



**Palmetto  
Community  
Care**

---

**HIPAA PRIVACY, SECURITY  
POLICIES AND  
PROCEDURES**

**May 2025  
January 2024  
August 2023 rev 1.1  
August 2022**

**Version 1.0**

Prepared for:  
Palmetto Community Care  
5064 Rivers Avenue  
N. Charleston, SC 29406

## TABLE OF CONTENTS

	Page
1. INTRODUCTION.....	1
2. USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION CONSISTENT WITH THE NOTICE OF PRIVACY PRACTICES .....	2
3. DESIGNATION OF PALMETTO COMMUNITY CARE SECURITY CHIEF EXECUTIVE OFFICER .....	3
4. DESIGNATION OF PALMETTO COMMUNITY CARE SECURITY OFFICER.....	6
5. DESIGNATION OF PALMETTO COMMUNITY CARE PRIVACY OFFICER .....	10
6. DESIGNATION OF PALMETTO COMMUNITY CARE IT DIRECTOR.....	14
7. TRAINING .....	16
8. DOCUMENTATION REQUIREMENTS .....	18
9. ACKNOWLEDGMENT .....	20
10. GENERAL USE AND DISCLOSURE.....	23
11. VERIFICATION OF IDENTITY AND AUTHORITY PRIOR TO A USE AND DISCLOSURE .....	32
12. RIGHT TO ACCESS RECORDS.....	34
13. DISCLOSING PROTECTED HEALTH INFORMATION TO PERSONAL REPRESENTATIVES .....	39
14. NATIONAL PRIORITY DISCLOSURES .....	42
15. DISCLOSURE OF PROTECTED HEALTH INFORMATION TO LAW ENFORCEMENT .....	47
16. DISCLOSURES OF PROTECTED HEALTH INFORMATION IN RESPONSE TO SUBPOENAS OR OTHER REQUESTS.....	51
17. ACCOUNTING OF DISCLOSURES.....	55
18. AUTHORIZATION .....	60
19. MARKETING.....	65
20. PREVENTION OF INCIDENTAL DISCLOSURES OF PHI TO VENDORS AND OTHERS .....	68
21. PRE-EMPTION OF STATE LAW .....	70
22. REQUESTING AMENDMENTS.....	72
23. REQUESTING ADDITIONAL PRIVACY OR ALTERNATIVE COMMUNICATIONS .....	76
24. CONTINGENCY PLAN.....	79
25. NOTIFICATION IN THE EVENT OF BREACH OF UNSECURED PHI.....	91
26. INCIDENT RESPONSE PLAN FOR UNAUTHORIZED DATA DISCLOSURE.....	94

27.	PROHIBITION ON SALE OF ELECTRONIC HEALTH RECORDS OR PHI .....	102
28.	PHYSICAL AND TECHNICAL SECURITY MEASURES TO PROTECT PHI.....	104
29.	CLIENT COMPLAINTS .....	113
30.	BUSINESS ASSOCIATES .....	115
31.	HIPAA COMPLIANCE REPORTING PROCESS (NON-RETRIBUTION/NON- RETALIATION).....	117
32.	INTERNAL ENFORCEMENT.....	119
33.	GLOSSARY .....	123
34.	APPENDIX A – HIPAA PRIVACY POLICY AGREEMENT .....	132
35.	APPENDIX B – ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES .....	139
36.	APPENDIX C – REQUEST FOR ACCESS TO PROTECTED HEALTH INFORMATION.....	141
37.	APPENDIX D – RESPONSE TO REQUEST FOR ACCESS TO PROTECTED HEALTH INFORMATION.....	143
38.	APPENDIX E – NATIONAL PRIORITY DISCLOSURE REPORT .....	146
39.	APPENDIX F – REQUEST FOR AN ACCOUNTING OF DISCLOSURES.....	147
40.	APPENDIX E – NATIONAL PRIORITY DISCLOSURE REPORT .....	150
41.	APPENDIX G – AUTHORIZATION TO USE AND/OR DISCLOSE HEALTH INFORMATION.....	151
42.	APPENDIX H – SAMPLE ACKNOWLEDGEMENT LETTER FOR VENDORS AND OTHERS .....	153
43.	APPENDIX I – REQUEST TO AMEND PROTECTED HEALTH INFORMATION	154
44.	APPENDIX J – REQUEST FOR SPECIAL INSTRUCTION ON THE USE OR DISCLOSURE OF PROTECTED HEATHLH INFORMATION.....	162
45.	APPENDIX K – CLIENT PRIVACY COMPLAINT.....	172
46.	APPENDIX L – PALMETTO COMMUNITY CARE HIPAA AGREEMENT .....	174
47.	APPENDIX M – PALMETTO COMMUNITY CARE COMPUTER USER AGREEMENT .....	180



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 1. INTRODUCTION

Palmetto Community Care is committed to protecting the privacy and security of the personal information of clients at its facilities. As part of this commitment and to the extent Palmetto Community Care is a Covered Entity or Business Associate under HIPAA, Palmetto Community Care has adopted the policies and procedures set forth in this HIPAA Privacy and Security Policies and Procedures Manual in accordance with the standards established by the Health Insurance Portability and Accountability Act of 1996, as amended (“HIPAA”) and its related privacy and security regulations set forth in Parts 160, 162, and 164 of Title 45 of the Code of Federal Regulations (the “Privacy Rule” and the “Security Rule,” respectively and also referred to in this manual as the HIPAA Privacy and Security Rules). HIPAA and its regulations limit Palmetto Community Care’s ability to use or disclose client protected health information (“PHI”), and provide Palmetto Community Care clients with certain rights to their PHI. In addition, the Security Rule requires Palmetto Community Care to take steps to develop, implement, and maintain administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of any PHI that it or another entity (including any Business Associates, and their agents and subcontractors) acting on its behalf creates, receives, maintains, or transmits in an electronic format. For purposes of this manual, references to “PHI” will be deemed to include electronic PHI unless otherwise noted or unless the context clearly dictates otherwise.

It is Palmetto Community Care's policy to comply fully with the Privacy Rule and the Security Rule. Towards that end, all Palmetto Community Care employees, volunteers, agents and contractors who collect, obtain, use, create, receive, maintain, or otherwise have access to PHI must comply with policies and procedures set forth in this manual.

No third party rights (including, but not limited to, rights of Palmetto Community Care employees, clients, Business Associates, or other entities) are intended to be established by this manual. To the extent the policies and procedures set forth in this manual establish requirements and obligations above and beyond those required by the HIPAA Privacy and Security Rules, they shall be regarded as aspirational and shall not be binding upon Palmetto Community Care. Except as specifically stated, the policies and procedures set forth in this manual do not address requirements that may be applicable under other federal laws or under state laws.

**Palmetto Community Care reserves the right to amend, modify or change the policies and procedures set forth in this manual at any time, and even retroactively, without notice. Palmetto Community Care will also periodically update this manual as necessary to reflect any change required by law. Any changes to this manual will be effective for all PHI that Palmetto Community Care may maintain. This policy will be updated and reviewed at least annually and when conditions or laws necessitate change. This includes PHI that was previously created or received, not just PHI created or received after the manual is changed.**



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 2. USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION CONSISTENT WITH THE NOTICE OF PRIVACY PRACTICES

**POLICY:** It is the policy of Palmetto Community Care only to use and disclose protected health information ("PHI") in a manner that is consistent with Palmetto Community Care policies and procedures contained herein and the Palmetto Community Care Notice of Privacy Practices (the "Notice").

---

**PURPOSE:** The purpose of this policy is to explain that Palmetto Community Care will not use or disclose PHI in a manner inconsistent with its Notice.

---

#### I. PROCEDURE

- A. The Palmetto Community Care Chief Executive Officer, Security Officer, Privacy Officer, and Information Technology (IT) Manager will ensure that the privacy and security policies and procedures are consistent with the Notice.
- B. Palmetto Community Care employees will be trained on the privacy and security policies and procedures and Notice.
- C. Palmetto Community Care employees will not disclose PHI that is inconsistent with the Notice.
- D. Palmetto Community Care employees may contact the Chief Executive Officer, Security Officer, Privacy Officer, and/or IT Director for any questions pertaining to this policy.
- E. The Palmetto Community Care Security Officer will revise the Notice as necessary to reflect any changes in Palmetto Community Care's policies and applicable federal and state laws and regulations.
- F. Individuals who receive services from the Palmetto Community Care will receive a notification form regarding HIPAA Privacy Policy. This form is located in Appendix A of this document.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 3. DESIGNATION OF PALMETTO COMMUNITY CARE SECURITY CHIED EXECUTIVE OFFICER

**POLICY:** It is the policy of Palmetto Community Care to designate the Chief Executive Officer who is responsible for the enforcement of the policies and procedures for the Palmetto Community Care security program.

---

**PURPOSE:** The purpose of this policy is to describe the position of Palmetto Community Care Chief Executive Officer and set forth his or her responsibilities.

---

#### I. PROCEDURE

##### A. Designation of Chief Executive Officer

1. Palmetto Community Care will designate Bradley Childs as the Chief Executive Officer responsible for the enforcement of the Palmetto Community Care security program.
2. Palmetto Community Care will utilize the Palmetto Community Care Chief Executive Officer job description below.
3. Palmetto Community Care will maintain a written record of the designation of the Palmetto Community Care Chief Executive Officer.

##### B. Chief Executive Officer Job Description

1. The immediate supervisor of the Chief Executive Officer is Palmetto Community Care's board of directors.
2. The title of the position is Palmetto Community Care Chief Executive Officer.
3. The Palmetto Community Care Chief Executive Officer, with guidance as needed from Palmetto Community Care management and Palmetto Community Care legal counsel, oversees all ongoing activities related to the enforcement, development, implementation, maintenance of, and adherence to Palmetto Community Care's policies and procedures covering the security of, and access to, protected health information ("PHI") in compliance with federal and state laws and Palmetto Community Care's information security practices.

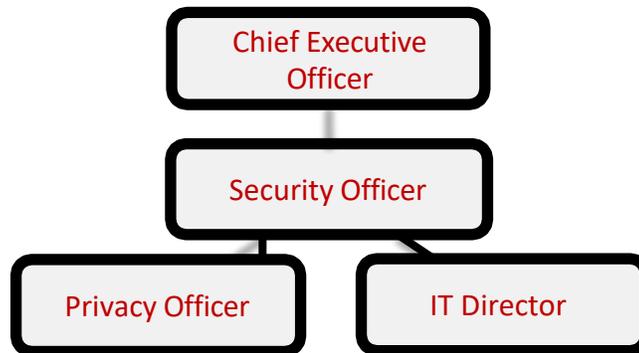
C. Position Overview. The Chief Executive Officer serves as the designated official responsible for the enforcement of the HIPAA security compliance program. The Chief Executive Officer oversees the development, implementation, operation and enforcement of the compliance program.

D. Responsibilities. The responsibilities of the Palmetto Community Care Chief Executive Officer are as follows:

1. Work with the Palmetto Community Care Security Officer, Privacy Officer and IT Director to develop and implement a HIPAA security compliance program, including periodic written risk assessments related to the security of electronic PHI.
2. Direct and facilitate the HIPAA security activities.
3. Collaborate with, management, legal counsel, and appropriate staff to enforce, create, implement, and monitor Palmetto Community Care's privacy and security policies, including procedures designed to ensure the confidentiality, integrity, and availability of all electronic PHI that Palmetto Community Care or its external service providers create, receive, maintain, or transmit, protections against any reasonably anticipated threats or hazards to the security or integrity of electronic PHI, to protect against any reasonably anticipated uses or disclosures of electronic PHI not permitted or required under the HIPAA privacy and security rules, and to ensure compliance with the security rules by employees and associates who handle electronic PHI.
4. Monitor all operations to ensure compliance with all state and federal security laws.
5. Enforce and maintain an internal security audit program and coordinate the development of security risk assessment policies and procedures.
6. Collaborate with other departments, divisions, and committees of Palmetto Community Care (such as accounting and information systems) to ensure compliance with specific security requirements.
7. Approve the development, implementation, and monitoring of business associate agreements to ensure that all security requirements are adequately addressed.
8. Approve and develop and implement an organization-wide security training program and a certification program to ensure that all workforce members who handle electronic PHI certify their recognition of and compliance with the organization's privacy and security policies and procedures.
9. Approve and establish and monitor a system for receiving questions and complaints regarding the security program.

10. Approve and develop methods of investigating allegations of non-compliance with Palmetto Community Care's privacy and security policies and develop appropriate sanctions for non-compliance by employees and business associates. Make periodic reports to management on the status of the security program.
  11. Approve and develop and implement corrective action procedures to mitigate the effects of prohibited use or disclosure of electronic PHI by workforce members or business associates.
  12. Approve and maintain current knowledge of applicable standards and revise the security compliance program as necessary to reflect changes in the law or Palmetto Community Care policy.
  13. Serve as an internal resource for all security-related matters and cooperate with external parties in any compliance reviews or investigations.
- E. Qualifications. The Chief Executive Officer is appointed by Palmetto Community Care's board of directors.

The PCC Chief Executive Officer will manage in accordance with the organizational chart below.





---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 4. DESIGNATION OF PALMETTO COMMUNITY CARE SECURITY OFFICER

**POLICY:** It is the policy of Palmetto Community Care to designate a Security Officer who is responsible for the development and implementation of the policies and procedures for the Palmetto Community Care security program.

---

**PURPOSE:** The purpose of this policy is to describe the position of Palmetto Community Care Security Officer and set forth his or her responsibilities.

---

## II. PROCEDURE

### A. Designation of Security Officer

1. Palmetto Community Care will designate Jennifer Benvenuto as the Security Officer responsible for the Palmetto Community Care security program.
2. Palmetto Community Care will utilize the Palmetto Community Care Security Officer job description below.
3. Palmetto Community Care will maintain a written record of the designation of the Palmetto Community Care Security Officer.

### B. Security Officer Job Description

1. The immediate supervisor of the Palmetto Community Care Security Officer is the Palmetto Community Care Chief Executive Officer.
2. The title of the position is Palmetto Community Care Security Officer.
3. The Palmetto Community Care Security Officer, with guidance as needed from Palmetto Community Care management and Palmetto Community Care legal counsel, oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to Palmetto Community Care's policies and procedures covering the security of, and access to, protected health information ("PHI") in compliance with federal and state laws and Palmetto Community Care's information security practices.

