privacy regulations, and train individuals to carry out these policies and procedures. Such policies and procedures shall include administrative, technical, and physical safeguards to protect the privacy of PHI. The privacy officer is responsible for receiving complaints regarding privacy practices and responding to questions concerning the notice of privacy practices.

Cont. Section 5 - Policy and Procedure:

5.02 Administrative, Physical, and Technical Safeguards of PHI

Tom Green County will provide administrative, physical, and technical safeguards for protected health information to prevent any intentional or unintentional use or disclosure in violation of the HIPAA Privacy Rule, the terms of the plan, and the plan's privacy policies. Safeguards will also be applied to limit incidental uses or disclosures made pursuant to an otherwise permitted or required use or disclosure.

Access to protected health information is limited to employees whose job duties require such access. No other employees will be given keys and passwords allowing access to paper and electronic records that contain protected health information. Paper records that contain protected health information will be kept in locked cabinets or in a room that will be locked when not in use. Access to electronic records that contain protected health information will be restricted and require a password. A designated fax machine located in a limited-access area will be used for sending and receiving documents that include protected health information. E-mails containing protected health information will be immediately filed in a secure area of the computer network and all other copies will be deleted.

Employees involved in discussions that include protected health information are to take reasonable measures to make sure that such discussions are not overheard.

5.03 Training of Employees

All employees who perform work relating to HIPAA will be trained to understand and are able to comply with the policies and procedures with reference to protected health information. The plan privacy officer is responsible for providing and documenting the required training.

5.04 Verifying the Identity of an Individual or Entity Requesting PHI

The identity of an individual requesting protected health information from Tom Green County who is not known by the plan must be verified before the information is disclosed. The individual's authority to receive the information must also be verified. This requirement does not apply to information that is disclosed pursuant to an agreement with opportunity for the subject to agree or object. The privacy officer or his/her designee will determine if any required identity document or statement is sufficient. If the circumstances are reasonable, the privacy officer or his/her designee may rely on statements and documents that on their face meet the requirements.

5.05 Recognizing a Personal Representative

The group health plan will treat a personal representative as the individual for purposes of exercising health information privacy rights. If, under applicable law, a person has authority to act on behalf of an individual who is an adult or an emancipated minor in making decisions related to health care, the plan will treat such person as a personal representative. If, under applicable law, a parent, guardian, or other person so designated, has authority to act on behalf of an individual who is an unemancipated minor in making decisions related to health care, a covered entity must treat such person as a personal representative. If, under applicable law, an executor, administrator, or other person has authority to act on behalf of a deceased individual or of the individual's estate, the group health plan will treat such person as a personal representative.

Cont. Section 5 - Policy and Procedure:

5.06 Sanctions

The group health plan will discipline members of its workforce who fail to comply with the requirements of the HIPAA Privacy Rule or Tom Green County's HIPAA Policies. The privacy officer is responsible for receiving complaints concerning employees' violations and monitoring employees to determine if violations have occurred. This internal sanction policy does not apply to violations that are disclosures by whistleblowers and workforce member crime victims and in the case of retaliatory or intimidating actions taken against individuals for asserting their privacy rights. Complaints about these actions should be directed to the Department of Health and Human Services Office of Civil Rights. The privacy officer will keep a record of all disciplinary actions taken for required retention period.

5.07 Mitigation of Violations

Tom Green County will take all practical steps to reduce the harmful effects caused by uses or disclosures of protected health information in violation of its policies or procedures and the HIPAA Privacy Rule. As soon as Tom Green County learns about such a violation by the plan or its business associates, the privacy officer will halt the use or disclosure and seek the return or destruction of any documents or other information that was disclosed.

5.08 Refraining from Intimidating or Retaliatory Acts

Tom Green County will not intimidate, threaten, coerce, discriminate against, or take other retaliatory action against:

- An individual about whom the plan has protected health information for exercising his or her health information privacy rights or filing a complaint under the plan's complaint procedure.
- Anyone for filing a complaint about a health information privacy violation with the Department of Health and Human Services; testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing into such a violation; or opposing any act or practice made unlawful by the HIPAA Privacy Rule. To be covered by this protection, opposition to an unlawful act must be based on a good-faith belief that the practice opposed is unlawful, must be reasonable, and must not involve a prohibited disclosure of protected health information.

