

## Links

Link to U.S. Department of Health and Human Services Office of Civil Rights:

<http://www.hhs.gov/ocr/privacy/index.html>

Link to TCA: (scroll to Title 33)

<http://www.michie.com/tennessee/lpext.dll>

Link to title 45 Code of Federal Regulations (CFR) Parts 160, 162, 164

[https://www.ihp.gov/privacyact/includes/the\\_mes/responsive2017/display\\_objects/documents/PvcFR01.pdf](https://www.ihp.gov/privacyact/includes/the_mes/responsive2017/display_objects/documents/PvcFR01.pdf)

Link to 2008 recourse guide for implementing HIPAA Security Rule:

<https://www.nist.gov/healthcare/security/hipaa-security-rule>

Link to text of American Recovery and Reinvestment Act of 2009: (scroll to page 112-165 Title XIII Subtitle D- Privacy begins on page 144)

[http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111\\_cong\\_bills&docid=f:h1enr.pdf](http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_bills&docid=f:h1enr.pdf)

## Additional Information

### For assistance contact:

Each Regional Office of the Department of Health and Human Services offers guidance and education related to Federal privacy and security requirements for protected health information:

### U.S. Department of Health and Human Services

Office for Civil Rights  
Atlanta Federal Center, Suite 16T70  
61 Forsyth Street, S.W. Atlanta, GA 30303-8909  
Customer Response Center: (800) 368-1019  
Fax: (202) 619-3818  
TDD : (800) 537-7697  
Email: [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov)

### Department of Intellectual and Developmental Disabilities

Privacy Officer  
UBS Tower, 8th Floor  
315 Deaderick Street  
Nashville, Tennessee 37243  
1-800-535-9725 (Phone)  
1-615-532-9940 (Fax)



# Provider Responsibility Related to Confidentiality of Personal Records & Information

The Department of Intellectual and Developmental Disabilities (DIDD) is a Covered entity under the Federal HIPAA Law.

## PROVIDER IMPACT

August 21, 1996: Congress enacted the Health Insurance Portability and Accountability Act (HIPAA). It required the Secretary of Health and Human Services (HHS) to propose standards protecting the privacy of individually identifiable health information.

Under the new HIPAA amendments in the 2009 Stimulus Bill, Business Associates are required to comply with the administrative, physical, and technical safeguards mandated by the HIPAA Security Rule, as well as the privacy protection of the Privacy Rule.

Providers must follow requirements specified in Title 33 (TCA) 33-3-103 through 33-3-112 pertaining to confidentiality and access to records of persons served.

HIPAA Compliance (provider agreement D.17) states, “The State and the Provider shall comply with obligations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its accompanying regulations.”

Provider Manual (Chapter 2) addresses provider responsibilities related to confidentiality of personal records and information. HIPAA is further discussed in Chapters 5, 8 & 9.

## New HIPAA Amendments

Business Associates will need to have written policies and procedures just like covered entities and will be subject to the same civil and criminal penalties for violations.

## Several major items for Providers

- Develop Policies/Procedures (including a release form).
- Designate a privacy official (HIPAA Officer).
- Train the workforce (includes staff as well as volunteers, seasonal staff, etc.).
- Note in the policy what will be done when a violation occurs.
- Develop and distribute a privacy notice for persons served.
- Notify DIDD & TennCare in the case of breach of protected health information.
- Maintain contact with legal counsel to ensure federal regulations are followed.
- All of the HIPAA Administrative Simplification Rules are located at 45 CFR Parts 160, 162, and 164.

## PROTECT PRIVACY

The Privacy Rule provides federal protections for personal health information held by covered entities and gives persons served an array of rights with respect to that information. At the same time, the Privacy Rule is balanced so that it permits the disclosure of personal health information needed for the person’s care and other important purposes.

Protected Health Information (PHI) may not be used or disclosed except as permitted or required by the Privacy Rule.

DIDD and Providers are subject to federal review and sanctioning when appropriate.

Unauthorized release of information may result in disciplinary action depending on the severity of the action. Fines as well as criminal charges can be brought against violators of HIPAA rules.