### C. Position Overview. The Security Officer serves as the designated official responsible for the HIPAA security compliance program. The Security Officer oversees the

development, implementation, operation and enforcement of the compliance program.

D. Responsibilities. The responsibilities of the Palmetto Community Care Security Officer are as follows:

1. Work with management and the Palmetto Community Care Privacy Officer to develop and implement a HIPAA security compliance program, including periodic written risk assessments related to the security of electronic PHI.
2. Direct and facilitate the HIPAA security activities.
3. Collaborate with, management, legal counsel, and appropriate staff to create, implement, and monitor Palmetto Community Care's privacy and security policies, including procedures designed to ensure the confidentiality, integrity, and availability of all electronic PHI that Palmetto Community Care or its external service providers create, receive, maintain, or transmit, protections against any reasonably anticipated threats or hazards to the security or integrity of electronic PHI, to protect against any reasonably anticipated uses or disclosures of electronic PHI not permitted or required under the HIPAA privacy and security rules, and to ensure compliance with the security rules by employees and associates who handle electronic PHI.
4. Monitor all operations to ensure compliance with all state and federal security laws.
5. Establish an internal security audit program and coordinate the development of security risk assessment policies and procedures.
6. Collaborate with other departments, divisions, and committees of Palmetto Community Care (such as accounting and information systems) to ensure compliance with specific security requirements.
7. Assist in the development, implementation, and monitoring of business associate agreements to ensure that all security requirements are adequately addressed.
8. Develop and implement an organization-wide security training program and a certification program to ensure that all workforce members who handle electronic PHI certify their recognition of and compliance with the organization's privacy and security policies and procedures.
9. Establish and monitor a system for receiving questions and complaints regarding the security program.
10. Develop methods of investigating allegations of non-compliance with Palmetto Community Care's privacy and security policies, and develop

appropriate sanctions for non-compliance by employees and business associates. Make periodic reports to management on the status of the security program.

11. Develop and implement corrective action procedures to mitigate the effects of prohibited use or disclosure of electronic PHI by workforce members or business associates.
12. Maintain current knowledge of applicable standards and revise the security compliance program as necessary to reflect changes in the law or Palmetto Community Care policy.
13. Serve as an internal resource for all security-related matters and cooperate with external parties in any compliance reviews or investigations.

E. Qualifications. The Palmetto Community Care Security Officer shall have the following qualifications:

1. Knowledge in and the ability to apply the principles of information security principles and best practices, project management and change management.
2. Demonstrated facilitation, communication, and presentation skills.

F. Other Requirements:

1. The Security Officer will be trained on the requirements of the HIPAA Privacy and Security Rules and Palmetto Community Care policies and procedures regarding the security of protected health information, including:
  - a. the security management process and management of information access;
  - b. promotion of security awareness and establishment of training programs;
  - c. establishment of security incident procedures and development of a contingency plan;
  - d. evaluation of safeguards and verification of business associate contracts;
  - e. development of facility access controls, as well as policies and safeguards for workstation use and security;
  - f. development of access controls and authentication policies, including individual authorizations for the use or disclosure of protected health information;
  - g. development of audit controls and electronic PHI integrity analysis;
  - h. development of measures to provide for secure transmission of electronic PHI;
2. Training will be conducted for the Security Officer as soon as possible after such person assumes the role of Security Officer.

3. The designation of the Security Officer and all training conducted for the Security Officer will be documented and retained for a period of at least six years.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 5. DESIGNATION OF PALMETTO COMMUNITY CARE PRIVACY OFFICER

**POLICY:** It is the policy of Palmetto Community Care to designate a Privacy Officer who is responsible for the development and implementation of the policies and procedures for the Palmetto Community Care privacy program.

---

**PURPOSE:** The purpose of this policy is to describe the position of Palmetto Community Care Privacy Officer and set forth his or her responsibilities.

---

#### I. PROCEDURE

##### A. Designation of Privacy Officer

1. Palmetto Community Care will designate Janice Nichols as the Privacy Officer responsible for the Palmetto Community Care privacy program.
2. Palmetto Community Care will utilize the Palmetto Community Care Privacy Officer job description below.
3. Palmetto Community Care will maintain a written record of the designation of the Palmetto Community Care Privacy Officer.

##### B. Privacy Officer Job Description

1. The Palmetto Community Care Privacy Officer reports to the Security Officer and Chief Executive Officer.
2. The title of the position is Palmetto Community Care Privacy Officer.
3. The Palmetto Community Care Privacy Officer, with guidance as needed from Palmetto Community Care management and Palmetto Community Care legal counsel, oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to Palmetto Community Care's policies and procedures covering the privacy of, and access to, protected health information ("PHI") in compliance with federal and state laws and Palmetto Community Care's information privacy practices.

##### C. Position Overview. The Privacy Officer serves as the designated official responsible for the HIPAA privacy compliance program. The Privacy Officer oversees the

development, implementation, operation and enforcement of the compliance program.

D. Responsibilities. The responsibilities of the Palmetto Community Care Privacy Officer are as follows:

1. Work with management and the Palmetto Community Care Security Officer to develop and implement a HIPAA privacy compliance program.
2. Direct and facilitate the HIPAA privacy activities.
3. Collaborate with, management, legal counsel, and appropriate staff to create, implement, and monitor Palmetto Community Care's privacy and security policies, including policies for a notice of privacy practices; minimum necessary use and disclosure of PHI; access, inspection, and copying of PHI; amendment of PHI; accounting for disclosures of PHI; record-keeping procedures; and other administrative procedures.
4. Monitor all departments, divisions, and operations to ensure compliance with all state and federal privacy laws.
5. Establish an internal privacy audit program to track certain non-routine disclosures of PHI.
6. Collaborate with other departments, divisions, and committees of Palmetto Community Care (such as accounting and information systems) to ensure compliance with specific privacy requirements.
7. Assist in the development, implementation, and monitoring of business associate agreements to ensure that all privacy requirements are adequately addressed.
8. Develop and implement an organization-wide privacy training program and a certification program to ensure that all workforce members certify their recognition of and compliance with the organization's privacy and security policies and procedures.
9. Establish and monitor a system for receiving questions and complaints regarding the privacy program, ensure that the Notice of Privacy Practices includes a method for contacting the organization regarding privacy matters, and document complaints and their resolution.
10. Develop methods of investigating allegations of non-compliance with Palmetto Community Care's privacy and security policies and develop appropriate sanctions for non-compliance by employees and business associates. Make periodic reports to management on the status of the privacy program.

11. Develop and implement corrective action procedures to mitigate the effects of prohibited use or disclosure of PHI by workforce members or business associates.
  12. Maintain current knowledge of applicable standards and revise the privacy compliance program as necessary to reflect changes in the law or Palmetto Community Care policy.
  13. Serve as an internal resource for all privacy-related matters and cooperate with external parties in any compliance reviews or investigations.
- E. Qualifications. The Palmetto Community Care Privacy Officer shall have the following qualifications:
1. Knowledge in and the ability to apply the principles of project management and change management.
  2. Demonstrated facilitation, communication, and presentation skills.
- F. Other Requirements:
1. The Privacy Officer will be trained on the requirements of the HIPAA Privacy and Security Rules and Palmetto Community Care policies and procedures regarding the privacy of protected health information, including:
    - a. the secure transmission and storage of protected health information in any form;
    - b. the restrictions on access of health information;
    - c. the secure management of protected health information;
    - d. the proper use and disclosure of protected health information at the request of the individual;
    - e. the proper use and disclosure of protected health information without the authorization of the individual;
    - f. individual authorizations for the use or disclosure of protected health information;
    - g. individual rights regarding protected health information;
    - h. contracts with business associates regarding the use and disclosure of protected health information;
    - i. the proper use of the Notice of Privacy Practices;
    - j. the retention of records and appropriate documentation regarding privacy of protected health information;
    - k. the complaint procedure;
    - l. internal training requirements;
    - m. notification requirements in the event of a Breach of Unsecured Protected Health Information.
  2. Training will be conducted for the Privacy Officer by the date Palmetto Community Care must be in compliance with the HIPAA Privacy Rule.

3. In the event that a different person than initially trained assumes the role of Privacy Officer, training for such person will be conducted as soon as possible after such person assumes the role of Privacy Officer.
4. The designation of the Privacy Officer and all training conducted for the Privacy Officer will be documented and retained for a period of at least six years.



## **6. DESIGNATION OF PALMETTO COMMUNITY CARE IT DIRECTOR**

**POLICY:** It is the policy of Palmetto Community Care to designate a vCISO who is responsible for the development and implementation of the policies and procedures for the Palmetto Community Care security program.

**PURPOSE:** The purpose of this policy is to describe the position of Palmetto Community Care vCISO and set forth his or her responsibilities.

### **I. PROCEDURE**

#### **A. Designation of the vCISO**

1. Palmetto Community Care will designate Cantey Tech Services Cantey Tech Solutions as the vCISO for the Palmetto Community Care security program.
2. Palmetto Community Care will maintain a written record of the designation of the Palmetto Community Care vCISO

#### **B. vCISO Job Description**

1. The immediate supervisors of the Palmetto Community Care vCISO is the Palmetto Community Care Chief Executive Officer
2. The title of the position is Palmetto Community Care vCISO .
3. The Palmetto Community Care vCISO , with guidance as needed from Palmetto Community Care management and Palmetto Community Care legal counsel, oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to Palmetto Community Care's policies and procedures covering the security of, and access to, protected health information ("PHI") in compliance with federal and state laws and Palmetto Community Care's information security practices.

**C.** Position Overview. The Chief Executive Officer serves as the designated official responsible for IT administration. The IT Director is the only member of the Palmetto Community Care staff who has Administrator access on managed servers, workstations and laptop.

- D. Note: The IT Director position may be outsourced to a private entity. However, in this role, the IT Director will still report to the Chief Executive Officer for reporting and informational purposes.
- E. Responsibilities. The responsibilities of the Palmetto Community Care vCISO include the following IT responsibilities:
1. Create all user accounts
  2. Enforce password policies
  3. Maintain all user workstations, laptops, and servers.
  4. Maintain all backups
  5. Update anti-virus
  6. Monitor all network traffic- including email encryption for secure exchange of PHI among internal and external recipients
  7. Monitor all audit logs
  8. Conduct general computer security activities
  9. Report any irregular user or network activities to the Security Officer
  10. Perform general IT and Information Assurance activities on the Palmetto Community Care network.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 7. TRAINING

**POLICY:** All Palmetto Community Care employees and volunteers of Palmetto Community Care will receive training regarding privacy and security policies and procedures as necessary and appropriate for each employee to carry out his or her functions on behalf of Palmetto Community Care.

**PURPOSE:** The purpose of this policy is to ensure that Palmetto Community Care employees and volunteers who are part of Palmetto Community Care receive effective and timely education regarding the privacy and security policies and procedures and that an education curriculum is created and maintained to meet the needs of such Palmetto Community Care employees.

### I. PRIVACY TRAINING

- A. New Palmetto Community Care employees and volunteers, as part of their initial orientation, will receive training regarding privacy and security policies and procedures within 15 days of placement. They will also receive a copy of this manual and be required to read the manual.
- B. Additional training.
1. When material changes are made to a policy or procedure, all Palmetto Community Care employees and volunteers whose functions are affected by the change must receive training on the new policies and procedures within a reasonable time after the material change has been made.
  2. Additional training sessions may be conducted for specific employees or volunteers who have responsibilities involving specific compliance issues.
  3. The Palmetto Community Care Security or Privacy Officer may direct specific employees and volunteers to attend training if he or she believes that such training is warranted.
- C. Content of training. The training program will focus on Palmetto Community Care's privacy and security policies and procedures and federal laws and regulations governing the privacy, confidentiality, and security of PHI.

- D. Documentation requirements. Palmetto Community Care shall document that the required training has been provided and log of who attended training and on what date.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 8. DOCUMENTATION REQUIREMENTS

**POLICY:** It is the policy of Palmetto Community Care to maintain all policies and procedures, forms and supporting documentation, with respect to protected health information ("PHI") for a minimum of 6 years from the date they were created or were last in effect, whichever is later.

**PURPOSE:** The purpose of this policy is to explain the guidelines that Palmetto Community Care will follow with respect to HIPAA Privacy and Security Policies and Procedures documentation created and maintained by Palmetto Community Care.

---

#### I. CREATION AND IMPLEMENTATION

- A. The Palmetto Community Care Privacy Officer will create and implement policies and procedures with respect to PHI that are designed to comply with the standards, implementation specifications or other requirements of the HIPAA privacy rules.
- B. The Palmetto Community Care Privacy Officer will maintain current policies and procedures with respect to PHI in Palmetto Community Care's Privacy Policy and Procedures Manual.

#### II. CHANGES TO DOCUMENTATION

The Palmetto Community Care Privacy Officer will change the policies and procedures when "necessary and appropriate" to comply with changes in the law and/or changes in Palmetto Community Care's privacy practices.

#### III. NOTICE OF PRIVACY PRACTICES

- A. The Palmetto Community Care Notice of Privacy Practices (the "Notice") for PHI will be revised and distributed when there is a material change in the uses or disclosures, the individual's rights, legal duties, or other privacy practices stated in the notice.
- B. The Palmetto Community Care Privacy Officer will promptly implement the revised Notice within each designated posting area.
- C. Palmetto Community Care will maintain the client's written acknowledgements of receipt of the Notice and for acknowledgments not received, documentation of

Palmetto Community Care's good faith efforts to obtain such acknowledgment and the reason why the acknowledgment was not obtained.

