

**THE HEALTH INSURANCE PORTABILITY
AND ACCOUNTABILITY ACT COMPLIANCE**

Policies and Procedures for the Dental-Optical Reimbursement Plan

South Colonie Central School District (“District”), as a sponsor of a Dental-Optical Reimbursement Plan (the “Plan”), is required under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) to implement policies and procedures relating to the privacy of individually identifiable health information of Plan employees.

This policy applies to all District personnel (“workers”) who have access to Protected Health Information (“PHI”) in the course of their duties relating to the District’s Dental-Optical Reimbursement Plan, whether or not the worker is directly involved in administration of health plan benefits or services.

Protected Health Information

For purposes of this policy, Protected Health Information (“PHI”) is defined as individually identifiable health information, including demographic information, that is created, received, transmitted, or maintained by the District in relation to a group health plan, regardless of form (oral, written, or electronic) if the information relates to:

1. the past, present or future physical or mental health or condition of an individual;
2. the provision of health care services to an individual; or
3. the past, present or future payment for the provision of health care to an individual.

PHI includes, but is not limited to, explanation of benefits, treatment records, billing records, consultant reports, and laboratory or other diagnostic testing results.

HIPAA permits the use and disclosure of PHI without an individual’s written authorization for certain purposes including but not limited to the following:

1. Disclosure a required by law, i.e., statute, regulation of court order.
2. Disclosure to public health authorities to collect or receive information for preventing or controlling disease, injury, or disability and to public health or other government authorities authorized to receive reports of child abuse and neglect, i.e., Occupational Safety and Health Administration (OSHA).
3. Disclosure to appropriate government authorities regarding victims of abuse, neglect, or domestic violence.
4. Disclosure to health oversight activities necessary for oversight of the health care system and government benefit programs.

5. Disclosure in a judicial or administrative proceeding if the request for information is through a court order, administrative tribunal or subpoena.
6. Disclosure to law enforcement officials for law enforcement purposes under the following conditions:
 - a. as required by law, i.e., court order, subpoena, or administrative request;
 - b. to identify or locate a suspect, fugitive, material witness, or missing person;
 - c. in response to a law enforcement official's request for information about a victim or suspected victim of a crime;
 - d. to notify law enforcement of a person's death if it is suspected that criminal activity caused the death;
 - e. if PHI is evidence of a crime that occurred on the premises; or
 - f. in a medical emergency not occurring on the premises where it is necessary to inform law enforcement about the commission and nature of a crime, the location of the crime or crime victim, and the perpetrator of the crime.
7. Disclosure to funeral director, coroners or medical examiners to identify a deceased person or to determine the cause of death.
8. Disclosure to facilitate the donation and transplantation of cadaveric organs, eyes, and tissue.
9. Disclosure for research purposes.
10. Disclosure to prevent or lessen a serious and imminent threat to a person in the public.
11. Disclosure for certain essential government functions, i.e. military or national security activities.
12. Disclosure to comply with workers' compensation laws and other similar programs providing benefits for work-related injuries or illnesses.

Confidentiality of PHI

Workers may not divulge, copy, transfer, alter or destroy any PHI, or remove any PHI from the premises, except as authorized by the District or by the individual who is the subject of the information. Workers must strictly comply with all applicable federal and state laws and regulations and all policies and procedures established by the District relating to the confidentiality of PHI. A worker's responsibility to safeguard the confidentiality of PHI continues after termination of his or her employment or other relationship with the District.

Administrative Safeguards

The District has implemented appropriate administrative, technical and physical safeguards to protect the privacy of PHI and to safeguard PHI from any uses and disclosures that would be in violation of HIPAA with respect to the Dental-Optical Reimbursement Plan. The Notice(s) of

Privacy Practices reflect the District's compliance with HIPAA's regulations on the non-disclosure of a worker's PHI.

Files containing PHI, on paper or in electronic media, are maintained in a manner that guards against unauthorized access and disclosure. Workers hold in strictest confidence any and all access codes, passwords, and other authorizations which enable access to computer systems in which PHI is maintained by the District.

Minimum Necessary Disclosure

Workers may use PHI only as necessary to perform their duties in relation to the Dental-Optical Reimbursement Plan, and for no other purpose whatsoever. When using, disclosing, or accessing PHI, workers use, disclose, or access the minimum PHI necessary to perform their duties. When PHI must be shared with others, it must be shared in a manner consistent with the intended purpose, taking precautions to minimize the risk of disclosure beyond the minimum necessary for the intended recipient or purpose. All workers whose duties involve access to PHI are required to undergo training in safeguards concerning use and disclosure of PHI.

Mitigation of Harmful Effects

In the event of disclosure of PHI in violation of HIPAA, the District has a duty to mitigate any known harmful effect of that violation to the extent practicable. Any worker who becomes aware of an activity that may jeopardize the confidentiality of PHI should promptly report that activity to the District's Privacy Official.

Individual Rights

Under HIPAA, an individual is entitled to certain rights concerning his or her protected health information. Those individual rights are described in and administered in accordance with the attached Notice(s) of Privacy Practices. The applicable Notice of Privacy Practices has been distributed to enrollees of the Dental-Optical Reimbursement Plan as of April 14, 2003, and thereafter will be distributed to new enrollees upon initial enrollment. No less frequently than once every three (3) years, enrollees then covered by the Dental-Optical Reimbursement Plan will be informed that the Notice is available and how to obtain it.

Non-Retaliation and Non-Waiver of Rights

The District will not discriminate against, intimidate, threaten, coerce, or take any other retaliatory action against any individual or worker for exercising the right to file a complaint with the District's Privacy Official, or the United States Secretary of the Department of Health and Human Services, or for testifying, assisting or participating in and investigating compliance review, proceeding or hearing regarding an alleged violation under HIPAA.

In addition, the District will not require an individual or a worker to waive his or her rights under HIPAA as a condition of the provision of treatment, payment, enrollment in a health plan, or eligibility for benefits.

Administrative Sanctions

Any violation of this policy or violation of any applicable federal or state law relating to the protection of PHI may subject a worker to disciplinary action in accordance with any collective bargaining agreement, or in accordance with any applicable policy of the District.

Complaint Process

Complaints regarding the inappropriate use or disclosure of PHI may be made in writing to the District Privacy Official. Complaints may also be made to the United States Secretary of the Department of Health and Human Services.

Privacy Official

The Privacy Official for the District for HIPAA compliance is:

Director of Human Resources
South Colonie Central Schools
102 Loralee Drive
Albany, New York 12205

Reference: Health Insurance Portability and Accountability Act of 1996
45 CFR Parts 142 and 160-164

Adopted: April 6, 2004

Revised: February 14, 2006