Document Type:[1] _X_ Policy & Procedure ___ Process Guideline ___ Plan ___ System Description

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Document Scope: (applies to Policy & Procedure only)

– The requirements herein apply only to the GCBH BH-ASO Central Office and its functions.

X The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers[2].

– The requirements herein apply to both GCBH BH-ASO and its network providers[2]. 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 define requirements for training of the Privacy and Security Regulations of the law.

DEFINITIONS

I. HIPAA: The Health Insurance Portability and Accountability Act (HIPAA) passed in 1996 as part of congressional response to the breach of confidentiality of individual's protected health information.

II. HITECH: Health Information Technology for Economic and Clinical Health 04/27/09.

III. Protected Health Information (PHI): Broadly defined term in HIPAA to include all information created during medical, psychological, therapeutic and social services provided to an individual where the information is either stored electronically or the fee for the services is billed electronically.

POLICY

A. Greater Columbia Behavioral Health (GCBH BH-ASO) stores protected health information electronically and bills for services electronically so are considered a Covered Entity under HIPAA.

B. GCBH BH-ASO trains agency staff at least yearly on the requirements of the Privacy and Security Regulations of the law. The Training Curriculum is reviewed and modified as required annually through the efforts of the HIPAA Officer of the agency.

PROCEDURE

Training outlines should address the following:

1. An Overview of the Law:
   1.1. Technology
   1.2. Policy
   1.3. Practice
2. Purpose of the Privacy Regulations
3. Purpose of the Security Regulations
4. Purpose of the Standardization of the Transaction and Code Sets
5. Privacy Regulations:

[1]See definitions of document types in AD100, "Development, Approval & Review of Formal GCBH BH-ASO Documents"
[2]"Network Provider" – An organization with which GCBH BH-ASO is contracted for the provision of direct services.

5.1. Definition of Protected Health Information

5.2. Individual Rights to Notice, Access, Accounting and Modification

5.3. Business Relationships

5.4. Policies and Procedures of the Agency

5.5. Need to Know "Minimum Necessary Disclosure"

6. Security Regulations:

6.1. Administrative Safeguards:

6.1.1. Contingency Plan

6.1.2. Chain of Trust Agreements

6.1.3. Access procedures

6.1.4. Incident Response Procedures

6.1.5. Virus Protection and Backup requirements

6.1.6. Media Controls (use and storage of disks)

6.2. Technological:

6.2.1. Authorization Controls

6.2.2. Data Authentication

6.2.3. Unique User ID

6.2.4. Passwords/PIN/Tokens (Password Management)

6.2.5. Automatic Log off

6.3. Physical Safeguards:

6.3.1. Assigned Security Responsibility

6.3.2. Physical Access Control

6.3.3. Controls over physical media

6.3.4. Secure Workstation Location

6.3.5. Policy over Workstation Use

6.3.6. Security Awareness Training

6.3.7. Workstation Use

APPROVAL

Sindi Saunders — 3/2/2026

Karen Richardson or Sindi Saunders, Co-Directors — Date