



<b>SOUTHERN MANATEE FIRE RESCUE DISTRICT POLICY</b>		
DATE <b>April 14, 2014</b>	VOLUME <b>#3 EMS OPERATIONS</b>	NUMBER <b>#309</b>
CATEGORY <b>STANDARD OPERATING PROCEDURE</b>		
SUBJECT <b>Health Insurance Portability &amp; Accountability Act (HIPAA)</b>		

**INTRODUCTION:**

The standards for Privacy of individually identifiable health information (“Privacy Rule”) established a set of national standards for the protection of certain health information. The U.S. Department of Health and Human Services (“HHS”) issued the privacy rule to implement the requirement of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). The HIPAA Privacy Rule protects all “individually identifiable health information” held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information “Protected Health Information (“PHI”).

**PURPOSE:**

The Southern Manatee Fire Rescue District (SMFR), in recognition of the purpose and requirements of the HIPAA Privacy Rule, establishes this policy and best practices for SMFR personnel.

**SCOPE:**

This policy applies to all employees of the Southern Manatee Fire Rescue District including its volunteers and any part-time employees.

**POLICY:**

The Southern Manatee Fire Rescue District has developed and maintains Privacy Practices for the protection of protected health information (PHI). All individuals who receive medical assessment and treatment from SMFR personnel shall be provided with a copy of the SMFR Privacy Practices.

Management and control of protected health information, which is used for approved purposes including patient care documentation (assessment & treatment) as required by Manatee County Basic Life Support Treatment Protocols, shall be compliant with HIPAA in that the protected health information shall be protected from unauthorized disclosure by:

1. Maintenance of Business Associate Agreements with entities which SMFR is authorized to share a patient’s protected health information.
2. Covering or securing protected health information while it is being used by SMFR personnel for the purposes of patient care documentation.
3. Segregating protected health information from other documents by placing protected health information in specially designated privacy envelopes for transmittal to the SMFR Administration Building for processing. (For example, a download of a code summary from an AED will be placed in a privacy envelope.)

4. Storage of protected health information on paper for a period of not less than seven (7) years from the date of last entry in a secured storage facility, access to which is limited to authorized SMFR personnel.
5. Storage of protected health information in an electronic format shall be on password-protected computers that are backed-up, with storage in a secured facility for a period of not less than seven (7) years from the date of last entry, access to which is limited to authorized SMFR personnel.
6. Shredding of protected health information older than seven (7) years, which is conducted by the District's authorized shredding vendor.
7. Notwithstanding the foregoing, document retention and destruction shall be performed by SMFR in accordance with applicable Florida Law.

Disclosure of protected health information shall only be allowed if authorized by the patient or as documented by the SMFR Privacy Practices in adherence with HIPAA allowable disclosures.

Since SMFR is not a licensed provider and since SMFR does not bill for EMS services, its disclosure would only be to the patient, to Manatee County EMS, to a receiving hospital in the event of significant exposure of an employee, quality assurance activities, a governmental audit, or any other disclosure allowed by law (i.e. pursuant to a valid subpoena).

#### **PRIVACY OFFICER DESIGNATION:**

In compliance with the HIPAA Privacy Rule, the SMFR has a designated Privacy Officer, which is the Fire Chief. In the absence of the designated Privacy Officer, questions, concerns, and reports regarding protected health information or HIPAA compliance should be directed to the alternate Privacy Officers in the following order:

1. Operations Chief
2. On-Duty Battalion Chief

#### **TRAINING:**

All SMFR personnel (both paid and volunteer) are required to undergo Privacy Rule/HIPAA training. New personnel (both paid and volunteer) will go through Privacy Rule/HIPAA training before being assigned to a shift or position.

#### **PATIENT CARE REPORTS:**

1. All preparatory documentation forms used by SMFR personnel to assist in the creation of a Patient Care Report (PCR) is considered protected health information and is the property of the Southern Manatee Fire Rescue District.
2. The completed PCR will be placed in a specially designated privacy envelope and forward to the Fire Chief.
3. SMFR personnel will complete an electronic incident report in "Fire Programs."
4. All Code Summaries will be downloaded and forward to the Fire Chief in the specially designated envelopes.

#### **INCIDENTAL DISCLOSURES:**

The Privacy Rule is not intended to impede common practices that are essential in providing health care to an individual. Incidental disclosures are inevitable, but these will typically occur in radio or face to face conversation between health care providers (i.e., SMFR

personnel and Manatee County EMS personnel). Incidental disclosures should be kept to a minimum and related to required patient care practices.

**PENALTIES FOR HIPAA VIOLATION:**

There are significant potential ramifications for agencies and individuals that do not adhere to the HIPAA Privacy Rule including civil fines and criminal penalties. Failure of SMFR personnel to comply with this policy may result in such fines or penalties and/or disciplinary action against the responsible individual(s).