5.09 Bar on Waivers of Privacy Rights by Individuals

The group health plan will not require individuals to waive their health information privacy rights or their right to file a complaint about a health information privacy violation with the Department of Health and Human Services as a condition of the provision of treatment, payment, enrollment in a health plan, or eligibility for benefits.

5.10 Questions or Additional Information-

If you have questions or need additional information, you may contact Dianna Spieker, Tom Green County Treasurer, and HIPAA Privacy Officer. Each Department has a HIPAA Privacy Contact; it is recommended that you contact that individual first. *Refer to front page*

Cont. Section 5 - Policy and Procedure:

5.11 Filing Complaints-

If you believe your privacy rights have been violated, you can file a complaint with the HIPAA Privacy Officer.

Complaint Procedure:

Complaints should be directed to Dianna Spieker, 112 West Beauregard, San Angelo, Texas 76903 or sent via email Treasurer@co.tom-green.tx.us. All complaints must be in written form and contain details of the perceived violation. A written response will be issued within 30 days of receiving the initial complaint. There will be no retaliation for filing a complaint.

5.12 Changes in these policies

The plan reserves the right to change the terms of this notice and to make the new notice provisions effective for all protected health information that it maintains. Any new notice will be sent to you by one of the following means:

- Department Head for disbursement
- Interdepartmental Mail or US Postal Service
- Email
- Payroll Stuffer
- Handouts at Training or Informational Sites

All notices and amendments to these policies will have a reference to the revision date.

Sample Plan Authorization Form

Original Document located in the Treasurer's Office

Tom Green County – Treasurers' Office
Health Insurance Portability and Accountability Act of 1996 (HIPAA 1996)
Standards for Privacy of Individually Identifiable Health Information (SPIIHI 2003)

Consent Form

Name: _____
(Signature)

Social Security Number: _____ Date of Birth: _____

(Check One)

___ I give my consent. I want help when I ask for it.

___ I DO NOT give my consent. I will do it myself.

Privacy Document

Section 1: Authorized Personnel

- a) Privacy Officer- Dianna Spieker, County Treasurer
- b) Treasurer's Office Staff
- c) Insurance Agents Who Have Been Awarded the Insurance Contract(s)
- d) Insurance Plan Agents Who Have Been Awarded the Contract(s)
- e) Tom Green County Risk Manager – Only if it applies to Worker's Compensation

Section 2: Disclosure Period

- a) Definition of Period – Dates of Service
- b) Begins upon signature date
- c) Expires upon termination of employment or
- d) Upon receipt of written notification, with allowance of 5 working days to notify all authorized Personnel

Section 3: Inquiry Limitations

- a) Clarification of bills pending, bills in dispute, bills not paid
- b) Clarification of Explanation of Benefits
- c) Any information requested by Individual

Section 4: Authorization Given

- a) For Employee and Dependents Current and Future

Section 5: Insurance

- a) Health, Dental and Life

Section 6: Discussion

Discussion of procedures will be limited to research needed to properly answer inquiries in Section 3, however, additional information may be given by the respondent that does not apply to Section 3. Such disclosure is deemed human error and not the intent of any involved individual to violate the intent of the Privacy Act of HIPAA.

Section 7: Record Keeping

- a) Records will be maintained by the Treasurer's Office and kept separate from Payroll Files
- b) All Inquiries will be documented
- c) Records to be included, but not limited to, Insurance Enrollments, waivers, non waivers, Cafeteria Enrollment, Insurance Records, FMLA forms, Workers Compensation Forms, any document that may pertain to Dates of Service during Insurance Period.

Section 8: Disclaimer

The attached waiver does not include additional information that may be required to be in compliant with Workers Compensation Laws and Regulations and or Family Medical Leave Act Laws and Regulations. Workers Compensation - Risk Manager shall submit documents to the Treasurer Office as it pertains to Payroll and or Insurance Benefits. Family Medical Leave Act – Personnel shall submit documents to the Treasurer Office as it pertains to Payroll and or Insurance Benefits. Treasurer Office may require additional information as needed to properly account for Payroll and or Insurance Records.

Section 9: Complaint Procedure

Complaints should be directed to Dianna Spieker, 112 West Beauregard, San Angelo, Texas 76903 or sent via email Treasurer@co.tom-green.tx.us. All complaints must be in written form and contain details of the perceived violation. A written response will be issued within 30 days of receiving the initial complaint. Revised 4/29/03

