

LOUISIANA HEALTH CARE QUALITY FORUM

POLICY: Openness and Transparency Policy for Individually Identifiable Health Information	EFFECTIVE: 10-01-2011
DEPARTMENT: LaHIE	REVISED:

PURPOSE

To ensure an openness and transparency about policies, procedures, and technologies that directly affects individuals and/or their individually identifiable health information.

PROCESS

1. Participating organizations, as required by the HIPAA Privacy Rule, must provide a notice of its privacy practices (NPP) to patients, with certain exceptions. This notice of privacy practice should describe how PHI is collected, how it is used, and to whom and for what reason(s) it is disclosed, including the disclosure to a health information exchange. The notice should be:
 - a. Simple, understandable, and at an appropriate literacy level.
 - b. Highlight, through layering or other techniques the disclosures and uses that are most relevant (for example, the notice of privacy practice could have a summary sheet followed by a description of actual use and disclosure practices).
 - c. Adhere to obligations for use of appropriate language(s) and accessibility to people with disabilities.
2. LaHIE has no direct or indirect contact with patients, and thus requires that the duty of providing this notice belong to participating organizations.
3. Individuals should be able to understand what individually identifiable health information exists about them, how that individually identifiable health information is collected, used, and disclosed and whether and how they can exercise choice over such collections, uses, and disclosures.
4. Persons and entities, that participate in LaHIE for the purpose of electronic exchange of individually identifiable health information, should provide reasonable opportunities for individuals to review who has accessed their individually identifiable health information or to whom it has been disclosed, in a readable form and format.
5. Notice of policies, procedures, and technology-- including what information will be provided under what circumstances -- should be timely and, wherever possible, made in advance of the collection, use, and/or disclosure of individually identifiable health information.
6. Policies and procedures developed are consistent with the Nationwide Privacy and Security Framework for Electronic Exchange of Individually Identifiable Health Information and should be communicated in a manner that is appropriate and understandable to individuals.
7. LaHIE considers PHI to be information that identifies a patient, provided to a participating organization in the Exchange, and can include and includes any part of an individual's medical record or payment history.
8. LaHIE mirrors the definition of protected health information as defined by the Health Insurance Portability and Accountability Act (HIPAA) Standards for Privacy of Individually Identifiable

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Health Information, 45 C.F.R. Part 160 and Part 164, Subpart E, and the HIPAA Security Standards, 45 C.F.R. Part 160 and Part 164, Subpart C, both as amended from time to time.

9. As a conduit for the exchange of information among Participants, LaHIE does not dictate the type of PHI the Participants collect and share with LaHIE. LaHIE's hybrid infrastructure model will store a minimum amount of health data centrally, primarily facilitating the secure transfer of health data among Participants that store the health data at their disparate locations. LaHIE will enable the exchange of data stored in existing provider networks while maintaining an option to store data centrally (e.g., smaller provider groups without their own database or network; or public health surveillance databases).
10. As part of their policies, Participants must ensure that patients fully understand the nature of the information exchange, and a public relations effort may be required. At a minimum, these topics should be included in the NPP that each patient receives.
 - a. Explain why Participants collect PHI.
 - b. Describing the privacy practices and security safeguards for controlling PHI.
 - c. Disclosing standards, guidelines, regulations and applicable laws regarding PHI.
 - d. Disclosing who has access to PHI and why.
 - e. Providing processes for patient redress.
 - f. Identifying a primary point of contact and/or responsible party for PHI.
 - g. Informing patients of their rights under the privacy policy.
 - h. Providing patient options regarding the collection, use and disclosure of their PHI.

APPROVAL:

Cindy Munn

Executive Director

Louisiana Health Care Quality Forum