#### **IV. DOCUMENTATION RETENTION**

- A. Palmetto Community Care will maintain the HIPPA Privacy Policy and Procedures Manual, which contains all policies and procedures, forms and supporting documents, with respect to PHI for at least 6 years from the date it was created or was last in effect, whichever is later.
- B. For Palmetto Community Care locations where forms and supporting documentation are utilized, the same documentation retention policy applies.
- C. Palmetto Community Care will maintain the following documentation in an organized and secure manner which also ensures the availability of such documents when necessary:
- policies and procedures related to the use or disclosure of protected health information;
  - forms for the authorization to use or disclose protected health information;
  - requests for access to inspect or copy PHI, amendment, accounting, restrictions on use or disclosure of PHI, and confidential communications and documentation regarding responses to same;
  - designation of Privacy Officer and any other personnel appointed to receive and process requests for access to inspect or copy PHI, amendment, accounting, restrictions on use or disclosure of PHI, and confidential communications, and personnel approved to release de-identified information or information in a limited data set;
  - agreements with business associates referring to the use or disclosure of protected health information;
  - Notice of Privacy Practices and any changes made thereto;
  - education and training of personnel including:
    - the nature of the training;
    - the name of the training session;
    - the date and location;
    - the amount of training provided;
    - a copy of the training materials used;
    - attendance and participation records;
    - background qualifications of trainer;
    - pre- and post-tests results (if used);
    - student evaluations of the training (if used);
    - any results of the training.
  - complaints, investigation of complaints, and any sanctions imposed.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 9. ACKNOWLEDGMENT

**POLICY:** It is Palmetto Community Care's policy to make a good faith effort to obtain from each Palmetto Community Care client and individual who receives HIV and STD testing from Palmetto Community Care a written acknowledgment that the client has received Palmetto Community Care's Notice of Privacy Practices ("Notice") upon each client's first receipt of items or services at a Palmetto Community Care location.

**PURPOSE:** The purpose of this policy is to explain: (1) when Palmetto Community Care is required to obtain an acknowledgment; and (2) the relevant procedures Palmetto Community Care must follow when obtaining the acknowledgment from clients, and (3) the requirements for documentation of the acknowledgment process.

---

#### I. OBTAINING AN ACKNOWLEDGMENT

- A. Acknowledgment requirement. Palmetto Community Care must make a good faith effort to obtain the client's written acknowledgment of receipt of the Notice no later than the date of first service delivery, including service delivered electronically.
  - 1. In emergency treatment situations, Palmetto Community Care may wait to obtain the acknowledgment until reasonably practicable.
  - 2. If the Notice is delivered electronically as part of the first service delivery, Palmetto Community Care system must be capable of capturing the client's acknowledgment of receipt electronically.
- B. Client's failure to provide acknowledgment. If a client refuses or otherwise fails to provide an acknowledgment, Palmetto Community Care shall document its good faith efforts to obtain the acknowledgment and the reason why the acknowledgment was not obtained (*e.g.*, the client refused to sign the acknowledgment after being requested to do so). Palmetto Community Care is not prohibited from providing treatment or otherwise using or disclosing protected health information ("PHI") as permitted by law if the client does not sign an acknowledgment after having been asked to do so.
- C. Single acknowledgment. Only one signed acknowledgment is required per client. Palmetto Community Care is not required to collect a signed acknowledgment every time a client receives services. Even if the Notice is revised, Palmetto Community Care is not required to ask clients to sign a new acknowledgment.

## II. RECORD RETENTION REQUIREMENTS

Palmetto Community Care must retain copies of any written acknowledgments of receipt of the Notice, or if not obtained, documentation of its good faith efforts to obtain such written acknowledgment. Palmetto Community Care must retain this documentation from the date of its creation until 6 years after the date when it was last in effect.

## III. PROCEDURES/FORMS

- A. When a Palmetto Community Care client first receives services, the client will be provided the Notice leaflet and asked to sign the attached "Acknowledgment" form indicating that the client has received the Notice. Upon receipt of the signed Acknowledgment form, it must then be processed in the following manner:
1. The Palmetto Community Care staff must “check off” in the client's profile that the acknowledgment form has been signed and received by Palmetto Community Care.
  2. Once processed in the client’s profile, the signed Acknowledgment form must be filed using the following method:
    - a. Place Acknowledgment forms in folders in the order of date received.
    - b. Date the folder with the beginning date of the first signed Acknowledgment form and the ending date of the last signed Acknowledgment form.
  3. The processed date on the form represents the connection to the client's profile. If an Acknowledgment form needs to be retrieved at a later date; the client profile will have the date that the signed Acknowledgment form was processed, and the Palmetto Community Care employee can then locate the file folder that contains the signed forms with the required date range.
  4. These forms must be kept for 6 years from the date of the acknowledgment and must be easily retrievable.
- B. In the event the client is a minor or is incompetent, then the Palmetto Community Care will give the Notice to the client's personal representative and make a good faith effort to obtain the written acknowledgment from that person. The Palmetto Community Care will make reasonable efforts to verify the person's authority to act for the client in accordance with the Verification of Identity and Authority Prior to a Use and Disclosure and the Disclosing Protected Health Information to Personal Representatives policies.
- C. If the Palmetto Community Care cannot obtain written acknowledgment of the client or the client’s personal representative, then it will document its good faith efforts to obtain the acknowledgment.

D. The Acknowledgement of Receipt of Notice of Privacy Practices form is located in Appendix B of this policy.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 10. GENERAL USE AND DISCLOSURE

**POLICY:** Palmetto Community Care will use and disclose protected health information ("PHI") only as specifically permitted or required by the HIPAA privacy and security rules, applicable state law and in accordance with Palmetto Community Care's privacy and security policies and procedures.

---

**PURPOSE:** The purpose of this policy is to explain the basic standards that must be met when using and/or disclosing PHI.

---

#### I. INTRODUCTION

- A. Basic rule for use and disclosure of PHI. Palmetto Community Care may not use or disclose PHI without a client's (or client's representatives) authorization unless permitted or required by the HIPAA privacy and security rules, subject to stricter state law requirements.
- B. Permitted uses and disclosures. Some of the permitted uses and disclosures of PHI are:
  - 1. To the client;
  - 2. In the best interest of the client;
  - 3. Pursuant to and in compliance with a valid authorization;
  - 4. As required by law;
  - 5. To a person authorized to treat a client or prescribe drugs or devices;
  - 6. Pursuant to any statutorily required reporting to health or government authorities;
  - 7. To an interested third-party payer (or their designee) for the purpose of utilization review, case management, peer reviews or other administrative functions; or
  - 8. In response to a subpoena issued by a court of competent jurisdiction.
- C. Required disclosures. As permitted by state law, the HIPAA privacy rules **require** Palmetto Community Care to disclose PHI in only two instances:

1. When the client requests access to information about himself or herself; and
2. When the Secretary of the United States Department of Health and Human Services ("HHS") requests information to investigate or determine Palmetto Community Care's compliance with the rules, to the extent required by law.

## II. MINIMUM NECESSARY

- A. The minimum necessary standard. When using or disclosing PHI, and when requesting PHI from another entity, Palmetto Community Care must make reasonable efforts to use, disclose, or request the minimum amount of PHI reasonably necessary to accomplish the intended purpose of the use, disclosure, or request.
- B. Exceptions. Among the uses, disclosures, and requests to which the minimum necessary standard **does not** apply are:
  1. Disclosures to or requests by a health care provider for treatment purposes;
  2. Disclosures to the client who is the subject of the information;
  3. Uses or disclosures made pursuant to a valid authorization;
  4. Uses or disclosures that are required for compliance with applicable requirements of the HIPAA privacy and security rules;
  5. Disclosures to HHS when required by HHS for compliance and enforcement purposes; and
  6. Uses or disclosures that are required by other law.
- C. Required policies and procedures for uses of PHI. Palmetto Community Care will limit the use of PHI to the minimum PHI reasonably necessary to accomplish the intended purpose of the use or disclosure.
  1. The following classes of Palmetto Community Care employees require and will maintain the indicated levels of access to PHI at all Palmetto Community Care locations on a routine basis to appropriately accomplish their duties and responsibilities:
    - a. The persons or classes of persons in Palmetto Community Care who need access to PHI to carry out their duties: all employees of Palmetto Community Care;
    - b. The categories of PHI that each person or class of person's needs: all information in client files, including, but not limited to, name, date of birth, social security number, and behavioral risks as they relate to an individual's medical, mental health, dental and case management

records, and including all information in the Patient Enterprise information system;

- c. Any conditions necessary for such access.
- D. Required policies and procedures for disclosures of PHI. Palmetto Community Care also is required to develop certain policies and procedures for disclosures of PHI. The regulatory requirements differ depending on whether the disclosure is a routine or non-routine disclosure.
1. For any type of disclosure that is made on a routine, recurring basis, Palmetto Community Care will develop and implement policies and procedures (which may be standard protocols) that permit only the disclosure of the minimum amount of PHI that is reasonably necessary to achieve the purpose of the disclosure. The policies and procedures must identify the:
    - a. Types of PHI to be disclosed;
    - b. Types of persons who may receive the PHI; and
    - c. Conditions necessary for such access.
  2. For non-routine disclosures, Palmetto Community Care will develop reasonable criteria for determining and limiting disclosure to only the minimum amount of PHI necessary to accomplish the purpose of the disclosure.
    - a. Among the factors that will be considered in making such a determination are:
      - (i) How much PHI will be disclosed?
      - (ii) To what extent would the disclosure increase the number of persons with access to the PHI?
      - (iii) What is the likelihood of further disclosures?
      - (iv) How important is the disclosure?
      - (v) Can substantially the same purpose be achieved using de-identified information?
      - (vi) Is there technology available to limit the amount of PHI disclosed?
      - (vii) What is the cost, financial or otherwise, of limiting the disclosure?
    - b. Palmetto Community Care will also develop and implement procedures for reviewing non-routine requests for disclosures on an individual basis in accordance with established criteria.
- E. Requests for PHI. The minimum necessary standard applies to situations where Palmetto Community Care is requesting an individual's PHI from another entity.

1. For requests to other entities made on a routine and recurring basis, Palmetto Community Care will establish standard protocols describing what information is reasonably necessary for the purposes for which it is requested, and limit its requests to only that information.
  2. For non-routine requests, Palmetto Community Care and Privacy Officer review the requests on an individualized basis.
- F. Reasonable reliance on requested disclosures. Palmetto Community Care may rely **if reasonable under the circumstances**, on statements by public officials, other covered entities or their business associates that they are requesting the minimum PHI necessary to achieve the stated purpose of the request. Palmetto Community Care may also reasonably rely on the statements of its own business associates or professionals within its workforce (such as doctors, nurses, pharmacists, attorneys or accountants) that the information requested to provide professional services to Palmetto Community Care is the minimum necessary for such purposes.

### **III. DE-IDENTIFICATION AND LIMITED DATA SETS**

- A. Basic standard. Health information is considered de-identified (*i.e.*, not individually identifiable) under the rules if it does not identify a client and Palmetto Community Care has no reasonable basis to believe it can be used to identify a client. De-identified information is not PHI and therefore the requirements of the rules do not apply to such information.
- B. De-identifying information. Palmetto Community Care may de-identify information in two ways:
1. If a person with appropriate knowledge and experience applying generally accepted statistical and scientific principles and methods for rendering information not individually identifiable makes a determination, and documents the analysis, that the risk is very small that the information could be used, either by itself or in combination with other available information, by anticipated recipients to identify a subject of the information; or
  2. If Palmetto Community Care removes a list of specified identifying information about the individual or his or her relatives, employers, or household members, and Palmetto Community Care has no actual knowledge that the information could be used alone or in combination to identify a subject of the information. The identifying information that must be removed is:
    - a. Names
    - b. Address, including street address, city, county and zip code (please reference regulation for more details on this specification)
    - c. Birth Date (except year)
    - d. Admission Date (except year)

- e. Discharge Date (except year)
- f. Date of Death (except year)
- g. All ages over 89 (except year)
- h. All elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older
- i. Telephone Numbers
- j. Fax Numbers
- k. Electronic Mail Addresses
- l. Social Security Numbers
- m. Medicaid Record Numbers
- n. Health Plan Beneficiary Numbers
- o. Account Numbers
- p. Certificate/License Numbers
- q. Vehicle Identifiers and Serial Numbers, including License Plate Numbers
- r. Device Identifiers and Serial Numbers
- s. Web Universal Resource Locators (URLs)
- t. Internet Protocol (IP) Address Numbers
- u. Biometric Identifiers, including Finger and Voice Prints
- v. Full Face Photographic Images and Comparable Images
- w. Any other Unique Number, Characteristic, or Code; and
- x. Palmetto Community Care does not have actual knowledge that the information could be used alone or in combination with other information to identify an individual who is a subject of the information.

- C. Use of PHI to create de-identified information. Palmetto Community Care may use PHI to create de-identified information, or may disclose PHI to a business associate for such purpose, whether or not the de-identified information will be used by Palmetto Community Care.
- D. Re-identification. If de-identified information is re-identified at some point by Palmetto Community Care, it becomes subject to the rules again and may only be used or disclosed in compliance with the regulations and Palmetto Community Care's privacy and security policies.
- E. Limited data set. Palmetto Community Care may use PHI, or disclose PHI to a business associate, for the creation of a limited data set. A limited data set may be used or disclosed only for the purposes of **research, public health, or health care operations**, so long as Palmetto Community Care enters into a **data use agreement** with the recipient of the limited data set.
  - 1. A limited data set is PHI that excludes specified direct or "facial" identifiers of the individual or of relatives, employers, or household members of the individual.

2. A data use agreement between Palmetto Community Care and the limited data set recipient must:
  - a. Establish the permitted uses and disclosures of such information by the limited data set recipient;
  - b. Prohibit the limited data set recipient's use or disclosure of the information in a manner that would violate the HIPAA privacy rules if done by Palmetto Community Care;
  - c. Establish who is permitted to use or receive the limited data set; and
  - d. Provide that the limited data set recipient will:
    - (i) Not use or further disclose the information other than as permitted by the data use agreement or as otherwise required by law;
    - (ii) Use appropriate safeguards to prevent use or disclosure of the information other than as provided for by the data use agreement;
    - (iii) Report to Palmetto Community Care any use or disclosure of the information not provided for by its data use agreement of which it becomes aware;
    - (iv) Ensure that any agents, including a subcontractor, to whom it provides the limited data set agrees to the same restrictions and conditions that apply to the limited data set recipient with respect to such information; and
    - (v) Not identify the information or contact the individuals.

