



CITY OF PROVIDENCE

7.1 HIPAA POLICY

Purpose

This policy sets forth how the City of Providence may use and disclose Protected Health Information (PHI) in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It also defines the rights of employees regarding their PHI and the City's responsibility to safeguard it.

Scope

This policy applies to all employees, applicants, contractors, and volunteers associated with the City of Providence who may access or handle protected health information (PHI) as part of their official duties.

Definitions

Protected Health Information (PHI): Individually identifiable health information, including demographic data, that relates to an individual's physical or mental health, healthcare services, or payment for services.

Designated Record Set: Records maintained by the City that include medical or billing information used to make decisions about individuals.

Disclosure: For the purpose of this policy, this refers to the release, transfer, or provision of access to PHI outside of the City's operations.

Policy

1. Permitted Uses and Disclosures of PHI

The City of Providence may use or disclose Protected Health Information (PHI) without authorization for several reasons, subject to certain requirements, in compliance with HIPAA, the Privacy Act, and other applicable federal and state laws:

- A. **Treatment, Payment, and Healthcare Operations:** To facilitate medical treatment, secure payment for healthcare services, and conduct essential administrative functions (e.g., quality assessment, case management).
- B. **Public Health and Safety:** To authorized public health authorities to:
 1. Prevent or control disease, injury, or disability.
 2. Report communicable diseases or workplace injuries, consistent with OSHA standards.
 3. Notify individuals at risk of exposure to communicable diseases.
- C. **Health Oversight Activities:** To government oversight agencies for lawful audits, inspections, investigations, and licensure compliance, including those relating to healthcare systems and benefits programs.
- D. **Legal and Judicial Proceedings**
 1. In response to court orders, subpoenas, discovery requests, or other lawful legal processes, consistent with applicable privacy protections.
 2. For law enforcement purposes, such as identifying or locating a suspect, responding to crimes on City property, or reporting criminal activity related to emergencies or deaths.
- E. **Abuse, Neglect, or Domestic Violence:** To appropriate authorities if there is reason to believe an employee is a victim of abuse, neglect, or domestic violence, as required or permitted by law.
- F. **Workers' Compensation:** To comply with workers' compensation laws or similar legally established programs.
- G. **FDA-Regulated Activities:** To the Food and Drug Administration for activities related to product quality, safety, or effectiveness, including recalls, adverse event reporting, and tracking.



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- H. **Coroners, Medical Examiners, and Funeral Directors:** To facilitate identification, determine cause of death, or carry out legally authorized duties related to decedents.
- I. **Organ and Tissue Donation:** To organizations involved in the procurement, banking, or transplantation of organs and tissues, as permitted by law.
- J. **Research:** For medical research approved by an Institutional Review Board (IRB) and conducted under established protocols ensuring PHI confidentiality.
- K. **Serious Threats to Health or Safety:** To prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
- L. **Military and National Security:** For authorized military, intelligence, national security, or protective service purposes, consistent with federal requirements.
- M. **Correctional Institutions:** To provide healthcare or maintain safety and security for inmates or individuals under legal custody.
- N. **Required by Law:** When disclosure is mandated by the U.S. Department of Health and Human Services to ensure compliance with HIPAA regulations.

2. Employees' Rights

- A. Employees have the following rights concerning their PHI:
 - 1. **Access and Copy:** Request to inspect and obtain a copy of their PHI. However, under federal law, access may be denied to:
 - 1. Psychotherapy notes.
 - 2. Information compiled in anticipation of or used in civil, criminal, or administrative proceedings.
 - 3. PHI restricted by law.
 - 2. In some cases, the employee may request a review of this denial. Questions regarding access should be directed to the Department of People & Culture.
- B. **Amendment:** Request correction of inaccurate or incomplete records. If a request is denied, the employee has the right to submit a statement of disagreement, and the City may respond with a rebuttal, which will also be shared with the employee.
- C. **Restrictions:** Employees may request restrictions on how their PHI is used or disclosed, particularly for treatment, payment, or healthcare operations. Requests must specify the desired restriction and to whom it applies. While the City is not obligated to agree, any approved restriction will be honored unless emergency care is required.
- D. **Confidential Communications:** Employees may request that PHI communications be sent by alternative means or to alternative locations. The City will accommodate reasonable requests, which must be submitted in writing and may include an alternate address or method of contact.
- E. **Accounting of Disclosures:** Employees may request a record of PHI disclosures made for purposes other than treatment, payment, or operations. The list includes disclosures made after April 14, 2003, and may cover a period of up to six years preceding the request date. The right to receive this information is subject to certain exceptions, restrictions, and limitations.
- F. **Paper Copy:** Employees may request a paper copy of this notice at any time, even if they have previously agreed to receive it electronically.
- B. Requests related to PHI should be directed in writing to the Department of People & Culture.

3. Safeguards and Accountability

- A. All City of Providence employees who access PHI are required to:



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- A. Follow this policy and all relevant HIPAA guidelines.
- B. Protect the confidentiality, integrity, and security of PHI.
- C. Participate as needed in HIPAA training and understand the consequences of non-compliance with HIPAA regulations.

4. **Complaints and Concerns**

- A. Employees may file a complaint without fear of retaliation:
 - A. Internally: Submit a written complaint to the Department of People & Culture.
 - B. Externally: File a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights; (800) 368-1019 or at OCRMail@hhs.gov

5. **Compliance**

- A. Compliance with this policy is the responsibility of each employee in the department. Every employee has the duty and responsibility to be aware of and comply with the City of Providence's HIPAA policies and work practices.
- B. Noncompliance includes, but is not limited to:
 - A. Unauthorized access, use, or disclosure of PHI
 - B. Sharing PHI without proper authorization
 - C. Failing to secure PHI in paper or electronic formats
 - D. Failing to report a suspected breach
- C. Suspected violations of this policy, misuse of reporting procedures, or intentional obstruction of the reporting process should be reported immediately to the Director of Occupational Safety & Health Administration, Director of Total Rewards, or other management within the Department of People & Culture.
- D. All reports of non-compliance will be reviewed, investigated as appropriate, and handled with discretion and confidentiality.
- E. Enforcement of this policy will be conducted in accordance with applicable labor laws, relevant collective bargaining agreements, and the City's internal disciplinary procedures.

Related Policies:

Smoke Free Workplace
Adverse Public Health Events Policy
Accident, Injury, and Illness Investigation and Reporting Policy
Accidental Disability Pension Application
Personal Protective Equipment (PPE)
Reasonable Accommodation Program- Americans with Disabilities Act (ADA)
Vaccination Policy

Other Related Information:

This policy complies with the Rhode Island Confidentiality of Health Care Communications and Information Act (R.I. Gen. Laws § 5-37.3-1 et seq.), and where Rhode Island law provides greater protection than HIPAA, the more protective standard shall apply.