

HIPAA TRAINING CERTIFICATION

I, certify that I have received _____ training
(Print Name) (Hours/minutes)
on the confidentiality of patient health information, specifically the privacy regulations adopted pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), at

_____ on ____/____/____.
(Name and location of facility) (Day/month/year)

I understand that I must maintain the confidentiality of individual healthcare information and agree to comply with UW Medicine Privacy policies and procedures located at <http://depts.washington.edu/comply/privacy.shtml>.

Additionally I understand **and have reviewed and received a copy of** the following summary of selected UW Medicine Privacy Policy and Procedures:

PP-01. The University of Washington (UW) is a hybrid entity with both health care components and non-health care components. UW has designated certain of its health care components and related covered entities as one affiliated health care entity known as "UW Medicine." UW Medicine is comprised of the University of Washington Medical Center and Clinics; Harborview Medical Center and Clinics; UW Medicine Neighborhood Clinics (University of Washington Physicians Network); UW Physicians Sports Medicine Clinic; UW Medicine Eastside Specialty Center; Hall Health Primary Care Center; and UW Physicians. Within these entities, protected health information (PHI) may be shared for treatment, payment and health care operations. PHI may not be shared with the non-health care components of the UW without patient authorization unless it is for the component to support the treatment, payment or health care operations of UW Medicine. Throughout this summary, references to UW Medicine will include UW Medicine's workforce.

PP-02. Prior to April 14, 2003, and until the individual's first contact with UW Medicine for services, UW Medicine entities may continue to rely on the individual's "Registration Consent /Financial Agreement," authorization, or other express legal permission to use and disclose PHI for treatment, payment, or health care operations. Each UW Medicine entity will obtain the individual's acknowledgement of receipt of the UW Medicine Notice of Privacy Practices or make a good faith effort to obtain an acknowledgment for all services provided after April 14, 2003.

PP-03. Outlines UW Medicine's policy for the administrative requirements related to the UW Medicine's Privacy Program. The Administrative Requirements include twelve sections: Training, Sanctions for the Failure to Follow Applicable Privacy Policy or for a Breach of Patient Confidentiality or Security, Safeguards, Disclosures by Whistleblowers, Workforce Member Crime Victims, Mitigation, Retaliatory Acts, Waiver of Rights, Complaints, Personnel Designations, Revisions to Privacy Policies and Procedures, and Documentation of Privacy Policies and Procedures.

PP-04. The law requires UW Medicine to train its workforce, including physicians, on the organization's policies and procedures. UW Medicine maintains documentation of the training provided to each individual for six years.

PP-05. Patients and their families have the right to file complaints about how UW Medicine and individual health care providers use or disclose their PHI. They may complain to the UW Medicine Privacy Office, the individual UW Medicine entity, or the U.S. Department of Health and Human Services • Office for Civil Rights (OCR). If any person complains to a member of the UW Medicine Workforce about a use or disclosure of PHI, the workforce member must contact the Privacy Official of the entity rendering the care immediately. **UW Medicine will not retaliate, or tolerate retaliation, against any one who files a complaint.**

PP-06. The UW Medicine sanction policy requires that appropriate sanctions be applied to workforce members who fail to comply with policies and procedures. Sanctions will be based upon UW Medicine policies and the relative severity of the violation.

PP-08. UW Medicine may share PHI for treatment, payment or health care operations among the UW Medicine entities and with UW components that support UW Medicine. UW Medicine may share PHI with any non-UW Medicine health care provider for treatment purposes. UW Medicine may share the minimum necessary PHI with

non-UW Medicine entities for payment purposes. Questions regarding the sharing of PHI for the health care operations of a non-UW Medicine entity should be directed to the Privacy Official of the entity providing treatment to the patient. Any other disclosure of PHI requires a valid authorization, unless the disclosure is allowed by PP16.

PP-09. Health care providers may communicate face-to-face with their patients about health related products or services that UW Medicine provides. Providers may also communicate with their patients about alternative treatments, coordination of care, or specialty care. UW Medicine must obtain the patient's authorization for any use or disclosure of PHI for non face-to-face marketing unless it is a promotional gift of nominal value.

PP-10. UW Medicine may use or disclose patient demographic information and the dates when patients received health care services to raise funds for its own benefit. UW Medicine must obtain an authorization for the use or disclosure of any other PHI for fundraising purposes. Individuals have the right to opt out of fundraising communications.

PP-11. UW Medicine has identified staff within UW Medicine who will respond to requests for disclosure of PHI. UW Medicine will verify the identity of all requestors and the requestors' legal authority for obtaining PHI. UW Medicine will document the requestors' authority to receive the PHI prior to release of PHI.

PP-12. UW Medicine may disclose PHI to a business associate that is performing an activity on its behalf when UW Medicine obtains satisfactory assurances that the business associate will safeguard the information. Satisfactory assurances are documented in writing through a business associate agreement. Relationships between health care providers involving the treatment of a patient do not require satisfactory assurances and are therefore not business associate relationships. Please contact your entity's Privacy Official if you have questions about whether a business associate relationship exists in a specific situation.

