

Thurmont Community Ambulance Service, Inc.

HIPAA Policy

To the extent Thurmont Community Ambulance Service, Inc., (Entity) is a covered entity under the privacy regulations issued under the Health Insurance Protection and Portability Act of 1996 (HIPAA), the compliance policy of Entity is set forth below effective this First day of April, 2003 as required by [45 CFR 164.530\(j\)](#).

Accounting for Disclosure. Disclosure of PHI shall be documented as to date, name and address or person to whom disclosed, description of the PHI and the reason for the disclosure, and individuals shall be accorded an accounting of that information upon their request in accordance with [45 CFR 164.528](#).

Business Associates. Disclosures of PHI to a Business Associates shall be pursuant to a written business associate agreement between Entity and the Business Associate which shall comply with [45 CFR 165.504\(e\)](#).

Complaints. The contact person for complaints and requests for records and information under the privacy regulations shall be Privacy Officer, 27 North Church Street, Thurmont, Maryland 21788, and Phone: (301) 271-7550, of the Thurmont Community Ambulance Service, Inc. Complaints received by the contact person shall be forwarded to the senior EMS provider of Entity who shall investigate the complaint and advise the contact person in writing of the findings and such remedial and/or disciplinary action as may be warranted. The contact person shall advise the complaining party of the findings and any action taken. Complaints and their disposition shall be documented.

Confidential Communication. Individuals shall be afforded the right to request privacy protection for protected health information and to confidential communications in accordance with [45 CFR 164.522\(b\)](#) and to request restrictions of disclosures as provided in [45 CFR 164.522\(a\)](#).

Designated Record Set. The designated record set for a patient shall be:

- The ambulance run sheet for the patient;
- The billing record for the patient, if any; and
- The remittance record for the patient, if any.

Unless disclosure is prohibited by state or federal law, the designated record set for a patient shall be disclosed to the patient within 21 days working days of the request for disclosure by the patient or other individual authorized by law.

Discipline and Mitigation. Employees or volunteers who violate the requirements of HIPAA or other laws and regulations regarding confidentiality of health care

information shall be disciplined in accordance with the disciplinary policies of Entity, but no retaliation shall be taken against any individual for exercising rights provided by the privacy regulations as provided by 45 CFR 164.530(g). Entity shall mitigate any improper disclosure of PHI to the extent practicable as provided 45 CFR 164.530(f).

Minimum Necessary Disclosure. When using or disclosing PHI or when requesting PHI from another covered entity, an entity shall make reasonable efforts to limit PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request as provided under 45 CFR 164.502.

Notice of Privacy Policy. Disclosure of the privacy policy of Entity shall be by a written policy notice in accordance with 45 CFR 164.520 which shall be posted in the station and displayed on Entity's WEB page, if any. Except in emergency situations, EMS providers shall make and document good faith efforts to have each patient acknowledge in writing the receipt of the written policy notice. Entity shall participate in and abide by a joint notice with other EMS units in its Jurisdictional EMS Operational Program under the privacy regulations as a member of an organized health care arrangement under 45 CFR 164.520(d).

Privacy Official. The privacy official for the Entity shall be the Privacy Officer.

Privacy Policy Document Retention. Written documentation of this policy, patient authorizations, complaints and documents related thereto shall be retained by Entity for 6 years.

Protected Health Information (PHI) as defined by the privacy regulations shall be maintained and disclosed in accordance with the privacy regulations and Maryland law. Entity will provide appropriate administrative, technical, and physical safeguards to protect the privacy of PHI. PHI shall only be disclosed for the following purposes:

Treatment, Payment and Health Care Operations as provided in 45 CFR 164.506(c);

Disclosures permitted under a valid [authorization](#);

Disclosures to public health authorities under 45 CFR 164.512(b); and

Such other disclosures as may be allowed by law under.

Training. Each employee or volunteer of the health care component shall receive appropriate training in connection with the requirements of the privacy regulations as well as the handling of confidential patient information under state law through the EMS jurisdictional operational program under which Entity functions.

Adopted April 1, 2003

President