

CITY OF GRAND PRAIRIE

HUMAN RESOURCES POLICIES AND PROCEDURES

Section C: **EMPLOYEE BENEFITS**
No. 17 **Group Health Plan Privacy**
Revised and Approved: **04/08/22**

1.0 Purpose:

- 1.1 The purpose of this policy is to identify the rules and procedures regarding the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and specifically the privacy portion pertaining to use and disclosure of Protected Health Information (PHI) as it relates to the city's medical, dental, vision, health care spending account and dependent care spending account plans.

2.0 Scope:

- 2.1 All employees, volunteers, or contractors who have access to Protected Health Information
- 2.2 The Fire Department has a separate and specific set of procedures and policies they follow relating to patient treatment, care, and billing of medical information.

3.0 Definitions:

- 3.1 Protected health information ("PHI") is any individually identifiable health information that is transmitted or maintained in any form, including demographic information collected from an individual, and:
 - a. Is created or received by one of the city's health care plan or providers or the City; and
 - b. Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and
 - c. That identifies the individual or for which there is a reasonable basis to believe the information can be used to identify the individual.
- 3.2 **"Use" of PHI** is the sharing, examining, or analysis of individually identifiable health information by any city employee or by a Business Associate of the City.
- 3.3 **"Business Associate"** is an external agency, consultant, or individual who may send or receive PHI on the City's employees. A "business associate" must have on file a current agreement with the city stating the intent of that organization to comply with HIPAA requirements and in order to send or receive PHI relative to the city.

4.0 Privacy Officer:

- 4.1 The Privacy Officer for the City is the Human Resources Manager over Benefits/Risk located at 300 W. Main Street, Grand Prairie, TX 75050 and can be reached at benefits@gptx.org or via phone at 972-237-8192
- 4.2 The Privacy Officer has overall responsibility for:
 - a. Administering the policies and procedures to ensure compliance with the Privacy Regulations;
 - b. Receipt of complaints, questions, or concerns about the privacy of employee PHI;
 - c. Establishing and coordinating training on privacy practices and procedures in the city;
 - d. Ensuring proper safeguards, both physical and technical, are established for securing PHI; and
 - e. Developing and maintaining the proper documents for compliance requirements.

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5.0 Member Rights, Use and Disclosure, Users, and Protection of PHI

5.1 Member Rights

- a. Member rights are specifically provided on the attached Notice of Privacy Practices that is available through the City's intranet at <http://ravingfans> under "Human Resources". Click on the "HIPAA" link to access the notice, or contact Human Resources directly.
- b. Each employee shall be sent a Notice of Privacy Practices on inception of the privacy policy. Newhires after inception will receive a copy of this policy, the Notice of Privacy Practices and a signature form indicating receipt of these documents.

5.2 Use and Disclosure of PHI

- a. The City WILL require a valid authorization prior to requesting or using/disclosing PHI in certain required circumstances to another entity, health plan carrier, or as required to assist the employee or family member in researching health plan or Health Care Account/Dependent Care Account plan issues.
- b. A HIPAA privacy authorization form is NOT required for any of the following:
 - (1) To carry out treatment, payment or health care operations by the plan as it relates to you or your covered family members.
 - (2) Drug testing or employment required testing or receipt of results;
 - (3) Workers' compensation claims processing or administration;
 - (4) American with Disabilities Act administration or related paperwork;
 - (5) Long Term Disability forms or inquiries;
 - (6) Life Insurance Claims, Forms, Insurability Questionnaires or Inquiries
 - (7) For processing of normal daily activities such as payroll, documenting sick leave usage, sick leave donations, etc.
- c. While the above list in 5.1.2.b does not fall under HIPAA privacy rules, these areas are still handled under internal confidentiality rules and maintained in secured areas in Human Resources.

5.3 Users of PHI

- a. The following individuals specifically are allowed varying access to PHI, with the minimum information necessary to carry out their normal daily responsibilities and duties, as appropriate:
 - (1) HR Department Personnel
 - (2) Information Technology Department Personnel
 - (3) Clerical
 - (4) Supervisors/Managers
 - (5) Finance Department
 - (6) City Manager's Office
 - (7) Benefits Consultant of the City, when an approved Business Associate agreement is on file

5.4 Protection of PHI

- a. Access by the various users as listed above shall be limited to the minimum necessary amount of PHI information to allow performance of their duties and shall be used with discretion and with appropriate physical protection of the information as required in 5.3.2.
- b. Appropriate physical safeguards shall be observed. Physical copies of records and reports containing PHI shall be maintained in secure filing cabinets, locked drawers or locked rooms and not left open or available for inadvertent exposure.
- c. Training:

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- (1) All personnel shall be trained in the requirements of protecting, using and disclosing PHI.
- d. Retention:
 - (1) The city's privacy documents shall be maintained for at least six years beyond inception or the date of issuance/receipt, whichever is appropriate.

6.0 Procedures:

6.1 Authorization Forms

- a. If Human Resources is requested to assist an individual with researching or resolving a claims issue on them or a family member, they shall request that an authorization form be completed by the person making the request.
- b. Assistance to the member may not be completed until the authorization form is completed, signed and dated.
- c. The requesting individual must specify the length of time, up to one year from the date signed, that the authorization is valid.
- d. If the person making the request is NOT the person being researched, an authorization form must be received by that person, unless under the age of 18, to release their PHI to the person making the request and Human Resources.
- e. The authorization will be checked for completion, and then faxed to the appropriate plan the member is needing assistance with.
- f. The authorization form shall be maintained in the employee's personnel file.
 - (1) The authorization form may be revoked or a new one submitted at any time, if requested in writing.
 - (2) The authorization is only valid from the date received, and does not apply to any previous actions by the city prior to the date of receipt of the new authorization or revocation, as applicable.

6.2 Confidentiality

- a. The Human Resources Department and medical, dental and vision carriers for the city shall be responsible for making every reasonable attempt to keep communications relating to PHI private with the member.
- b. Employees are discouraged from sharing protected health information, as defined in this policy, in non-private work areas, office settings or at counters where such information may be overheard by others and therefore not protected.
- c. Employees should provide any protected health information, as defined in this policy, in confidential envelopes to the appropriate individuals in Human Resources to maximize protection of that information.

6.3 Complaint Filing Procedures

- a. Complaints relating to PHI issues relative to the City's Health Plan must be filed in writing and directed to the Privacy Officer stated in this policy.
- b. Complaints relating to PHI from treatment care, billing or other issues from the Fire Department shall be directed to the Privacy Official designated under Fire Department procedures.
- c. The writing must contain a description of the complaint and an explanation of the circumstances surrounding the complaint. The health plan is not required to respond to complaints, but the Privacy Officer shall be responsible for documenting receipt of a complaint and any resolution.

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6.4 Privacy Violations:

- a. No employee may intimidate, threaten, coerce, discriminate against, or take other retaliatory action against individuals for exercising their rights, filing a complaint, participating in an investigation, or opposing any practices under HIPAA.
- b. No individuals shall be required to waive his or her privacy rights under HIPAA as a condition of treatment, payment, eligibility or enrollment in the health plan.
- c. Any violations found under this policy may result in disciplinary action up to and including termination, depending on the severity and nature of the violation.

7.0 Appendices:

- a. HIPAA Notice of Privacy Practices and HIPAA Authorization Form can be found on Raving Fans > Forms > Human Resources