#### **IV. DISCLOSURES TO FRIENDS AND RELATIVES**

- A. Basic rule. Palmetto Community Care may disclose to a person involved in the current health care of the client (such as a relative, close personal friend, or any other person identified by the client) PHI directly related to the person's involvement in the current health care of the client or payment for the client's health care. Whenever possible, Palmetto Community Care will attempt to obtain the client's written authorization for such disclosures. Examples of persons who might be involved in the client's care include, but are not limited to:
1. Relatives, including those by marriage and adoption;
  2. Spouses;
  3. Roommates;
  4. Girlfriends and boyfriends;
  5. Domestic partners; and
  6. Neighbors.
- B. Disclosures of PHI when the client is present. When the client is present and has the capacity to make his or her own decisions, Palmetto Community Care may disclose PHI to the third party only if Palmetto Community Care:
1. Obtains the client's agreement to disclose to the third party involved in his or her care;
  2. Provides the client with an opportunity to object to such disclosure and the client does not express an objection; or
  3. Reasonably infers from the circumstances, based on the exercise of professional judgment that the client does not object to the disclosure.
- C. Disclosures of PHI when the client is not present. When a client is not present or when Palmetto Community Care cannot practically give the client an opportunity to agree or object to the use or disclosure (*e.g.*, because of the client's incapacity or an emergency circumstance), the employee may, in the exercise of professional judgment, determine whether the disclosure is in the client's best interest. If so, the employee may disclose only PHI that is directly relevant to the person's involvement with the client's health care. For instance, this allows the employee to disclose instructions for taking a particular prescription to a client's caregiver. The employee must follow these guidelines when deciding whether to disclose PHI when the client is not present:
1. Only disclose PHI that is directly related to the client's current condition.

2. Consider the client's best interest and construe this opportunity narrowly, allowing disclosures only to those persons with close relationships with the client, such as family members.
3. Take into account whether the disclosure is likely to put the client at risk of serious harm.
4. Palmetto Community Care employees are not required to verify the identity of relatives or other persons involved in the client's care. When a client brings a person to the Palmetto Community Care with him or her to receive treatment, this is sufficient verification of the person's identity. See also the Verification of Identity and Authority Prior to a Use and Disclosure policy.
5. A client's agreement to disclose PHI in one situation or on one occasion does not mean that the client agrees to disclosures of PHI indefinitely in the future. Use professional judgment to determine the scope of the person's involvement in the client's care and the time period during which the client agrees to the other person's involvement.

## V. REASONABLE SAFEGUARDS

- A. Applicability of privacy standards. The HIPAA privacy rules apply to PHI in all forms - electronic, written, oral, and any other form to prevent unintentional use or disclosure of PHI.
- B. Use of PHI in oral communications. Palmetto Community Care employees may orally coordinate services. Palmetto Community Care employees may discuss a client's PHI over the telephone with the client, a physician, or an authorized person.
- C. Documentation of oral communications. Palmetto Community Care is not required to document any information, including oral information that is used or disclosed for treatment, payment, or health care operations. However, where the rules or Palmetto Community Care's privacy and security policies require documentation of other types of disclosures, oral communications are included in this requirement. For example, oral disclosures of PHI for purposes other than treatment, payment, or health care operations must be documented in order to provide the client with a complete accounting of disclosures.
- D. Palmetto Community Care's duty to safeguard PHI. Palmetto Community Care must reasonably safeguard PHI, including oral information, from any intentional or unintentional uses or disclosures that are in violation of the HIPAA privacy rules, applicable state law and Palmetto Community Care's privacy and security policies. This means that Palmetto Community Care must make reasonable efforts to prevent improper uses and disclosures of PHI. Measures that Palmetto Community Care **may** implement to protect clients' privacy include:
  1. With respect to client counseling, a Palmetto Community Care or off-site location must provide a private consultation area so all clients will be able to

obtain counseling without being overheard by others in the Palmetto Community Care or off-site location. In determining whether a consultation area is suitable, consideration must be given to the proximity of the counseling area to the payment or check-out area, the volume of pedestrian traffic in and around the consultation area, and the presence of walls or other barriers between the consultation area and the other areas of the Palmetto Community Care or off-site location. The consultation area may consist of designated private space. The area must be designated with a sign bearing "Client Consultation Area," or words that are substantially similar.

2. Speaking quietly or asking that waiting clients stand a few feet back from the counter when Palmetto Community Care employees are consulting with clients from behind a counter that is not within a private consultation area.
3. Limiting the information that is disclosed when Palmetto Community Care employees make announcements in the Palmetto Community Care or off-site location regarding appointments with the doctors or nurses at the Palmetto Community Care.
4. Placing PHI that is to be disposed in a locked shred box.
5. Locating shredders in each Palmetto Community Care, location, or off-site location for purposes of disposing of paper records.

## **VI. DECEASED INDIVIDUALS**

Palmetto Community Care must protect the PHI of deceased individuals in accordance with the HIPAA rules, applicable state laws and Palmetto Community Care's privacy and security policies for as long as Palmetto Community Care maintains the information (except that the health information of a deceased person is no longer PHI after 50 years of death). If under applicable law an executor, administrator or other person has authority to act on behalf of a deceased individual or the deceased individual's estate. Palmetto Community Care will treat such person as a personal representative with respect to the deceased individual's PHI. See also the Disclosing Protected Health Information to Personal Representatives policy.

## **VII. PERSONAL REPRESENTATIVES**

Palmetto Community Care must treat a person as the personal representative of a client if the person is, under applicable state or other law, authorized to act on behalf of the client in making decisions related to health care. However, the personal representative must be treated as the client only to the extent that PHI is relevant to the matters on which the personal representative is authorized to represent the client. For instance, if the personal representative is authorized to act on the client's behalf only with respect to the client's treatment for HIV/AIDS, then Palmetto Community Care may disclose to the personal representative only that information that is relevant to the client's HIV/AIDS treatment. In addition, the personal representative's rights are limited by the scope of his or her authority under state or other law. See also the Disclosing Protected Health Information to Personal Representatives and the Right to Access Records policies.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **11. VERIFICATION OF IDENTITY AND AUTHORITY PRIOR TO A USE AND DISCLOSURE**

**POLICY:** It is the policy of Palmetto Community Care to verify the identity and authority of a person prior to a disclosure of protected health information ("PHI") as required under the HIPAA privacy rules.

---

**PURPOSE:** The purpose of this policy is to explain the process that Palmetto Community Care employees must follow in order to verify the identity and authority of a person prior to disclosing PHI.

---

#### **I. PROCEDURE**

- A. Palmetto Community Care must verify the identity and authority of a person prior to disclosing PHI if the person is not known to Palmetto Community Care. Palmetto Community Care will also obtain any documentation, statement, or representation, whether oral or written, from the person requesting the PHI, when such documentation, statement, or representation is required prior to a disclosure.
- B. The identity of the person requesting a disclosure of PHI may be verified by obtaining proper identification from the individual. For example, a driver's license or photo ID. Proper documentation must be obtained for verifying the identity and the authority of personal representatives, e.g., a copy of a power of attorney.
- C. Palmetto Community Care does not need to verify the identity of a person prior to a disclosure in the following circumstances:
  - 1. For individuals assisting in an individual's care or for notification purposes; or
  - 2. For disclosures when the individual is not present, when professional judgment and experience with common practice to make reasonable inferences (For example, a friend or family member picking up a prescription).
- D. Palmetto Community Care will verify the identity and authority of a public official or person acting on behalf of a public official prior to a disclosure of PHI.
  - 1. The Palmetto Community Care employee shall determine if the disclosure is for law enforcement purposes, e.g., in an investigation of a physician's prescribing habits by local DEA or other law enforcement.

2. The Palmetto Community Care employee shall verify the identity of the person requesting a disclosure of PHI:
  - a. If the request is made in person, request the agency identification badge, other official credentials, or other proof of government status;
  - b. If the request is made in writing, request the appropriate government letterhead; **or**
  - c. If the disclosure is to a person acting on behalf of a public official, request a written statement on the appropriate government letterhead that the person is acting under the government's authority, or other evidence or documentation of the agency that establishes that the person is acting on behalf of the public official.
  
3. The Palmetto Community Care employee shall verify the authority of the person requesting a disclosure of PHI by using any of the following:
  - a. Written statement of the legal authority under which the information is requested, or if a written statement would be impracticable, an oral statement of such legal authority; **or**
  - b. If the request is made pursuant to a legal process, warrant, subpoena, order of other legal process issued by a grand jury or a judicial or administrative tribunal is presumed to constitute legal authority.
  
- E. Palmetto Community Care shall verify the identity of the Secretary of the United States Department of Health and Human Services for purposes of enforcing the regulations.
  
- F. If a Palmetto Community Care employee, exercising professional judgment, determines that a disclosure is necessary to avert, prevent or lessen a serious or imminent threat to the health or safety of a person or the public, it is lawful to make this disclosure in good faith and no further verification is needed. In such circumstances, the minimum necessary PHI to meet the purpose of the request should be provided.
  
- G. For requests for PHI made over the telephone, a Palmetto Community Care employee shall verify the identity of the individual requesting PHI over the telephone by:
  1. For routine disclosures, performing a call back to the individual requesting PHI.
  2. For non-routine disclosures, requiring that the individual confirm multiple elements of non-private information maintained by Palmetto Community Care. For example, social security number, date of birth, and mother's maiden name.
  3. The minimum necessary PHI shall be provided to meet the purpose of the request.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 12. RIGHT TO ACCESS RECORDS

**POLICY:** Palmetto Community Care shall process, in accordance with the procedures outlined below, a request to access, inspect, and/or obtain a copy of certain protected health information ("PHI") maintained by Palmetto Community Care, if the request is made by a client or his or her authorized representative.

**PURPOSE:** The purpose of this policy is to explain: (1) when clients may access, inspect and obtain a copy of their individual PHI maintained by Palmetto Community Care; and (2) the procedures that Palmetto Community Care must follow when clients make requests to access, inspect or obtain a copy of their PHI maintained by Palmetto Community Care.

#### I. RIGHT OF ACCESS TO PHI

- A. Basic right to access. In general, a client has a right of access to inspect and obtain a copy of his or her PHI held by Palmetto Community Care in a designated record set, for as long as the PHI is maintained by Palmetto Community Care. Exceptions to the right of access are set forth below.
- B. Written Requests. Palmetto Community Care may require the client to make request for access **in writing**, provided that it informs clients of this requirement in advance and applies the policy uniformly.
- C. Denials without an opportunity for review. Palmetto Community Care may deny the client's request for access without providing the client an opportunity for review of the decision in any of the following circumstances:
  - 1. The PHI was compiled by Palmetto Community Care in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding.
  - 2. The PHI was obtained by Palmetto Community Care in the course of research that includes treatment of the research participants, while such research is in progress, and the client previously agreed to this temporary suspension.

3. The PHI was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information.
  4. The PHI is psychotherapy notes.
- D. Denials with an opportunity for review. Palmetto Community Care may deny the client access, so long as the client is given a right to have the denial reviewed, if a licensed health care professional has determined, in the exercise of professional judgment that the provision of access is reasonably likely to cause substantial harm to the client or another person.
- E. Right to review of denial. If Palmetto Community Care denies the client access to his or her PHI as described in D. above, the client has the right to have the denial reviewed by a licensed health care professional who is designated by Palmetto Community Care to act as a reviewing official and who did not participate in the original decision to deny access. Palmetto Community Care must provide or deny access in accordance with the determination of that official.
- F. Verification. Prior to disclosing PHI to a person unknown to Palmetto Community Care, Palmetto Community Care must verify the identity of the person requesting the PHI and the authority of the person to have access to the PHI requested. In addition, Palmetto Community Care must obtain any documentation, statements, or representations, whether oral or written, from the requestor when such information is a condition of the disclosure. See also the Verification of Identity and Authority Prior to a Use and Disclosure policy.

## **II. RESPONDING TO A REQUEST FOR ACCESS**

- A. Acting on the request. Palmetto Community Care must act on a request for access within **10 business days** of the date Palmetto Community Care received the request.
1. If Palmetto Community Care grants the client's request for access, it must inform the client that the request has been granted and provide access to the PHI.
  2. If Palmetto Community Care denies the client's request for access, it must provide the client with a written denial.
- B. Provision of access. If Palmetto Community Care grants a request for access, it must comply with the following requirements.
1. Palmetto Community Care must notify the client and provide the access as requested, including inspection or obtaining a copy, or both, of the PHI.

2. Palmetto Community Care must provide the client with access to the PHI in the form or format requested by the client, if it is readily producible in this form or format; or if not, in a readable hard copy form or other form that is agreed upon by Palmetto Community Care and the client. For example, if Palmetto Community Care maintains PHI electronically and the client requests an electronic copy, Palmetto Community Care must accommodate this request if the PHI is readily producible in this format.
  3. If acceptable to the client and Palmetto Community Care, Palmetto Community Care may provide the client with a summary or explanation of the PHI instead of providing access to the actual PHI.
  4. Palmetto Community Care must provide access in a timely manner, including arranging with the client for a convenient time and place to inspect or obtain a copy of the PHI, or mailing the copy (including an electronic copy) of the PHI at the client's request. Palmetto Community Care may discuss the scope, format, and other aspects of the request for access with the client as necessary to timely provide access.
  5. If the client requests a copy of the PHI or agrees to a summary or explanation, Palmetto Community Care **may charge a reasonable, cost-based fee**, provided that the fee includes only the cost of copying, postage, and preparing an explanation or summary of the PHI (if a summary is requested by the client); and provided further that the fee does not violate the applicable state law limitation.
- C. Denial of access. If Palmetto Community Care denies access to PHI, it must implement the following procedures:
1. Give the client access to any other PHI requested, to the extent possible, after excluding the PHI that Palmetto Community Care has grounds to deny access.
  2. Provide a timely, written denial to the client. The denial must be in plain language and must include (i) the basis for the denial; (ii) if applicable, a statement of the client's right to review of the decision, including a description of how the client can exercise these review rights; and (iii) a description of how the client may complain to Palmetto Community Care or the Secretary of the United States Department of Health and Human Services, including the name or title and telephone number of the contact person or designated office.
  3. Inform the client where to direct the request for access, if Palmetto Community Care does not maintain the PHI that is the subject of the client's request for access, and Palmetto Community Care knows where the requested information is maintained.
  4. If the client has requested a review of a denial, Palmetto Community Care must promptly refer the review request to the Chief Executive Officer. The Chief

Executive Officer must determine, within a reasonable period of time, whether or not to deny access. Palmetto Community Care must promptly provide written notice to the client of the Chief Executive Officer's decision and carry out the decision.

