

Document Type:¹

☒ Policy & Procedure ☐ Process Guideline
☐ Plan ☐ System Description

Adopted: 1/1/2019
Last Reviewed: 3/2/2026
Retired: _____

Revisions: 2/28/2020, 4/11/2022

Document Scope: (applies to Policy & Procedure only)

- The requirements herein apply only to the GCBH BH-ASO Central Office and its functions.
- ☒ The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers².
- The requirements herein apply to both GCBH BH-ASO and its network providers². Additionally, network providers must have internal documents outlining their processes for implementing the requirements, insofar as they relate to actions for which network providers are responsible.

PURPOSE: To establish clear guidelines in regards to individual rights in relationship to their protected health information.

DEFINITIONS

- I. **Individual:** A person who has applied for, is eligible for or has received behavioral health services from a Greater Columbia Behavioral Health (GCBH BH-ASO) network provider. For a child under the age of thirteen, or for a child thirteen or older whose parents or legal guardians are involved in the treatment plan, the definition of individual includes parents or legal guardians.

POLICY

- A. Greater Columbia Behavioral Health (GCBH BH-ASO), in an effort to be compliant with the Privacy Rules of HIPAA's Administrative Simplification provisions and 42 CFR Part 2, sets out in this policy, the individual rights regarding their protected health information. These rights fall into six (6) general categories:
 - a. The right of adequate notice of:
 - i. Uses and disclosure of PHI that may be made by GCBH BH-ASO.
 - ii. The individual's rights and GCBH BH-ASO's legal duties with respect to the individual's PHI.
 - b. The right to access PHI.
 - c. The right to request amendment and/or correction of PHI.
 - d. The right to request and receive an accounting of disclosures of PHI.
 - e. The right to request restrictions on the use and/or disclosure of PHI.
 - f. The right to request confidential communication.

PROCEDURE

1. Adequate Notice:

- 1.1. GCBH BH-ASO recognizes that the most important individual right provision in the HIPAA regulations is the right to notification of GCBH BH-ASO's privacy practices. This right affords individuals the opportunity to become aware of and understand how their PHI will be used and disclosed. This notice becomes the portal through which individuals are able to further access their information and to control the uses and disclosures of such information. GCBH BH-ASO, in its efforts to meet compliance with these regulations, has developed its privacy notices to conform to the requirements as described in the regulations. GCBH BH-ASO published and distributed the GCBH BH-ASO Privacy Notice to those individuals in service on April 14, 2003 (see GCBH BH-ASO Privacy Notice). For individuals entering services after April 14, 2003, the GCBH BH-ASO Privacy Notice is made available through the GCBH BH-ASO provider network, the GCBH BH-ASO website, and posting at the Regional Office.

2. Access to PHI:

- 2.1. GCBH BH-ASO considers all requests from our individuals, or previously enrolled individuals, for access to their PHI that is maintained in the designated record set and that is dated after April 14, 2003 (see policy on Designated Record Set). GCBH BH-ASO considers individual requests to either inspect or obtain a copy of their PHI for as long as their PHI is maintained in the designated record set.
- 2.2. GCBH BH-ASO requires that individuals make their request in writing. The request should address the following:
 - 2.2.1. Identification of the specific PHI that the individual wishes to access;
 - 2.2.2. The reason for their request (this is optional for the individual);
 - 2.2.3. Whether they wish to inspect or obtain copies of the PHI;
 - 2.2.4. Notification of the cost we will charge for copying and postage; and
 - 2.2.5. Notification of their right to obtain a summary or explanation of their information, along with the cost of that service.
- 2.3. GCBH BH-ASO denies an individual access to PHI, and that denial will not be subject to review, if the PHI requested is contained in:
 - 2.3.1. Records or documents compiled in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding;
 - 2.3.2. The PHI is subject to the Federal Privacy Act;
 - 2.3.3. The information was obtained under the promise of confidentiality from another person (not a healthcare provider), and the access requested would be reasonably likely to reveal the source of that information;
 - 2.3.4. The information was created or obtained in the course of research that involves treatment when the individual agreed to the denial of access for the duration of the research (that includes treatment) when consenting to participate in the research, and the individual has been informed that access will be reinstated upon completion of the research; or

