

 PA TURNPIKE COMMISSION POLICY <i>This is a statement of official Pennsylvania Turnpike Policy</i>		NUMBER: 2.11 APPROVAL DATE: 04-15-2003 EFFECTIVE DATE: 04-15-2003 REVISED DATE: 10-20-2020
POLICY SUBJECT: Health Insurance Portability and Accountability Act (HIPAA)	RESPONSIBLE DEPARTMENT: Human Resources	

A. PURPOSE:

The Pennsylvania Turnpike Commission (Commission) provides employee health benefits through the Commission’s Employee Group Benefit Plan(s) (“Plan”). The Commission adopts this policy to comply with the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and its regulations on protecting the privacy of the Plan Members (the “Privacy Standards”).

B. SCOPE:

This policy applies to all employees and all business associates including, but not limited to, contractors, consultants, and vendors, of the Commission.

C. GENERAL POLICY:

The Commission protects the privacy and confidentiality of protected health information (PHI) whenever it is used by Commission representatives. The private and confidential use of such information will be the responsibility of all individuals with job duties requiring access to PHI in the course of their jobs.

D. DEFINITIONS:

Business Associate - A person or entity who, on behalf of a Covered Entity or an organized health care arrangement, performs or assists in the performance of:

1. A function or activity involving the use or disclosure of individually identifiable health information, including claims processing or administration, utilization review, quality assurance, billing benefit management, practice management, and re-pricing; or
2. Provides legal, actuarial accounting, consulting, data aggregation, management, administrative, accreditation, or financial services for such covered entity or organized health care arrangement

Business Associate Agreement - An agreement or an addendum to an existing agreement that includes the required HIPAA Business Associate terms.

Covered Entity - A health plan, a health care clearinghouse, or a Health Care Provider who transmits any Health Information in electronic form in connection with a transaction. The Commission is a Covered Entity as a health plan because it is self-insured.

Disclosure - With respect to Individually Identifiable Health Information, releasing, transferring, providing access to, or divulging in any other manner, information outside the entity holding the information.

Electronic PHI (ePHI) - Any protected health information (PHI) that is created, stored, transmitted, or received in any electronic format or media. ePHI includes distinct demographics that can be used to identify a patient.

Health Care Provider - A provider of services (as defined in section 1861(u) of the Act, 42 U.S.C. 1395x(u)), a provider of medical or health services (as defined in section 1861(s) of the Act, 42 U.S.C. 1395x(s)), and any other person or organization who furnishes, bills, or is paid for health care in the normal course of business.

Health Information - Any information, whether oral or recorded in any form or medium, that:

1. Is created or received by a Health Care Provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and
2. Relates to the physical or mental health or condition of an Individual; the provision of health care to an Individual; or payment for the provision of health care to an Individual.

Individual - The person who is the subject of PHI.

Individually Identifiable Health Information - Health information, including demographic information collected from an individual that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

Privacy Officer - The individual responsible for the development and implementation of privacy policies and procedures. The Privacy Officer oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to the Commission's policies and procedures covering the use, and access to, protected health information in compliance with federal and state laws.

Protected Health Information (PHI) - Individually Identifiable Health Information received by a Covered Entity that relates to the past or present health of an Individual or to payment of health care claims. PHI includes medical conditions, health status, claims experience, medical histories, physical examinations, genetic information, and evidence of disability. PHI does not include Health Information held by the Commission in its role as an employer, such as information collected from an employee or an employee's health care provider to support an employee's request for FMLA leave.

Use - With respect to Individually Identifiable Health Information, the sharing, employment, application, utilization, examination, or analysis of such information within an entity that maintains such information.

E. PROCEDURES:

Security of PHI. The Commission shall ensure all PHI is properly secured. Written PHI shall be secured at work locations in locked drawers and file cabinets. ePHI shall be password protected and secured. PHI will only be provided to individuals when necessary. Individuals granted access to PHI will be instructed to maintain confidentiality of the information and ensure proper use of the information.

Use and Disclosure of PHI. Use of PHI will be limited to those individuals involved in the operation and administration of employee benefit programs. PHI will only be Disclosed to outside Business Associates when necessary. Any other Use or Disclosure requires written authorization by the Individual.

Restriction on Uses and Disclosures of PHI. Individuals have the right to request restrictions on the Use and Disclosure of their PHI. If the requested restrictions are within the scope of the law, the Commission will not Use or Disclose PHI that is inconsistent with the restrictions, unless mandated by law to do so.

Minimum Necessary Standard. The Commission shall restrict access and use of PHI to the minimum necessary for an employee to perform their specific job function. Electronic and manual access to PHI will be determined by the scope and responsibilities of an employee's position. Routine disclosures must always be limited to the minimum necessary to meet the purpose of the Disclosure.

Business Associates. The Commission will not Disclose PHI to a Business Associate unless there are satisfactory assurances that the PHI is appropriately safeguarded. Satisfactory assurances must be obtained in a Business Associate Agreement. Individual departments, in conjunction with the Procurement and Logistics Department, will review relationships with business partners to determine whether it is appropriate to execute a Business Associate Agreement.

Employee Training. All employees will receive training on the HIPAA policies and procedures. Training will be tailored to the requirements necessary to enable the employee to carry out their job responsibilities. The level of training will depend upon the employee's contact with or access to PHI.

Rights of Employees. HIPAA gives an Individual the right to access, inspect and obtain a copy of PHI. Individuals also have the right to:

- Request a restriction on certain Uses and Disclosures of their PHI.
- Request amendments to their PHI.
- Obtain an accounting of Disclosures of their PHI.
- Request that their PHI be communicated by an alternative means or to an alternative address or to an alternative Individual.
- Revoke their consent to Use or Disclose PHI to the extent that it has not already been relied upon.
- File a complaint to the Privacy Officer and/or the Secretary of the U. S. Department of Health and Human Services if they believe their privacy rights have been violated.

Privacy Officer. The Commission has designated the Manager of Compensation, Leave and Benefits, Human Resources Department as the HIPAA Privacy Officer. Any questions, concerns, or complaints regarding compliance with HIPAA should be directed to the Privacy Officer.

Breach Notification. In the event of a breach of unsecured PHI, the Commission and/or its Business Associate shall provide notification in accordance with the HIPAA Breach Notification Rule, 45 CFR §§ 164.400-414.

Violations. All employees are required to comply with the provisions of this policy letter. Employees found to be in violation of this policy will be subject to disciplinary action, up to and including termination.

This Policy Letter supersedes all previous Policy Letters on this subject.