

<p><b>Timberlane Regional School District</b></p>	<p><b>Policy Code: JRAB</b></p>
<p><b>Adopted:</b> <b>Revised: 02-24-05</b></p>	<p><b>Page 1 of 2</b></p>

**HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPPA)**

The School Board directs the Superintendent or designee to take steps to ensure compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPPA), which grants individuals the right to receive notice of the uses and disclosures of their protected health information that may be made by the district and sets forth the individual's rights and the district's legal obligations with respect to protected health information.

Confidentiality of Individually Identifiable Health Information

The district and its employees will not use or disclose an individual's protected health information for any purpose without the properly documented consent or authorization of the individual or his/her authorized representative unless required or authorized to do so under state or federal law or this policy, unless an emergency exists or unless the information has been sufficiently de-identified that the recipient of the information would be unable to link the information to a specific individual.

Prior to releasing any protected health information for the purposes set above, the district representative disclosing the information shall verify the identity and authority of the individual to whom disclosure is made. This verification may include the examination of official documents, badges, driver's licenses, workplace identity cards, credentials or other relevant forms of identification or verification.

All employees of the district are expected to comply with the administration of this policy. Any violation of the HIPAA privacy or security standards or this policy shall constitute grounds for disciplinary action, up to and including termination of employment.

Any employee of the district who believes that there has been a breach of the integrity or confidentiality of any person's protected health information shall immediately report such breach to his/her immediate supervisor or the board appointed privacy/security officer. Any employee involved in retaliatory behavior or reprisals against another individual for reporting an infraction of this policy is subject to disciplinary action up to and including of employment.

If the privacy/security officer determines that there has been a breach of the integrity or confidentiality of any person's protected health information shall immediately report such breach to his/her immediate supervisor of the board appointed privacy/security officer.

Any employee involved in retaliatory behavior or reprisals against another individual for reporting an infraction of this policy is subject to disciplinary action up to and including termination of employment.

If the privacy/security officer determines that there has been a breach of this privacy policy or the procedures of the district s/he shall make a determination of the potential harmful effects of the unauthorized use or disclosure and decide upon a course of action to minimize the harm. Any individual responsible for the unauthorized use or disclosure is referred to the Superintendent or designee for appropriate disciplinary measures.

#### Notice

The district shall distribute a Notice of Privacy Practices within one month of the initial adoption of this policy, and thereafter to all employees at the time of their enrollment in the health plan and within 60 days of any material revision. The notice shall also be posted in a clear and prominent location in each facility in the district and be printed in staff handbooks and the health plan booklet. The district will also notify individuals covered by the health plan of the availability of and how to obtain the notice at least once every three years.

#### Training

All employees shall receive training regarding the district's privacy policies and procedures as necessary and appropriate to carry out their job duties. Training shall also be provided when there is a material change in the district's privacy practices or procedures.

#### Documentation

Documentation shall be required in support of the policies and procedures of the district and all other parts of the HIPPA privacy regulations that directly require documentation, including but not limited to, all authorizations and revocations of authorizations, complaints and disposition of complaints. All documentation shall be kept in written or electronic form for a period of six years.

See also policy GBJA.

#### Legal Reference:

*Public Law 104-191, Health Insurance Portability and Accountability*