- 2.3.5. An inmate requests a copy of PHI and it is determined that such a copy would jeopardize the health, safety, security, custody, or rehabilitation of the individual or other inmates or the safety of an officer or other person responsible for transporting the inmate. GCBH BH-ASO will provide an inmate with the right to inspect his PHI unless other grounds for denial exist.
- 2.4. GCBH BH-ASO denies access to any PHI that a licensed healthcare professional determines:
 - 2.4.1. Exercising professional judgment, is reasonably likely to endanger the life or physical safety of the individual or another person;
 - 2.4.2. Exercising professional judgment, makes reference to another person (not a health care provider), and access is reasonably likely to cause substantial harm to that other person; or
 - 2.4.3. Has been requested by a personal representative, and access by that person is reasonably likely to cause substantial harm to the individual or another person.
- 2.5. When denying an individual access for any of the reasons listed in section 2.4, these denials are subject to review as described below. In addition, if access to the entire record is denied and the individual requests a review of the decision, GCBH BH-ASO makes the entire record available to the individual's attorney, with the consent of the individual, or to a psychotherapist designated by the individual.
- 2.6. It is GCBH BH-ASO's policy to deny individuals access to their PHI only infrequently and in unusual circumstances and, when access is denied, it must be for one of the reasons listed above. Furthermore, GCBH BH-ASO provides access, to the extent possible, to any other requested PHI that is not part of the PHI to which access has been denied.
- 2.7. When an individual has been denied access for one of the reasons that is subject to review, it is GCBH BH-ASO's policy to respond in writing giving the basis for denial in plain language within the time period set forth below. GCBH BH-ASO also informs the individual of their right to request a review of the denial of access and provide a description of how the individual may file a complaint with us or with the Secretary of DHHS.
- 2.8. In any case where the individual requests a review, GCBH BH-ASO promptly refers the denial to another licensed healthcare professional, who has not been directly involved in the denial, for their review. GCBH BH-ASO also promptly informs the individual, in writing, if the reviewer upholds the denial. In cases where the reviewer permits access, the individual is informed.
- 2.9. When GCBH BH-ASO has agreed to grant access to PHI, the individual is notified and arrangements made to do so within 30 days from the date of the request. Should the PHI requested be maintained off-site, GCBH BH-ASO can take longer to respond, but no more than 60 days from the date of the request. In either case, GCBH BH-ASO can obtain a single, 30-day extension of time in those rare cases where we are unable to respond in the initial time period. GCBH BH-ASO notifies the individual of the reasons for delay and the date of completion by means of a written statement.

- 2.10. When GCBH BH-ASO has agreed to inspection of the designated record set, GCBH BH-ASO arranges a mutually agreeable time and place for the inspection.
 - 2.11. When GCBH BH-ASO has agreed to provide copies of the requested PHI, GCBH BH-ASO confers with the individual and determines their preference for the media in which to receive it – paper or electronic (where available). If GCBH BH-ASO cannot agree on how the PHI will be produced, then GCBH BH-ASO produces the PHI in readable hard copy.
 - 2.12. GCBH BH-ASO charges a fee for copying the material and for postage, if the copies are to be mailed, and the individual is notified of that charge prior to GCBH BH-ASO copying the material. However, if the individual is requesting the PHI for the purpose of supporting a claim or appeal under the Social Security Act or any federal or state financial need-based benefit program, GCBH BH-ASO furnishes the PHI within 30 days of the request at no charge to the individual.
 - 2.13. It is GCBH BH-ASO's policy to charge for the cost of making the copies (both the labor and machine and paper cost), but we do not include in our charges the cost of the retrieval and handling of information, nor do we charge for the costs of processing the request.
 - 2.14. GCBH BH-ASO provides summaries of PHI in those cases where the individual has requested them. GCBH BH-ASO charges for the costs associated with producing the summary, and the individual is notified of that charge prior to completing the summary.
 - 2.15. In cases where GCBH BH-ASO receives a request for PHI that GCBH BH-ASO does not maintain, but know where it is maintained, the individual is informed of the location of the PHI.
3. Amendment / Correction:
 - 3.1. GCBH BH-ASO considers all requests from individuals currently receiving or that previously received services, to amend their PHI that is maintained in a designated record set for as long as it is maintained at the Region Office. GCBH BH-ASO requires that all requests for amendment be in writing, and includes the reason for the amendment. GCBH BH-ASO notifies our individuals of our policies for requesting amendments in our Privacy Notice.
 - 3.2. GCBH BH-ASO responds to requests for amendment within 30 days from the date of the request. Should, in rare circumstances, GCBH BH-ASO be unable to respond within 30 days, the individual is notified prior to the expiration of the 30-day period, in writing, and provides the reason that additional time is needed and gives a date (no more than 30 days beyond the original 30 days) by which the individual can expect action on their request be completed.
 - 3.2.1. Instances in which GCBH BH-ASO grants the request for amendment, the following steps are completed:
 - 3.2.1.1. Inform the individual in writing;
 - 3.2.1.2. Obtain their agreement about the list of people or organizations that they, and you, believe should be informed of the amendment; and

3.2.1.3. Notify the list identified above of the amendment. (Note: GCBH BH-ASO will identify anyone who may have relied upon the subject PHI in the past, or who might reasonably be expected to rely upon it in the future and attempt to obtain agreement from the individual about their notification.)