### **III. PERSONAL REPRESENTATIVES**

- A. Except as provided in B. below, Palmetto Community Care shall provide access to a client's PHI to such client's personal representative to the extent that such PHI is relevant to the representation of the client by the personal representative.
- B. With respect to unemancipated minors:
  - 1. If, and to the extent, permitted or required by an applicable provision of state or other law, Palmetto Community Care **may** disclose, or provide access to, PHI about an unemancipated minor to a parent, guardian, or other person acting *in loco parentis*; **or**
  - 2. If, and to the extent, prohibited by an applicable provision of state or other law, Palmetto Community Care **may not** disclose, or provide access to, PHI about an unemancipated minor to a parent, guardian, or other person acting *in loco parentis*, and Palmetto Community Care must comply with the applicable requirements of the HIPAA privacy rules with respect to communicating PHI by alternative means or at alternative locations.
  - 3. Where a parent, guardian, or other person acting *in loco parentis* is not a personal representative as described in the HIPAA privacy rules and where there is no applicable access provision under state or other law, including case law, Palmetto Community Care **may** provide or deny access to the client's PHI to such parent, guardian, or other person acting *in loco parentis*, if such action is consistent with state or other applicable law, provided that such decision must be made by a Palmetto Community Care health care professional in the exercise of his or her professional judgment in consultation with the Palmetto Community Care Privacy Officer.
- C. See also the Disclosing Protected Health Information to Personal Representatives policy.

### **IV. DOCUMENTATION AND RECORD RETENTION REQUIREMENTS**

Palmetto Community Care must document the records that are subject to access by clients and the titles of the persons or offices responsible for receiving and processing requests for access. Palmetto Community Care must retain this documentation from the date of its creation until 6 years after the date when it was last in effect.

## V. PROCEDURES/FORMS

- A. In order to obtain access to his or her PHI maintained by Palmetto Community Care, a client or his or her personal representative shall complete the attached Request for Access to Protected Health Information form and deliver it to the Palmetto Community Care location(s) which he or she believes maintains PHI about him or her, or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. If the client or personal representative delivers the Request for Access to Protected Health Information to a Palmetto Community Care location, then the Palmetto Community Care employee who receives the request shall:
1. Immediately fax the completed request form to the Palmetto Community Care Privacy Officer at (843) 745-0431;
  2. Send the original request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer; and
  3. Maintain a copy of the request in the Palmetto Community Care's files.
- B. The Palmetto Community Care Privacy Officer shall respond to requests for access to PHI by completing and delivering to the client or his or her personal representative the attached Response to Request for Access to Protected Health Information form. The PCC Request for Access to Protected Health Information can be found in Appendix C of this document.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 13. DISCLOSING PROTECTED HEALTH INFORMATION TO PERSONAL REPRESENTATIVES

**POLICY:** It is the policy of Palmetto Community Care to treat a person identified as an individual's personal representative, as the individual, with respect to uses and disclosures of the individual's protected health information ("PHI"), as well as the individual's rights under the HIPAA privacy rules, to the extent of such personal representative's authority.

---

**PURPOSE:** The purpose of this policy is to explain when Palmetto Community Care is to treat an individual's personal representative as the individual with respect to uses and disclosures of the individual's PHI, as well as the individual's rights under the HIPAA privacy rules.

---

#### I. PROCEDURE

- A. Verification. Verify the identity of the individual (see the Verification of Identity and Authority Prior to a Use and Disclosure policy) and determine personal representative status and the scope of the personal representative's authority.
- B. Adult or an emancipated minor. If under applicable law a person has legal authority to make decisions related to health care, Palmetto Community Care will treat such person as a personal representative with respect to PHI within the limits of the personal representative's authority. For example, a personal representative may have the individual's health care power of attorney or general power of attorney or be a court-appointed guardian.
- C. Unemancipated minors. With respect to unemancipated minors:
  - 1. If, and to the extent, permitted or required by an applicable provision of state or other law, Palmetto Community Care **may** disclose, or provide access to, PHI about an unemancipated minor to a parent, guardian, or other person acting *in loco parentis*;
  - 2. If, and to the extent, prohibited by an applicable provision of state or other law, Palmetto Community Care **may not** disclose, or provide access to, PHI about an unemancipated minor to a parent, guardian, or other person acting *in loco*

*parentis*, and Palmetto Community Care must comply with the applicable requirements of the HIPAA privacy rules with respect to communicating PHI by alternative means or at alternative locations.

The HIPAA privacy rules specify the following three circumstances in which the parent, guardian, or other person acting *in loco parentis* is not a personal representative with respect to PHI, and therefore does not control the PHI:

- a. When state or other law does not require the consent of a parent, guardian, or other person acting *in loco parentis* before a minor can obtain a particular health care service, and the minor consents to the health care service;
  - b. When a court determines or other law authorizes someone other than the parent, guardian, or other person acting *in loco parentis* to make treatment decisions for a minor; **and**
  - c. When a parent, guardian, or other person acting *in loco parentis* agrees to a confidential relationship between the minor and the health care provider.
3. Where a parent, guardian or other person acting *in loco parentis* is not a personal representative as described in the HIPAA privacy rules and where there is no applicable access provision under state or other law, including case law, Palmetto Community Care **may** provide or deny access to the client's PHI to such parent, guardian, or other person acting *in loco parentis*, if such action is consistent with state or other applicable law, provided that such decision must be made by a Palmetto Community Care health care professional in the exercise of his or her professional judgment in consultation with the Palmetto Community Care Privacy Officer.
- D. Deceased individual. If under applicable law an executor, administrator, or other person has authority to act on behalf of a deceased individual or of the individual's estate, Palmetto Community Care will treat such person as a personal representative with respect to PHI. For example, a personal representative may be the executor of the estate, next of kin, or other family member. However, for HIV/AIDS clients Palmetto Community Care will not release information about the client unless an authorization or directive is on file from the client's authorized representative.
- E. Abuse, neglect, or endangerment. Subject to the requirements of applicable state law, Palmetto Community Care may elect not to treat a person as the personal representative of an individual if:
1. Palmetto Community Care has a reasonable belief that:
    - a. The individual has been or may be subjected to domestic violence, abuse, or neglect by such person; or
    - b. Treating such person as the personal representative could endanger the individual; and

2. Palmetto Community Care in the exercise of professional judgment, decides that it is not in the best interest of the individual to treat the person as the individual's personal representative.

F. Additional Procedures. Palmetto Community Care employees shall:

1. Consult with the Palmetto Community Care Privacy Officer, who may consult with Palmetto Community Care legal counsel, with all questions and concerns regarding personal representatives.
2. For providing the personal representative access to PHI, review the Right to Access Records policy.
3. For providing the personal representative an accounting of disclosures of PHI, review the Accounting of Disclosures policy.
4. For obtaining an authorization for a use or disclosure, review the Authorization policy.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **14. NATIONAL PRIORITY DISCLOSURES**

**POLICY:** Palmetto Community Care may release protected health information ("PHI") without a valid authorization or other permission from the client if the use or disclosure falls within one or more of the national priority exceptions of the HIPAA privacy rules, is permitted by state law and Palmetto Community Care has complied with all of the conditions required by the exception.

**PURPOSE:** The purpose of this policy is to: (1) explain the situations where a national priority exception to the HIPAA rules allows Palmetto Community Care to use or disclose PHI without a written client authorization or oral permission; and (2) describe the relevant procedures Palmetto Community Care must follow when using or disclosing PHI in such situations.

---

#### **I. RELEASE OF PHI FOR NATIONAL PRIORITY PURPOSES**

- A. General rule. As discussed in Palmetto Community Care's other HIPAA policies, in many circumstances Palmetto Community Care is allowed to use or disclose clients' PHI without their explicit prior permission. In addition to the situations described in those other HIPAA policies, Palmetto Community Care is allowed to use and disclose PHI for particular "national priority purposes" without obtaining any form of permission (*i.e.*, authorization or verbal agreement) from the client.
- B. Specific situations where client permission is not required. Subject to stricter state law requirements, listed below are separate categories of uses and disclosures for which Palmetto Community Care is not required to obtain affirmative permission from the client prior to disclosure.
  - 1. Required by law. Palmetto Community Care may use or disclose PHI as required by law, if the use or disclosure complies with and is limited to the relevant requirements of such law.
  - 2. Public health activities. Palmetto Community Care may disclose PHI for the following public health activities:
    - a. To a public health authority authorized by law to collect or receive information for the purpose of preventing or controlling disease, injury,

- or disability (*e.g.*, reporting communicable diseases), and the conduct of public health surveillance, investigations, or interventions; and
- b. To a person subject to FDA jurisdiction regarding FDA-regulated products and activities that are the responsibility of that person, for purposes related to the quality, safety, or effectiveness of that product or activity, including but not limited to:
    - (i) Collecting or reporting adverse events or product defects or problems such as drug use or labeling problems;
    - (ii) Tracking FDA-regulated products;
    - (iii) Enabling product recalls, repairs, replacement or lookback (including locating and notifying individuals who received products that have been recalled or withdrawn, or that are the subject of lookback); or
    - (iv) Conducting post-marketing surveillance.
3. Health oversight activities. Palmetto Community Care may disclose PHI to a health oversight agency for oversight activities authorized by law, including audits, investigations, inspections, licensure, or disciplinary actions; civil, administrative, or criminal proceedings; or other activities necessary for the oversight of the health care system, government benefit programs, or civil rights laws. Palmetto Community Care is permitted to respond to a health oversight agency's request for PHI as well as initiate these disclosures on its own.
  4. Judicial and administrative proceedings. Palmetto Community Care may disclose PHI in the course of a judicial or administrative proceeding if the request for PHI is made pursuant to a court or administrative order or in response to a subpoena or discovery request (or other lawful process) from a party to the proceeding:
    - a. If the request is made pursuant to a court or administrative order, Palmetto Community Care may disclose the information requested without additional process. In such cases, Palmetto Community Care may disclose only the information expressly authorized by the order.
    - b. Without a court order or subpoena issued by a court, Palmetto Community Care must take additional steps to ensure the confidentiality of the information before it is permitted to disclose the minimum PHI necessary to fulfill the request.
  5. Law enforcement purposes. Palmetto Community Care may disclose PHI for law enforcement purposes to a law enforcement official under certain enumerated circumstances. Certain limited information may be disclosed to a law enforcement official:
    - a. As required by other law or court order, warrant, subpoena, or administrative request;

- b. To identify or locate a suspect, fugitive, material witness, or missing person;
  - c. In response to a request about an individual who may be a victim of a crime;
  - d. About an individual who has died as a result of criminal conduct; **or**
  - e. Where Palmetto Community Care believes that the information constitutes evidence of criminal conduct that occurred on the premises of Palmetto Community Care.
- 6. Specialized government functions. Palmetto Community Care may disclose the PHI to armed forces personnel if necessary for a military mission. Palmetto Community Care may also disclose PHI to federal officials for intelligence and national security activities, or to a law enforcement or correctional institution official who has custody of the individual and needs the information to provide health care to the individual or to protect the health and safety of others.
  - 7. Workers' compensation. Palmetto Community Care may disclose PHI as necessary to comply with laws relating to workers' compensation or similar programs.
  - 8. Serious threat to health or safety. Palmetto Community Care may disclose PHI if it believes in good faith that the disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public and the disclosure is to a person reasonably able to prevent the threat, or is necessary for law enforcement authorities to identify or apprehend an individual.
- C. See also the Disclosure of Protected Health Information to Law Enforcement policy.

## **II. VERIFICATION OF IDENTITY AND AUTHORITY**

- A. Identity and authority. With the exception of disclosures made pursuant to valid authorizations, prior to disclosing PHI as permitted under this policy, Palmetto Community Care must verify the identity of a person requesting PHI and the authority of such person to access PHI, if the identity and/or authority is not known.
- B. Conditions on disclosures. Palmetto Community Care must obtain any documentation, statements, or representations, whether oral or written, from the person requesting the PHI that are a condition of disclosure under the HIPAA privacy rules or other law (*e.g.*, when making certain national priority disclosures).
- C. Identity of public officials. Palmetto Community Care may rely, if such reliance is reasonable under the circumstances, on any of the following to verify identity when the disclosure of PHI is to a public official or a person acting on behalf of the public official:
  - 1. If the request is made in person, presentation of an agency identification badge, other official credentials, or other proof of government status.

2. If the request is in writing, the request is on the appropriate government letterhead.
  3. If the disclosure is to a person acting on behalf of a public official, a written statement on appropriate government letterhead that the person is acting under the government's authority or other evidence or documentation of agency, such as a contract for services, memorandum of understanding, or purchase order, that establishes that the person is acting on behalf of the public official.
- D. Authority of public officials. Palmetto Community Care may rely, if such reliance is reasonable under the circumstances, on any of the following to verify authority when the disclosure of protected health information is to a public official or a person acting on behalf of the public official:
1. A written statement of the legal authority under which the information is requested, or, if a written statement would be impracticable, an oral statement of such legal authority.
  2. If a request is made pursuant to legal process, a warrant, subpoena, order, or other legal process issued by a grand jury or a judicial or administrative tribunal.
- E. See also the Verification of Identity and Authority Prior to a Use and Disclosure policy.

### **III. PROCEDURES/FORMS**

- A. Requests made in person. In the event that a request for a national priority disclosure of PHI is made in person, the Palmetto Community Care employee of whom such a request is made shall:
1. Make copies of all information disclosed.
  2. Complete the attached National Priority Disclosure Report form.
    - a. The form is to be completed while the requesting party is at the Palmetto Community Care location.
    - b. Upon completion, the National Priority Disclosure form and any documentation provided by the requesting party (letter on government letterhead, warrant, etc.) shall be faxed immediately to the Palmetto Community Care Privacy Officer at (843) 745-0431.
- B. Requests made in writing. If the request for disclosure is in writing, the written request shall be faxed immediately to the Palmetto Community Care Privacy Officer at (843) 745-0431. Any further action in response to the written request shall be taken at the direction of the Palmetto Community Care Privacy Officer.
- C. Other policies. If applicable, see also the Verification of Identity and Authority Prior to a Use or Disclosure policy, the Disclosures of Protected Health Information in

Response to Subpoenas, or Other Requests policies, and the Disclosure of Protected Health Information to Law Enforcement policy.