PP-13. Upon admission, patients have the opportunity to decide whether to be included in the hospital's inpatient directories. If a patient opts against disclosure in the directory, UW Medicine will not include that patient in the directory. If a patient is incapacitated at admission, the provider should exercise his or her best judgment on whether to list the patient in the facility directory until the patient is able to express an opinion. Hospitals may release the condition and location of patients when a requestor asks for the patient by name. With the permission of the patient, clergy of the same faith may be given directory information without asking for a patient by name.

PP-14. With exceptions, the personal representative or legally authorized surrogate decision-maker for the patient may sign the acknowledgement for receipt of the UW Medicine *Notice of Privacy Practices (Notice)* and make decisions concerning UW Medicine's use and disclosure of the individual or emancipated minor's PHI. In addition, unemancipated minors may sometimes acknowledge receipt of the UW Medicine *Notice* and make decisions concerning UW Medicine's use and disclosure of their PHI.

PP-15. UW Medicine may use or disclose PHI to relatives or other persons involved in the treatment or care of the patient, provided the patient does not object. When a patient is unable to express his or her wishes, the provider should exercise professional judgment on whether to release any PHI. If PHI is disclosed under these circumstances, UW Medicine will let the patient know of the disclosure as soon as possible.

PP-16. UW Medicine may use or disclose PHI without an individual's authorization for public health activities, health oversight activities, and specialized government functions. UW Medicine may also use or disclose PHI without an individual's authorization to avert a serious threat to the health or safety of any person, to law enforcement when required to do so by law, or pursuant to legal process. Please contact the Privacy Official for your entity for fact-specific questions.

PP-17. Psychotherapy notes maintained by behavioral health providers are a subset of PHI subject to heightened confidentiality protections. Psychotherapy notes may **only** be used or disclosed absent the patient's authorization to conduct UW Medicine training programs, for treatment by the behavioral health professional, to defend against legal action, to protect the health or safety of any person, or when required by law.

PP-18. Research involving human subjects requires review by an approved Institutional Review Board (IRB). Researchers may use or disclose PHI for research when authorized by the human subject or pursuant to an IRB-approved waiver of authorization or alteration. For more information on conducting research, please review the UW Human Subjects Division web page at <http://www.washington.edu/research/hsd/index.php>.

PP-19. Federal law allows UW Medicine to use or disclose a limited data set for research, public health, or health care operations. A limited data set is PHI that excludes 16 specific identifiers of the individual or of relatives,

employers or household members. UW Medicine must obtain satisfactory assurances (data use agreements) from the entity requesting a limited data set prior to allowing the use or disclosure. PHI may be de-identified through removal of 18 specific identifiers. Once de-identified, the data is no longer subject to state or federal privacy laws and regulations.

PP-20. When using or disclosing PHI for payment and health care operations or when the patient has not authorized the use or disclosure, providers may only disclose the minimum necessary PHI required to accomplish the intended purpose.

PP-21. UW Medicine provides all patients (except prisoner patients) a copy of its Notice of Privacy Practices (NPP), which outlines how an individual's PHI will be used or disclosed. UW Medicine is required to make a good faith effort to obtain written acknowledgement of receipt of the NPP from each patient treated.

PP-22. Individuals treated at UW Medicine facilities have a right to request additional restrictions on the use or disclosure of their PHI. UW Medicine is not required to agree to any restriction. If UW Medicine does agree then it must follow the agreed-upon restrictions. All agreed-upon restrictions must be documented in the individual's designated record set. The designated record set contains an individual's medical and billing records, and other information used to make decisions about the individual.

PP-23. An individual has the right to access, inspect or request a copy of PHI contained in the UW Medicine designated record set, unless an exemption applies (e.g., psychotherapy notes, information compiled for risk management purposes, etc.). Requests to access, inspect or photocopy PHI should be referred to the Release of Information Service Area for the entity in which services are provided.

PP-24. An individual may ask a health care provider to correct or amend his or her health care record. Requests must be in writing and state a reason for the requested change. UW Medicine has ten days from receipt of the request to respond in writing. If a provider receives a request for amendment, he or she must immediately contact the Release of Information Service Area for the entity in which services are provided.

PP-25. An individual has the right to request UW Medicine to provide an accounting of all disclosures from an individual's designated record set, excluding those uses or disclosures for which an accounting is not required (e.g., treatment, payment, or health care operations; uses or disclosures made with the individual's authorization; or uses or disclosures incidental to an authorized use or disclosure). If you receive a request for an accounting, please contact the entity's Health Information Management Area.

PP-26. Defines the UW Medicine Medical Record Designated Record Set and the Billing Designated Record Set.

PP-27. This policy sets forth the framework for UW Medicine's collection, management and use of SSNs and is applicable to all UW Medicine units. SSNs must be appropriately encrypted according to UW Medicine Information Security Policy SEC-05.03 – Encryption Standard.

PP-28. To protect patient privacy and to decrease the risk of a breach of confidentiality, patient information should only be faxed to fulfill a treatment, payment, or health care operation obligation or a specifically authorized request.

If I have any questions or would like to know more about these policies and procedures, I can contact a Privacy Officer or view the materials at <http://depts.washington.edu/comply/privacy.shtml>

Dated _____

Signature

Print Name

Department and Box No.

Documentation to me maintained in workforce member department record