3.2.2. Instances in which GCBH BH-ASO denies the request for amendment, the following steps are completed:

3.2.2.1. Provide the individual with a written denial that is in plain language and that:

3.2.2.1.1. Contains the basis for the denial; and

3.2.2.1.2. The notification that the individual has the right to provide a written statement disagreeing with the denial and how they might file such a statement.

3.2.2.2. Describe to the individual the procedure for filing a complaint either with:

3.2.2.2.1. DHHS or

3.2.2.2.2. With the person or office in our organization who is responsible for receiving complaints, including their name or title and their telephone number.

3.2.2.3. Inform the individual that they may file a statement of disagreement with the GCBH BH-ASO denial that does not exceed 250 words.

3.2.2.4. Inform the individual that they may request, should they not file a statement of disagreement, that their request for amendment and the related denial be attached to all future disclosures of the subject PHI.

3.2.3. GCBH BH-ASO prepares rebuttals in those instances where a licensed healthcare professional determines that a rebuttal is necessary to add clarity to the other material created around this request for amendment.

4. Designated Record Set:

4.1. It is GCBH BH-ASO's policy to take the following actions with respect to the designated record set in amendment situations:

4.1.1. When the amendment request has been granted

4.1.1.1. Identify the subject PHI in the designated record set; and

4.1.1.2. Append the amendment to the PHI or

4.1.1.3. Provide a link to the location in the file of the amendment.

4.2. When the amendment request has been denied and the individual requests it

4.2.1. Identify the subject PHI in the designated record set; and

4.2.2. Append the request for amendment and the denial to the PHI or

4.2.3. Provide a link to the location in the file of the request and the denial.

4.3. When the amendment request has been denied and the individual has filed a statement of disagreement, and we have or have not prepared a rebuttal:

4.3.1. Identify the subject PHI in the designated record set; and

4.3.2. Append the request for amendment, the denial, the statement of disagreement, and, if prepared, our rebuttal to the PHI or

4.3.3. Provide a link to the location in the file of all of the items listed in 4.2.

5. Accounting of Disclosures:

- 5.1. GCBH BH-ASO considers all requests from individuals, or formerly covered individuals, to receive an accounting of certain disclosures of their PHI that have occurred in the six-year period prior to their request, or from the effective date of the Privacy Rule, whichever is shorter. GCBH BH-ASO requires that all requests for an accounting be in writing. GCBH BH-ASO notifies individuals of policies for requesting an accounting in the GCBH BH-ASO Privacy Notice.
- 5.2. GCBH BH-ASO responds to requests for an accounting within 30 days from the date of the request. Should, in rare circumstances, GCBH BH-ASO be unable to respond within 30 days, the individual is notified, in writing during the initial 30-day period, and provided with the reason(s) additional time is needed and given the date (no more than 30 days beyond the original 30 days) by which the individual can expect action on their request be completed.
- 5.3. GCBH BH-ASO accounts for all uses and disclosures of our individuals' PHI except for those in the following categories:
 - 5.3.1. Disclosures made to the individual;
 - 5.3.2. Disclosures made to carry out treatment, payment, or operations;
 - 5.3.3. Disclosures made to persons involved in the individual's care (relatives and/or friends);
 - 5.3.4. Disclosures made for notification purposes to family or personal representatives;
 - 5.3.5. Disclosures for national security or intelligence purposes; and
 - 5.3.6. Disclosure to correctional institutions or law enforcement officials when the individual is an inmate.
- 5.4. In situations where GCBH BH-ASO has made disclosures to a health oversight or law enforcement agency as permitted and, the agency has provided GCBH BH-ASO with a written statement that inclusion of such disclosures would be reasonably likely to impede with their activities and, the agency has provided a specific time period, our policy is to exclude those disclosures from any accounting requested by the subject individual. At the end of that period, the GCBH BH-ASO policy is to include any disclosures made to the agency during that period in any future accountings.
- 5.5. Should the health oversight or law enforcement agency provide GCBH BH-ASO with an oral statement that a disclosure would be reasonably likely to impede their activities, the GCBH BH-ASO policy is to withhold disclosures for a 30-day period after which GCBH BH-ASO includes the disclosures in requested accountings unless a written statement requesting a longer time period has been provided during the 30-day period.
 - 5.5.1. The GCBH BH-ASO policy is to include the following items in every accounting:

- 5.5.1.1. The date of the disclosure;
- 5.5.1.2. The name and address of the person or organization receiving the PHI;
- 5.5.1.3. A brief description of the PHI disclosed; and
- 5.5.1.4. A brief statement that reasonably informs the individual of the purpose for the disclosure.

5.6. GCBH BH-ASO's policy with respect to multiple disclosures of an individual's PHI to the same person or entity for the same purpose is to present all of the information listed above for the first disclosure in the accounting period. In addition, GCBH BH-ASO presents the frequency, periodicity, or number of disclosures made during the accounting period and the date of the most recent disclosure.

5.7. GCBH BH-ASO provides the first accounting in each 12-month period, beginning with the individual's first request for an accounting, at no charge. Any additional request for accounting from the same individual during their 12-month period is made subject to the individual's agreement to pay a reasonable, cost-based fee for the additional accounting. GCBH BH-ASO informs the individual of the fee and obtains their written agreement to pay the fee prior to preparing the accounting. GCBH BH-ASO offers the individual an opportunity to withdraw or modify their request in order to avoid or reduce the fee.

6. Restrictions:

6.1. GCBH BH-ASO considers an individual's request for restriction of the uses and disclosures that GCBH BH-ASO makes for purposes of treatment, payment, and operations. GCBH BH-ASO requires individuals to make their request in writing. GCBH BH-ASO discusses with the individual the potential difficulties that are inherent in the restrictions that the individual requests.

6.2. GCBH BH-ASO documents the request and, ultimately, whether the restriction has been granted to the individual. While GCBH BH-ASO is not required by the Privacy Rule to agree to individual-requested restrictions, GCBH BH-ASO grants those restrictions that GCBH BH-ASO believes, in its judgment, to be in the best interests of individuals.

6.3. GCBH BH-ASO abides by all of the restrictions that are granted, except as described below.

6.3.1. When the individual is in need of emergency treatment and the restricted PHI is needed to provide the emergency treatment, GCBH BH-ASO policy is to disclose the PHI that is required for treatment and to send along with the PHI the requirement that there be no further uses or disclosures of the restricted PHI. In non-emergency situations, when we receive a request for PHI that is restricted but required for appropriate treatment, GCBH BH-ASO discusses with the individual the need to send the PHI and attempt to obtain their agreement. The individual's agreement is documented by a note in their record.

6.4. In any case where GCBH BH-ASO believes the individual's restriction can no longer be honored, GCBH BH-ASO terminates the restriction. It is GCBH BH-

ASO's policy to discuss the change of circumstance with the individual and ask for their agreement and to document that agreement in the record.

- 6.5. Should the individual refuse to agree to the termination of the restriction, GCBH BH-ASO implements a unilateral termination. This is also documented in the record. The PHI that GCBH BH-ASO created or received during the term of the restriction is flagged to assure that future uses and disclosures of it are made in accordance with the restrictions in place for that period.

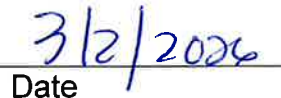
7. Confidential Communications:

- 7.1. GCBH BH-ASO considers an individual's written request for confidential communications upon request for same. GCBH BH-ASO will document the alternative information and the approval. Documentation will be placed in the record or noted in an electronic database. GCBH BH-ASO will grant reasonable requests. Reasonableness will be judged by the administrative difficulty of complying with the request.
- 7.2. GCBH BH-ASO will not ask the individual to explain why they wish to have GCBH BH-ASO communicate with them by alternative means or to alternative locations.
- 7.3. GCBH BH-ASO will not comply with the individual's request unless they have provided GCBH BH-ASO with complete information to enable us to communicate with them, i.e. a complete address or other method of contact.
- 7.4. GCBH BH-ASO will provide adequate notice of the request to those employees who may need to contact the individual by flagging the record and, where possible, other databases.

APPROVAL



Karen Richardson or Sindi Saunders, Co-Directors



Date