- D. The Response to Request for Access to Protected Health Information form can be found in Appendix D of this document.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **15. DISCLOSURE OF PROTECTED HEALTH INFORMATION TO LAW ENFORCEMENT**

**POLICY:** It is the policy of Palmetto Community Care to disclose protected health Information (PHI) to law enforcement officials as permitted and/or required by the HIPAA privacy rules and applicable state law.

**PURPOSE:** The purpose of this policy is to explain (1) when Palmetto Community Care may disclose PHI to law enforcement officials; and (2) the process that Palmetto Community Care shall follow with respect to such disclosures.

#### **I. DISCLOSURES TO LAW ENFORCEMENT**

Palmetto Community Care may disclose PHI to law enforcement officials, in a manner consistent with state law and the HIPAA privacy rules, in the circumstances set forth below:

- A. Pursuant to process and as otherwise required by law. Palmetto Community Care may disclose PHI if required by law to do so. Palmetto Community Care may also disclose PHI in accordance with a valid court order, court-ordered warrant, subpoena or summons issued by a judicial officer or a grand jury subpoena. Palmetto Community Care may respond to an administrative request authorized under law if the information sought is relevant and material to a legitimate law enforcement inquiry, the request is specific and limited in scope and de-identified information cannot be reasonably be used.
- B. Limited information for identification and location purposes. Palmetto Community Care may disclose some limited information (such as name, address, date and place of birth, social security number, type of injury or illness, date and time of treatment, date and time of death (if applicable), and a description distinguishing physical characteristics), when law enforcement officials request information to identify or locate a suspect, fugitive, material witness or missing person.
- C. Victims of a crime. As required by applicable law, Palmetto Community Care may disclose PHI if an individual who is a suspected crime victim agrees to the disclosure. If Palmetto Community Care is unable to obtain the individual's agreement because of incapacity or emergency, Palmetto Community Care may disclose the PHI if the law enforcement official represents that the information is needed to determine whether

another person has violated the law, that the information is not intended to be used against the victim, and that immediate law enforcement activity depends on obtaining the information, and would be materially and adversely affected by waiting until the individual is able to agree. In addition, Palmetto Community Care must determine that the disclosure is in the individual's best interest. See Subsection G below regarding victims of abuse, neglect or domestic violence.

- D. Decedents. As permitted by applicable law, Palmetto Community Care may disclose PHI about an individual who has died for the purpose of alerting law enforcement of the death if Palmetto Community Care suspects that the death resulted from criminal conduct.
- E. Crime on premises. As required by state law, Palmetto Community Care may disclose PHI that Palmetto Community Care believes in good faith is evidence of criminal conduct that occurred on Palmetto Community Care's premises.
- F. Victims of abuse, neglect or domestic violence. Palmetto Community Care must disclose PHI to a government authority authorized by law to receive reports of child abuse or neglect as required by state law. Palmetto Community Care may also disclose PHI to government authorities regarding an adult whom Palmetto Community Care reasonably believes to be a victim of abuse, neglect or domestic violence in the following four circumstances:
  - 1. The disclosure is required by law;
  - 2. The individual agrees to the disclosure;
  - 3. The disclosure is authorized by statute or regulation, and Palmetto Community Care reasonably believes that the disclosure is necessary to prevent serious harm to the individual or potential victims; **or**
  - 4. The disclosure is authorized by statute or regulation, the individual is unable to agree because of incapacity and a law enforcement or other public official represents that the information sought is not intended to be used against the individual, and that immediate enforcement activity depends upon the disclosure and would be materially and adversely affected by waiting until the individual is able to agree.

If Palmetto Community Care makes a disclosure regarding an adult, then Palmetto Community Care must promptly inform the individual about the report, unless Palmetto Community Care believes that informing the individual would place him or her at risk of serious harm, or it would be informing a personal representative that Palmetto Community Care believes is responsible for the abuse or neglect, and that it would not be in the individual's best interest to inform the personal representative.

## **II. PROCEDURE**

- A. If a law enforcement official makes the request pursuant to process, determine whether the subpoena or summons names the proper party (i.e., Palmetto Community Care) and otherwise complies with the policy regarding Disclosures of Protected Health Information in Response to Subpoenas or Other Requests.
- B. Determine what relevant information is in the possession of Palmetto Community Care and responsive to the law enforcement request or that Palmetto Community Care would like to disclose to law enforcement.
- C. Consult with the Palmetto Community Care Privacy Officer and Chief Executive Officer, who, in consultation with Palmetto Community Care legal counsel, will determine what information may and should be disclosed.
- D. Search warrants, subpoenas and civil investigative demands (CIDS) from government enforcement agencies and courts of law involving an enforcement action against Palmetto Community Care.
  1. A Palmetto Community Care employee who receives the search warrant, subpoena or CID shall:
    - a. Remain professional, cordial, and courteous at all times with investigators.
    - b. Check the inspector's/investigator's credentials. This includes the inspectors/investigators: badge number, name, photo, and office. Frequently, impostors have posed as inspectors/investigator in order to get penalty fines and confidential information.
    - c. Determine the reason for the inspection/investigation. Request a copy of the complaint if the inspection/investigation is the result of an employee complaint, or if the inspection/investigation is random, routine, or programmed in nature.
  2. There are federal, state, and local agencies which are entitled, by law and by the practice adopted by Palmetto Community Care, to conduct investigations and inspections in Palmetto Community Care facilities. This includes inspectors from: Occupational Safety and Health Act (OSHA); United States Department of Agriculture; Food and Drug Administration; Fire authorities; South Carolina Department of Health and Environmental Control; and Sanitation Inspections.
  3. If law enforcement official is not a representative of one of the agencies set forth at Section II.D.2. Above, the employee will inform the inspector/investigator that he or she does not have the authority to permit and therefore does not consent to any inspection of Palmetto Community Care records and/or facilities, employee interviews, and/or investigation of any nature.

- a. The employee will immediately proceed with informing the appropriate personnel and obtaining the necessary approval to comply with their request.
  - b. The employee will immediately telephone the Palmetto Community Care Privacy Officer and the Chief Executive Officer, and inform them of the situation, and obtain directions on how to proceed. The Palmetto Community Care Privacy Officer and the Chief Executive Officer will contact the employee's supervisors as appropriate and inform them of the situation.
4. An inspector/investigator from an agency may show up at Palmetto Community Care and present a court order to an employee authorizing him to inspect records and/or facilities, interview employees, and/or conduct an inspection/investigation.
- a. The employee should inspect the court order and immediately telephone the Palmetto Community Care Privacy Officer and Chief Executive Officer, inform them of the situation, and obtain directions on how to proceed.
  - b. The Palmetto Community Care Privacy Officer or Chief Executive Officer will contact the employee's supervisors as appropriate and inform them of the situation.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **16. DISCLOSURES OF PROTECTED HEALTH INFORMATION IN RESPONSE TO SUBPOENAS OR OTHER REQUESTS**

**POLICY:** It is the policy of Palmetto Community Care to disclose protected health information ("PHI") in response to routine subpoenas and other requests for PHI by legal counsel or other third parties as permitted by the HIPAA privacy rules and applicable state law.

---

**PURPOSE:** The purpose of this policy is to provide the basic procedures to be followed when Palmetto Community Care receives a subpoena or a request for client medical records that include PHI.

---

#### **I. PROCEDURE**

- A. Subpoena. A subpoena is an official document that orders the recipient to appear at a certain time and place, either to give oral testimony or to produce documents.
1. A subpoena is usually delivered, or "served" on the recipient by a sheriff or constable; occasionally a subpoena may be served by mail or fax. Make sure the subpoena or record request names the proper party (i.e., Palmetto Community Care). Ascertain the parties to the suit, the name of the attorney who has subpoenaed the records, etc.
  2. When you are served with a subpoena, do **not** call the attorney listed on the subpoena, but immediately call the Palmetto Community Care Privacy Officer. It is important not to delay calling the Palmetto Community Care Privacy Officer as a subpoena usually requires action to be taken in a short period of time.
  3. You may be asked to fax a copy of the subpoena and the accompanying evidence that the party seeking the information has made reasonable efforts to ensure that the client has been given notice of the request.
  4. Do **not** let an attorney who does not represent Palmetto Community Care pressure you into complying with the subpoena without first seeking guidance as required by this policy.
  5. Never let anyone outside Palmetto Community Care copy or review medical records in response to a subpoena; records should be copied only by Palmetto

Community Care personnel, Palmetto Community Care legal counsel or an authorized subcontractor.

- B. Requests for Records. All requests must be in writing and must be accompanied by an authorization to release the information signed by the client or another individual who may legally authorize the release of the records on the client's behalf.
1. A proper authorization should be addressed to Palmetto Community Care (do not honor requests that are addressed to another entity); should be in writing; and should be signed by the client or his or her personal representative or his or her estate (executor, administrator). In any situation where the person requesting the records is not the client, and disclosing the records is not expressly permitted by a Palmetto Community Care policy consistent with the HIPAA privacy rules, or if there is any question as to whether such a disclosure is permissible, call the Palmetto Community Care Privacy Officer at (843) 747-2273 who, in consultation with Palmetto Community Care legal counsel, shall determine whether the requesting party is properly authorized to obtain the records.
    - a. A personal representative should produce evidence of authority as described under the Disclosing Protected Health Information to Personal Representatives policy.
    - b. If a client is deceased, the party requesting the records should provide, in addition to the written request for the records, a copy of a court certificate or other evidence that he or she is authorized to act on behalf of the client's estate.
      - (i) In some cases, you may have to dispense with this requirement if no administration has been commenced for the estate.
      - (ii) Do not honor a request signed by the client if the client is now deceased.
  2. You should **also** call the Palmetto Community Care Privacy Officer if a request is received from an attorney **or** if there has been an incident involving the client which may lead to a claim or lawsuit.
    - a. Do not call the attorney requesting the records yourself.
    - b. If the attorney calls you, do not engage in any conversation concerning any claim or litigation. Simply indicate that you will refer the request for processing in accordance with Palmetto Community Care policy and then call the Palmetto Community Care Privacy Officer.
    - c. Please review the client's records and/or any incident report before calling the Palmetto Community Care Privacy Officer.
  3. In some cases, the attorney may want to review the client records before the copies are produced.

4. Once a proper request for records is received, you have a reasonable period of time to copy the records, and you may charge a reasonable fee for photocopying.
  5. Again, the records should only be copied by Palmetto Community Care personnel.
- C. Release of records. If all of the above appears in order, have someone familiar with the services provided to the client review the client's records to determine if there is any reason to be concerned about releasing the records.
1. If there is any reason for you to believe that the client has a potential claim against Palmetto Community Care, contact the Palmetto Community Care Privacy Officer.
  2. All staff at the facility should be advised that if they are contacted by any third party (attorney, investigator, etc.) they should decline comment and report the contact to the Palmetto Community Care Privacy Officer.
- D. Copies of records. If the subpoena or request for medical records is in order and the release of information is approved by the Palmetto Community Care Privacy Officer, in consultation with Palmetto Community Care legal counsel, photocopy the records and prepare an invoice charging the requesting party a reasonable fee per page.
- Original records should never leave the Palmetto Community Care or other Palmetto Community Care location unless approved by the Palmetto Community Care Privacy Officer, in consultation with Palmetto Community Care legal counsel.**
1. In the case of a subpoena, you should call the attorney who has subpoenaed the records to confirm that they will accept copies of the records in lieu of a personal appearance by a Palmetto Community Care representative at a deposition.
  2. Records copied pursuant to a subpoena should be mailed in time to reach the attorney's office prior to the appearance date on the subpoena.
  3. Records copied pursuant to written request should be mailed as soon as reasonably convenient.
  4. No personnel should be pressured into complying with a request for medical records made on the spot, except if the records are needed for client treatment.
  5. **Except in very limited circumstances (i.e., authorized government agent for a routine inspection or where local rules of procedure permit), non-Palmetto Community Care personnel should not be permitted to view or copy records at the Palmetto Community Care or other Palmetto Community Care location whether on or off-site. For requests, search warrants, subpoenas, and civil investigative demands from government agencies, please refer to the separate search warrant policy. If this must be**

permitted, the non-Palmetto Community Care personnel must be supervised at all times by a responsible Palmetto Community Care representative.

- E. Communications from non-Palmetto Community Care attorneys and investigators. Occasionally Palmetto Community Care may be contacted by an attorney outside Palmetto Community Care or an investigator. Do not give any information to these individuals, nor should any employee agree to meet with those individuals or agree to give a deposition. Always check first with the Palmetto Community Care Privacy Officer.
- F. Requests for information other than medical records. If the subpoena or other court or administrative order requests information other than medical records that may contain PHI, please contact the Palmetto Community Care Privacy Officer who, in consultation with Palmetto Community Care legal counsel, shall determine if the disclosure is permitted by the HIPAA privacy rules, applicable state law and/or the privileges created thereunder.
- G. Enforcement actions. This policy does not apply to requests for information by law enforcement officials related to an enforcement action against Palmetto Community Care. In the event of search warrants, subpoenas and civil investigative demands from government enforcement agencies and courts of law involving an enforcement action against Palmetto Community Care, please refer to the Disclosure of Protected Health Information to Law Enforcement policy.
- H. Other policies. Other policies that should be referred to when a subpoena or other request for records containing PHI is made include the Authorization, General Use and Disclosure, National Priority Disclosures, Right to Access Records, Disclosing Protected Health Information to Personal Representatives and Disclosure of Protected Health Information to Law Enforcement policies.

The above instructions are intended only as **general** guidelines. Every situation is different; therefore, please do not hesitate to call the Palmetto Community Care Privacy Officer for assistance. The disclosure form for a national priority is located in Appendix E of this policy.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 17. ACCOUNTING OF DISCLOSURES

**POLICY:** It is the policy of Palmetto Community Care to provide its clients, upon request, a timely accounting of certain disclosures of their protected health information ("PHI") as required by law.

