

GREATER JOHNSTOWN CAREER & TECHNOLOGY CENTER

SECTION: OPERATIONS

TITLE: HEALTH INSURANCE
PORTABILITY AND
ACCOUNTABILITY ACT

ADOPTED: April 22, 2008

REVISED:

<p>1. Purpose</p> <p>20 U.S.C. Sec. 1232g 34 CFR Part 99</p> <p>2. Authority</p> <p>43 CFR Part 160</p> <p>3. Delegation of Responsibility</p>	<p>826. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT</p> <p>It shall be the policy of the Greater Johnstown Career and Technology Center (GJCTC) to protect and safeguard the protected health information (PHI) created, acquired, and maintained by the GJCTC consistent with the Standards for Privacy of Individually Identifiable Health Information (Privacy Rule) promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), any case law arising from the interpretation thereof, and applicable state laws.</p> <p>For purposes of this policy, all health information created and maintained by GJCTC and its agents that is considered part of a student’s education record under the Family Educational Rights and Privacy Act (FERPA) is not subject to this policy.</p> <p>The Joint Operating Committee and administration recognize that, as an employer and health plan sponsor and a provider of health care services, certain components within its organization engage in HIPAA-covered functions and must comply with the HIPAA Privacy Rule; however, there are other components of the GJCTC that engage in noncovered functions and, thus, are not required to comply with HIPAA Privacy Rule. Therefore, the Joint Operating Committee hereby designated itself as a “Hybrid Covered Entity” under HIPAA and its rules and regulations.</p> <p>The Joint Operating Committee designates the Business Manager as the GJCTC Privacy Officer who will, with individuals appointed by the Administrative Director as members of a Privacy Team, undertake the following tasks to ensure compliance with the HIPAA Privacy Rule:</p> <ol style="list-style-type: none"> 1. Conduct a thorough initial assessment of all existing policies, procedures, and practices for creating, maintaining, using, disclosing, and destroying health information to determine where the gaps may be with respect to meeting HIPAA and/or FERPA standards and as to whether there are reasonable administrative, technical, and physical safeguards to protect the privacy of health information.
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<p>4. Guidelines</p>	<ol style="list-style-type: none"> 2. Draft, adopt and maintain administrative policies and procedures to allow the GJCTC to meet the requirements of the HIPAA Privacy Rule as they may apply to the employee health plan and/or its other covered component(s). 3. Draft and adopt a “Notice of Privacy Practices” (NPP) that describes, among other things, the uses and disclosures that the GJCTC is permitted or required to make under the HIPAA Privacy Rule, its obligations under HIPAA, and the rights related thereto for employees, students, and/or other individuals who may receive services from GJCTC’s covered component(s). Such notice must be drafted and distributed to the GJCTC’s health care provider component and to the employee health plan. 4. Draft and adopt HIPAA-complaint written authorizations to use or disclose PHI for purposes unrelated to treatment, payment, health care operations, and other designated purposes under the HIPAA Privacy Rule. 5. Identify business associates and enter into business associate agreements with all third parties that access PHI when providing services on behalf of the GJCTC in relation to its employee health plan and/or health care provider components. 6. Establish a training program for all members of the GJCTC workforce on HIPAA and the GJCTC’s policies and procedures related thereto “as necessary and appropriate” for said employees to carry out their functions. Such training program shall include periodic refresher courses. <p>The Administrative Director shall serve as GJCTC’s Contact Person/Complaint Officer. This individual will be responsible for handling complaints, which will include documenting, investigating, and the disposition thereof.</p> <p>The Privacy Officer, in conjunction with the Administrative Director, shall ensure the appropriate development and implementation of sanctions against those members of the workforce who fail to comply with the administrative policies and procedures developed hereunder.</p> <p>In addition to ensuring that appropriate administrative policies and procedures are adopted and implemented to ensure compliance with the HIPAA Privacy Rule, the Joint Operating Committee and administration will mitigate, to the extent possible, any harmful effects of improper disclosures of PHI and will refrain from any activity that may intimidate, threaten, coerce, discriminate against, or retaliate against an individual for exercising his/her rights under HIPAA.</p>
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	<p>This policy and the administrative policies and procedures developed and implemented under the authority of the Privacy Officer replace any existing policies and procedures relating to the use and disclosure of PHI. Any separate policies and procedures relating to the use and disclosure of health information can only be maintained to the extent that they do not conflict with these policies and procedures.</p>
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