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|  <p>HAWAII HEALTH SYSTEMS CORPORATION <i>"Touching Lives Everyday"</i></p> <p>Policies and Procedures</p> | <p>Quality Through Compliance</p> | <p>Policy No.:</p> <p>PAT 0004</p> |
| | | <p>Revision No.:</p> <p>2</p> |
| <p>Subject:</p> <p>Corporate Policy on Confidential Patient Information</p> | <p>Issued by:</p> <p>Corporate Compliance Committee</p> | <p>Effective Date:</p> <p>December 6, 2001</p> |
| | <p>Approved by:</p> <p>Thomas M. Driskill, Jr. President & CEO</p> | <p>Supersedes Policy:</p> <p>July 18, 2001</p> <p>Page:</p> <p>1 of 3</p> |

- I. PURPOSE:** To protect confidential patient information from unauthorized disclosure. Confidential patient information includes, but is not limited to, patient specific or patient identifiable information regarding diagnosis, symptoms, general health status, or personal information (such as marital status, address, etc.) of any current or former patient. Unauthorized disclosure means disclosure of confidential patient information to individuals or entities that are both: (a) not engaged in the treatment or evaluation of the patient's condition; *and* (b) do not have prior authorization to access this information.
- II. POLICY STATEMENT:** HHSC is committed to protecting the privacy of its patients and shall guard against the unauthorized disclosure of confidential patient information. Any hospital employee, medical staff member, volunteer, contractor and other individuals with access to confidential patient information who engages in the unauthorized disclosure of confidential patient information may be subject to disciplinary action or contract termination in accordance with HHSC policies and procedures.
- III. PROCEDURE:**
- A. HHSC Facilities:**
1. All HHSC facilities are required to have policies and procedures in place which address confidentiality of patient information and specifically address the release of such information.
 - All policies and procedures must be consistent with the State and federal laws applicable to the particular facility.
 2. All HHSC facilities are responsible for educating their employees, medical staff members, volunteers and contractors, as well as others, regarding the facility's specific confidentiality policies and procedures.
- B. HHSC Employees, Medical Staff Members, Volunteers, Contractors And Any Others With Access To Information:** All HHSC employees, medical staff members of HHSC facilities, volunteers, contractors and any other individuals with access to confidential patient information are required to comply with the following:

1. Any information which is gained through an individual's professional or work related experience regarding a patient is confidential.
2. Confidential patient information should only be discussed privately, quietly and to the extent needed to carry out the purpose of the communication.
 - Confidential patient information shall not be discussed in places where such information could be heard by unauthorized individuals. This includes locations in HHSC facilities such as elevators and hallways. This also includes places outside the facility such as grocery stores.
3. Confidential patient information should only be discussed with those individuals involved in the patient's care or treatment or as required by law in reporting certain events and illness.
 - An individual with access to confidential patient information may not disclose that information to any unauthorized third person, such as a neighbor of the patient, or a co-worker, unless the patient consents in writing to disclosure or the third party is otherwise authorized to access that information. This means that employees may not have access to the records of any patient unless they are involved in the care and treatment of that patient or a legal reason exists requiring them to have access to those documents.
4. All employees, medical staff members, volunteers, contractor and others, are required to comply with the policies and procedures for release of information specific to the facility where they are employed/affiliated. Only those individuals specifically authorized by the facility's policy may release confidential patient information, including medical records. All such releases must be in conformity with all policies and procedures relating to disclosure of patient information.
5. If utilizing the computer in a work assignment, the employee, medical staff member, and any others with authorized access should make sure that they do not leave confidential patient information on the computer screen after finishing the work assignment. Computer access codes shall be kept in a private place.
6. When using confidential documents, including medical records, employees, medical staff members and any others with authorized access to confidential information shall make sure the records are put away or closed when they leave the work area, even if for a brief period.
7. When faxing confidential documents, including medical records, verify that the information will only be faxed to a protected area. The name of the individual requesting the information should be on the fax cover sheet, as well as a statement indicating that the document is confidential. The form must be approved by the HHSC facility's administration.
8. If employees, medical staff members, volunteers and contractors, as well other individuals with access to patient information, do not understand their obligations regarding maintaining the confidentiality of patient information, or if they have questions about what information is confidential, they must seek clarification from

their supervisors, facility administration or the Regional or Corporate Compliance Officers.

9. If employees, medical staff members, volunteers and contractors suspect any violation of this policy, it is their obligation to report their concerns through one of the methods of reporting set forth in other policies.
 - Concerns may be reported to the Regional Compliance Officer, or the Corporate Compliance Officer.