**PURPOSE:** The purpose of this policy is to explain: (1) when clients have a right to an accounting of the disclosures of their PHI by Palmetto Community Care; and (2) the process by which Palmetto Community Care will respond to its clients' requests for an accounting of disclosures of their PHI by Palmetto Community Care.

#### I. RIGHT TO AN ACCOUNTING OF DISCLOSURES

- A. Basic right to an accounting. The client has a right to receive an accounting of disclosures of his or her PHI made by Palmetto Community Care and its business associates for the 6 year period prior to the date of the request. The client also has a right to receive an accounting of disclosures of his or her PHI through an electronic health record made by Palmetto Community Care or its business associates for the 3 year period prior to the date of the request.
- B. Exceptions to the accounting requirement. Palmetto Community Care is **not** required to provide an accounting of disclosures that were made by Palmetto Community Care under the following circumstances:
  - 1. Prior to April 14, 2003, the compliance date of the HIPAA privacy rules;
  - 2. For purposes of treatment of the client, such as disclosures made to dispense a prescription;
  - 3. For payment activities, including billing, claims management, eligibility determinations, coordination of benefits, determination of cost-sharing amounts, and adjudication of health benefit claims;
  - 4. For health care operations, including management and administrative activities, client service, quality assessment and improvement, training programs, auditing, compliance, business planning and development, and certain due diligence activities conducted in connection with the sale or transfer of assets;

5. To the client requesting the accounting;
6. To individuals involved in the client's care where the client verbally agreed to the disclosure;
7. To authorized federal officials for the conduct of lawful intelligence, counter-intelligence, and certain other national security activities;
8. To a correctional institution or law enforcement official, upon a request by, and during such time as, the correctional institution or law enforcement official had lawful custody of the client;
9. Incident to a use or disclosure that is otherwise permitted or required by the privacy rules,
10. Pursuant to a valid client authorization; **or**
11. As part of a limited data set that was disclosed pursuant to a data use agreement for purposes of research, public health or health care operations.

C. Suspension of accounting. A health oversight agency or law enforcement official may request that Palmetto Community Care temporarily suspend the client's right to receive an accounting of disclosures made to the health oversight agency or law enforcement official. Upon an appropriate request to the Palmetto Community Care Privacy Officer, Palmetto Community Care must temporarily suspend a client's right to receive an accounting of these disclosures for the time specified by such agency or official, if such agency or official provides the Palmetto Community Care Privacy Officer with a **written** statement that (i) an accounting to the client would be reasonably likely to impede the agency's activities; and (ii) specifies the time period for which a suspension is required. But if that agency or official statement is made **orally** to the Palmetto Community Care Privacy Officer, Palmetto Community Care must:

1. Document the statement, including the identity of the agency or official making the statement;
2. Temporarily suspend the client's right to an accounting of disclosures subject to the statement; and
3. Limit the temporary suspension to no longer than 30 days from the date of the oral statement, unless a written statement from the agency or official is submitted during that time.

D. Time period for action. The Palmetto Community Care Privacy Officer will act on a client's request for an accounting no later than 60 days after receipt of such a request, in one of the following ways:

1. The Palmetto Community Care Privacy Officer will provide the client with the accounting requested; or
  2. If the Palmetto Community Care Privacy Officer is unable to provide the accounting within 60 days of receipt of the request, Palmetto Community Care may extend the time to provide the accounting once, by no more than 30 days, the Palmetto Community Care Privacy Officer, within 60 days of receipt of the request, provides the client with a written statement of the reasons for the delay and the date by which Palmetto Community Care will provide the accounting.
- E. Fees for providing an accounting. The Palmetto Community Care Privacy Officer must provide the first accounting to a client in any 12 month period without charge. The Palmetto Community Care Privacy Officer may impose a reasonable, cost-based fee for each subsequent request for an accounting by the same client within the same 12 month period. If a fee will be charged, the Palmetto Community Care Privacy Officer will inform the client in advance of the fee and provide the client an opportunity to withdraw or modify the request for a subsequent accounting to avoid or reduce the fee.

## **II. REQUIRED CONTENTS OF AN ACCOUNTING OF DISCLOSURES**

- A. Core elements. An accounting of disclosures must be in writing and must contain the following elements for each disclosure:
1. The date of the disclosure;
  2. The name of the entity or person who received the PHI;
  3. The address of the entity or person who received the PHI, if known;
  4. A brief description of the PHI disclosed; and
  5. Either (a) a brief statement of the purpose of the disclosure that reasonably informs the client of the basis for the disclosure, or (b) a copy of a written request for a disclosure made pursuant to Palmetto Community Care's policy for disclosures to government entities.
- B. Multiple disclosures. For certain disclosures that occur on a regular basis, other than disclosures listed in Section I.B. above, the Palmetto Community Care Privacy Officer may provide a summary accounting addressing the series of disclosures rather than a detailed accounting of each disclosure.
1. When a summary accounting is permissible. A summary accounting for multiple disclosures is permissible if, during the period covered by the accounting, the Palmetto Community Care Privacy Officer has made multiple disclosures of PHI:

- a. For a single purpose to the Secretary of the United States Department of Health and Human Services ("HHS") so it may investigate or determine Palmetto Community Care's compliance with the rules; or
  - b. To the same person or entity for a single national priority purpose (as set forth in Palmetto Community Care's National Priority Disclosures Policy).
- 2. Required information for a summary accounting. Rather than include the entire core elements listed in Section II.A. above for every disclosure in a series of disclosures, the Palmetto Community Care Privacy Officer may limit the accounting to the following information:
  - a. The core elements (set forth in Section II.A. above) for the **first** disclosure during the accounting period;
    - b. The frequency or number of the disclosures made during the accounting period; and
    - c. The date of the most recent disclosure in the series during the accounting period.

### **III. RECORD RETENTION REQUIREMENTS**

- A. Required documentation. The Palmetto Community Care Privacy Officer must create and maintain the following documentation:
  - 1. The core elements of each disclosure as set forth in Section II.A. above;
  - 2. The written accounting that is provided to the client; and
  - 3. The titles of the persons or offices within Palmetto Community Care responsible for receiving and processing a client's request for an accounting.
- B. Retention period. The Palmetto Community Care Privacy Officer must retain the required documentation for a period of 6 years from the date of its creation or the date when it was last in effect, whichever is later. The documentation of the disclosures will be kept in a separate confidential filing system within Palmetto Community Care's Privacy Office.

### **IV. PROCEDURES/FORMS**

- A. A client requesting an accounting of the disclosures of his or her PHI shall complete the attached Request for an Accounting of Disclosures form.
  - 1. A client who requests an accounting from a Palmetto Community Care health care professional or other employee shall be given the form and requested to complete it.
  - 2. The client may deliver the form to the Palmetto Community Care location(s) which he or she believes maintains PHI about him or her, or send it to Palmetto

Community Care, 3547 Meeting Street Road, North Charleston, SC 29405,  
Attention: Privacy Officer.

3. If the form is received by a Palmetto Community Care employee at Palmetto Community Care location(s), the employee shall keep a copy of the form for the Palmetto Community Care and send the original form to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
4. The Palmetto Community Care Privacy Officer shall respond to every request for accounting by completing and delivering to the requesting party the attached Response to Request for Accounting of Disclosures.
5. The Response to Request for Accounting Disclosure forms are located in Appendix F of this policy.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 18. AUTHORIZATION

**POLICY:** Palmetto Community Care will obtain a valid, signed authorization from a client prior to using or disclosing the client's protected health information ("PHI") for purposes not otherwise permitted by a verbal agreement or the rules that allow uses or disclosures without the client's permission. Although Palmetto Community Care generally does not make disclosures of PHI that require client authorization, Palmetto Community Care reserves the right to make such disclosures in accordance with the HIPAA privacy rules, applicable state law and as set forth in this policy.

---

**PURPOSE:** The purpose of this policy is to explain: (1) when a written client authorization is required; and (2) the relevant procedures that Palmetto Community Care will follow when using or disclosing PHI pursuant to a valid authorization.

---

#### I. WHEN AN AUTHORIZATION IS REQUIRED

- A. An authorization is required before Palmetto Community Care uses or discloses PHI except where such use or disclosure is in the best interest of the client or is required by law.
- B. Among the uses and disclosures for which an authorization is **not** required, unless otherwise prohibited by state law, are uses and disclosures:
  - 1. For treatment, payment, or health care operation.
  - 2. To a person authorized to provide treatment, or to prescribe drugs or devices.
  - 3. To the client or his or her legal representative.
  - 4. For involvement in the client's care and notification purposes.
  - 5. For public health activities.
  - 6. About victims of abuse, neglect or domestic violence.
  - 7. For health oversight activities.
  - 8. For judicial or administrative proceedings.
  - 9. For law enforcement purposes.

10. About decedents.
11. For research purposes where a waiver has been obtained.
12. To avert a serious threat to health or safety.
13. For specialized government functions.
14. To the U.S. Department of Health and Human Services for HIPAA enforcement purposes.
15. To the client's spouse in the event the client is incapacitated or unable to request the records.
16. Upon the issuance of subpoena from a court or competent jurisdiction and proper notice to the client (or his or her legal representative) has been provided by the party seeking the records.

In addition, a client's name and address and other identifying information may not be sold for any purpose, and may not be divulged except:

1. Pursuant to any statutorily required reporting to health or government authorities;
2. To an interested third-party payer (or their designee) for the purpose of utilization review, case management, peer reviews or other administrative functions; or
3. In response to a subpoena issued by a court of competent jurisdiction.

## **II. CONTENT REQUIREMENTS**

A. Plain language. All authorizations must be written in "plain language." This means that Palmetto Community Care must make a reasonable effort to:

1. Organize material to serve the needs of the reader.
2. Write short sentences in the active voice, using "you" and other pronouns.
3. Use common, everyday words in sentences.
4. Divide material into short sections.

B. Core elements. Authorizations must contain all of the following core elements:

1. A description of the information to be used or disclosed that identifies the information in a specific and meaningful fashion.
2. The name or other specific identification of the person(s), or class of persons, authorized to make the requested use or disclosure.

3. The name or other specific identification of the person(s), or class of persons, to whom Palmetto Community Care will disclose the information.
4. A description of each purpose of the requested use or disclosure with enough information to allow clients to make informed decisions about whether to release the information. Broad or blanket authorizations requesting the use or disclosure of PHI for a wide range of unspecified purposes are prohibited, but if the client is initiating the authorization the purpose may be described as "at the request of the individual."

An expiration date or an expiration event, that relates to the client or the purpose of the use or disclosure. The authorization may expire on a specific date, a specific time period (*e.g.*, 3 years from the date of the signature), or an event directly relevant to the client or the purpose of the use or disclosure (*e.g.*, for the duration of the client's participation in a drug study). Authorizations may not have an indeterminate expiration date.

5. Signature of the client and date.
6. If the authorization is signed by a personal representative of the client, a description of the representative's authority to act for the client.

C. Required notifications. In addition to the core elements, authorizations must contain all of the following notifications:

1. A statement that the client and/or personal representative has the right to revoke the authorization in writing, and either a discussion of the exceptions to the right to revoke together with a description of how the client may revoke the authorization, or to the extent that this information is included in the Notice of Privacy Practices (the "Notice"), a reference to the Notice.
2. For most authorizations, a statement that Palmetto Community Care will not condition treatment, payment, enrollment, or eligibility on providing authorization by the client for the requested uses or disclosures.
3. A statement that information used or disclosed pursuant to the authorization may be subject to redisclosure by the recipient and no longer be protected by the HIPAA privacy rules.

D. Authorizations for marketing. If the authorization is for a marketing purpose, and the marketing involves any direct or indirect remuneration to Palmetto Community Care from a third party, the authorization must state this fact. For more information on the requirements governing marketing, see the Marketing policy.

E. Copy to the client. Palmetto Community Care must give the client a copy of the signed authorization.

- F. Non-required elements. Valid authorizations may also contain non-required elements, so long as those additional elements are not inconsistent with the required elements.
- G. Defective authorizations. An authorization is **not valid** if it has any of the following defects:
  - 1. The expiration date has passed or the expiration event is known by Palmetto Community Care to have occurred.
  - 2. The required elements of the authorization have not been filled out completely.
  - 3. The authorization is known by Palmetto Community Care to have been revoked.
  - 4. The authorization lacks a required element.
  - 5. The authorization violates the rule on compound authorizations (see Section II.H. below).
  - 6. Any material information in the authorization is known by Palmetto Community Care to be false.
- H. Combining documents. An authorization for use or disclosure of PHI may not be combined with any other types of documents (*e.g.*, the Notice) to create a compound authorization. However, multiple authorizations for the use or disclosure of PHI may be combined, so long as Palmetto Community Care has not conditioned the provision of treatment or payment on obtaining the authorization.

### **III. REVOCATION OF AUTHORIZATIONS**

- A. A client may revoke an authorization at any time by means of a written revocation, except to the extent that Palmetto Community Care has taken action in reliance upon the authorization.
- B. When a client revokes an authorization, Palmetto Community Care must stop making uses and disclosures pursuant to the authorization to the greatest extent practical.

### **IV. RECORD RETENTION REQUIREMENT**

Palmetto Community Care must document and retain signed authorizations for 6 years after the date they were last in effect.

### **V. PROCEDURES/FORMS**

- A. To obtain an authorization, Palmetto Community Care shall use the attached Authorization to Use and/or Disclose Health Information form.

- B. If an authorization is received by a Palmetto Community Care employee at a Palmetto Community Care location, the employee shall keep a copy of the authorization for the Palmetto Community Care and send the original authorization to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
  
- C. The Authorization to Use and/or Disclose Health Information is located in Appendix G of this document.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 19. MARKETING

**POLICY:** All marketing communications involving the disclosure of protected health information (PHI) of Palmetto Community Care clients must comply with the HIPAA privacy rules' specific requirements as well as any applicable state law or regulations.

**PURPOSE:** The purpose of this policy is to assist Palmetto Community Care employees in complying fully with all of the complex HIPAA rules governing marketing practices that involve PHI of Palmetto Community Care clients, while allowing employees the flexibility to best serve both Palmetto Community Care and its clients.

#### I. DEFINITION OF MARKETING

- A. Marketing defined. Marketing is a communication about a product or service that encourages recipients of the communication to buy or use the product or service. Marketing specifically includes an arrangement between Palmetto Community Care and a third party whereby Palmetto Community Care discloses PHI, in exchange for direct or indirect remuneration, for the third party or its affiliate to make a communication about its own product or service that encourages recipients of the communication to purchase or use that product or service.
- B. Exceptions to the definition of marketing. Marketing **does not** include communications made by Palmetto Community Care:
  - 1. For the client's treatment;
  - 2. For care coordination for the client, or to recommend alternative treatments, therapies, health care providers, or settings of care; **or**
  - 3. To describe a health-related product or service (or payment for such product or service) that is provided by Palmetto Community Care, or included in a plan of benefits of a covered entity, including communications about the entities participating in a health care provider or health plan network, replacement of, or enhancements to, a health plan, and health-related products or services available only to a health plan enrollee that add value to, but are not part of, a plan of benefits.
- C. Examples of exceptions. Examples of communications that should not be considered marketing include, but are not limited to, communications regarding the following:

1. Appointment reminders;
2. Certain treatment substitution recommendations;
3. Information regarding insurance coverage;
4. Counseling and drug utilization review (DUR);
5. Certain disease management activities; and
6. Notifying clients about Palmetto Community Care's network participation.

## **II. USE AND DISCLOSURE OF PHI FOR MARKETING PURPOSES**

- A. General rule. A Palmetto Community Care employee may use or disclose a client's PHI for marketing purposes **only** if:
  1. Palmetto Community Care has obtained a valid written authorization from the client; and
  2. The Palmetto Community Care Privacy Officer approves the use or disclosure.
- B. Exceptions to the general rule. A Palmetto Community Care employee may use and disclose PHI without an authorization to make a marketing communication to a client, if the communication:
  1. Occurs in a face-to-face encounter with the client; or
  2. Concerns promotional gifts of nominal value provided by Palmetto Community Care (e.g., calendars, pens, and other general, inexpensive promotional merchandise).
- C. Business associates and other third parties.
  1. Palmetto Community Care's products or services. Palmetto Community Care may engage a business associate to conduct marketing activities on its behalf. For example, Palmetto Community Care may hire a marketing firm to use PHI to send appointment reminders to clients. The marketing firm would be acting as a business associate of Palmetto Community Care because it would be using the PHI on behalf of Palmetto Community Care. For more information on business associates, see Palmetto Community Care's Business Associates policy.
  2. The third party's products or services. Palmetto Community Care may **not** sell or disclose PHI to a third party to help the third-party market **its own** products or services without a signed authorization from the client. That is, marketing

occurs where an entity other than a Palmetto Community Care (including a business associate of Palmetto Community Care) is promoting its own products using PHI it has received from, and for which it has paid, Palmetto Community Care.

### **III. PROCEDURES/FORMS**

- A. The written approval of the Palmetto Community Care Privacy Officer must be obtained in order to use or disclose PHI for marketing purposes. Such approval must be requested in writing and shall include a description of the proposed use of the PHI and the proposed marketing purposes. This request shall be sent to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
  
- B. To obtain a client authorization required for marketing purposes, the requirements set forth in Palmetto Community Care's Authorization Policy shall be met and the Palmetto Community Care Privacy Officer must approve the authorization before a client is requested to complete the authorization. In addition, if the marketing involves direct or indirect remuneration to Palmetto Community Care from a third party, the authorization must state that such remuneration is involved.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **20. PREVENTION OF INCIDENTAL DISCLOSURES OF PHI TO VENDORS AND OTHERS**

**POLICY:** When a vendor or other individual who is not a Palmetto Community Care employee, a business associate, or an employee of a business associate will be in Palmetto Community Care, Palmetto Community Care employees shall take reasonable measures consistent with Palmetto Community Care's policies and the HIPAA privacy rules to avoid allowing such individuals access to protected health information ("PHI"), including without limitation, arranging for the individual to be escorted by a Palmetto Community Care employee at all times when reasonably feasible. However, if, despite such measures, there is a significant risk that such individual may inadvertently be exposed to PHI, Palmetto Community Care shall follow the procedures set forth below.

**PURPOSE:** The purpose of this policy is (1) to acknowledge that some vendors who provide services or products to Palmetto Community Care, or other individuals who perform services or functions on behalf of Palmetto Community Care, or who have other business in Palmetto Community Care location(s) do not meet the definition of a business associate; and (2) set forth procedures to obtain such vendors' or individuals' written agreement not to disclose any PHI to which they may inadvertently obtain access during the period when such vendors or other individuals are in a Palmetto Community Care location(s).

---

#### **I. INCIDENTAL DISCLOSURES TO VENDORS**

- A. The HIPAA privacy rules require that Palmetto Community Care enter into agreements with persons who are using or disclosing PHI to perform functions on behalf of, or to provide services to, Palmetto Community Care. Such persons are referred to in the HIPAA privacy rules as "Business Associates". For requirements applicable to Business Associates, see Palmetto Community Care's Business Associates policy.
- B. There may be other situations in which vendors and others do not obtain PHI or use or disclose PHI to perform functions on behalf of, or to provide services to, Palmetto Community Care, and therefore are not business associates. Notwithstanding the fact that these individuals are not business associates, it is intended generally that Palmetto Community Care employees shall take reasonable measures consistent with Palmetto Community Care's policies and the HIPAA privacy and security rules to avoid

allowing such vendors and other individuals unauthorized access to PHI during the time when such individuals have a need to be in a Palmetto Community Care location(s).

## **II. PROCEDURES**

- A. When any vendor or other individual who is not a Palmetto Community Care employee, a business associate, or an employee of a business associate has a reasonable need to be in a Palmetto Community Care location(s) for a reason related to Palmetto Community Care's legitimate business purposes and there is a significant risk that such individual may inadvertently be exposed to PHI, then such individual shall be provided with the attached Acknowledgment letter and the individual shall execute the letter before being allowed access to the Palmetto Community Care location(s).
- B. The Palmetto Community Care employee who obtains the Acknowledgment shall maintain a copy of the Acknowledgment letter in the Palmetto Community Care's records and send the original letter to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. This form is located in Appendix H of this document.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 21. PRE-EMPTION OF STATE LAW

**POLICY:** It is the policy of Palmetto Community Care to implement the law that is more stringent, or one that permits greater rights of access or amendment to individually identifiable health information.

---

**PURPOSE:** The purpose of this policy is to explain: (1) the interaction between the HIPAA privacy rules and state laws; and (2) when Palmetto Community Care is required to implement a provision of state law over the HIPAA privacy rules.

---

#### I. PROCEDURES

- A. The Palmetto Community Care Privacy Officer, with consultation from Palmetto Community Care's legal counsel, will review applicable state laws on an annual basis.
- B. If the Palmetto Community Care Privacy Officer discovers that a standard, requirement, or implementation specification under the HIPAA privacy and security rules is **contrary** to a provision of state law, the Palmetto Community Care Privacy Officer will **not** revise the appropriate HIPAA Privacy and Security Policies and Procedures, but the policies and procedures shall remain compliant with the HIPAA privacy and security rules, public health reporting or health plan regulation.
  1. For purposes of this policy, a standard, requirement, or implementation specification under the HIPAA privacy and security rules is **contrary** when it would be impossible for Palmetto Community Care to comply with both the state and federal requirements, or where the state law is an obstacle to accomplishing and executing the HIPAA privacy rules. This determination will be made in conjunction with Palmetto Community Care's legal counsel.
  2. The procedure set forth in Section I.B. above applies, unless the Secretary of the United States Department of Health and Human Services ("HHS") has determined under the process for requesting exception that:
    - a. The state law is necessary to prevent health care fraud and abuse to the provision of or payment for health care;
    - b. The state law is necessary to ensure regulation of insurance and health plans as authorized by statute or regulation;
    - c. The state law is necessary for state reporting on health care delivery or costs;

- d. The state law serves a compelling need related to public health, safety, or welfare and HHS determines the intrusion into privacy is warranted when balanced against the need to be served; **or**
  - e. The principal purpose of the state law is regulation of the manufacturing, registration, distribution, dispensing or other control of controlled substances.
- C. If the Palmetto Community Care Privacy Officer discovers that state law is **more stringent** than a standard, requirement, or implementation specification under the HIPAA privacy rules, then the Palmetto Community Care Privacy Officer, in consultation with Palmetto Community Care’s legal counsel, shall revise the appropriate Palmetto Community Care HIPAA Privacy and Security Policies and Procedures.
  - 1. For purposes of this policy, **more stringent** requirements are those state law requirements which restrict a use or disclosure that would be required to be made to HHS in connection with determining compliance or to the individual, which provide greater access and amendment rights of an individual to his/her own protected health information, which provide for the retention or reporting of more detailed information or for a longer duration, or which provide greater privacy protection.
  - 2. The Palmetto Community Care Privacy Officer will implement the revised policies and procedures.
  - 3. Staff affected by the changes will be trained on the revised policies and procedures.
- D. If there is a change in law that necessitates a change to the Palmetto Community Care HIPAA Privacy and Security Policies and Procedures or the change in law materially affects the content of the Palmetto Community Care Notice of Privacy Practices (the "Notice"), the Palmetto Community Care Privacy Officer, in consultation with Palmetto Community Care’s legal counsel, will revise the Notice.
  - 1. The Palmetto Community Care Privacy Officer will implement the revised Notice.
  - 2. Staff affected by the changes will be trained on the revised Notice.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 22. REQUESTING AMENDMENTS

**POLICY:** It is Palmetto Community Care's policy to respond to a client's request for an amendment to his or her protected health information ("PHI") held by Palmetto Community Care (and/or Palmetto Community Care's business associates) in compliance with the HIPAA privacy rules.

---

**PURPOSE:** The purpose of this policy is to establish a process for responding to client requests to amend PHI maintained by Palmetto Community Care.

---

#### I. RIGHT TO AMENDMENT OF PROTECTED HEALTH INFORMATION

- A. Client's right to amendment. A client has the right to request that Palmetto Community Care amend PHI about the client that is contained in Palmetto Community Care's records for as long as the PHI is maintained by Palmetto Community Care.
- B. Accepting a client's request for amendment. If Palmetto Community Care has no grounds to deny the client's request for amendment (see Section I.C. below), Palmetto Community Care must do all of the following:
  - 1. Make the appropriate amendment to the client's PHI or record. Palmetto Community Care should, at a minimum, identify the records that are affected by the amendment and append or otherwise provide a link to the location of the amendment.
  - 2. Inform the client on a timely basis that the amendment is accepted and obtain the client's identification of, and agreement, to have Palmetto Community Care notify the relevant persons with whom the amendment needs to be shared.
  - 3. Make reasonable efforts to inform and provide the amendment within reasonable time to:
    - a. Persons identified by the client as having received PHI and needing the amendment; and
    - b. Persons, including business associates, that Palmetto Community Care knows have the unamended information and may have relied, or might rely in the future, on the information to the detriment of the client.

- C. Denying a client's request for amendment. Under certain circumstances, Palmetto Community Care may deny the client's request for amendment to his or her PHI held by Palmetto Community Care.
1. Permissible reasons for denial. Palmetto Community Care may deny a request for an amendment **only** for any of the following reasons:
    - a. The PHI was not created by Palmetto Community Care, unless the client provides a reasonable basis to believe that the originator of the PHI is no longer available to act on the requested amendment.
    - b. The PHI is not part of the client's designated record set.
    - c. The PHI would not be available for inspection under Palmetto Community Care's policy regarding the client's right to access to records.
    - d. The PHI is accurate and complete.
  2. Denial procedures. If Palmetto Community Care denies the requested amendment, in whole or in part, Palmetto Community Care must take the following steps.
    - a. Palmetto Community Care must provide the client with a **valid, written denial** that explains:
      - (i) The basis for the denial;
      - (ii) How the individual may file a written statement disagreeing with the denial;
      - (iii) The individual's options with respect to future disclosures of the disputed information; and
      - (iv) How the individual may make a complaint to Palmetto Community Care or the Secretary of the United States Department of Health and Human Services.
    - b. Palmetto Community Care must permit the client to submit to Palmetto Community Care a written statement disagreeing with the denial and the basis for the disagreement.
      - (i) Palmetto Community Care may prepare a written rebuttal to the client's statement of disagreement.
      - (ii) If Palmetto Community Care prepares a rebuttal, it must provide a copy to the client.
    - c. Palmetto Community Care must identify, as appropriate, the information in the client's record that is the subject of the disputed amendment and append or otherwise link to this information the client's request for an amendment, Palmetto Community Care's denial of the request, the client's statement of disagreement, and Palmetto Community Care's rebuttal to the information.
    - d. Palmetto Community Care must adhere to the following guidelines if it makes future disclosures of the client's disputed PHI:

- (i) If the client has submitted a statement of disagreement, Palmetto Community Care must include either the material appended to the record, or an accurate summary of it, with any subsequent disclosure of the PHI to which the disagreement relates.
  - (ii) If the client has not submitted a written statement of disagreement, Palmetto Community Care has to include the appended information with any subsequent disclosure **only** if the client has requested that Palmetto Community Care do so.
- D. Receiving a notice of amendment from other health care providers or health plans. Other health care providers or health plans may contact Palmetto Community Care to let it know that they have made amendments to the client's PHI. When Palmetto Community Care is informed by another health care provider or health plan of an amendment to a client's PHI, Palmetto Community Care must make necessary amendments to the PHI in its records.
- E. Time period for acting on requests. Palmetto Community Care should act on the client's request for an amendment within 60 days of receipt of the request. If Palmetto Community Care is unable to act on the amendment within 60 days, Palmetto Community Care may extend the time period once for 30 days, if within the original 60-day time limit Palmetto Community Care provides the client with a written statement of the reasons for the delay and the date by which Palmetto Community Care will complete its action on the request.

## **II. DOCUMENTATION AND RECORD RETENTION REQUIREMENTS**

Palmetto Community Care must document the titles of the persons or offices responsible for receiving and processing requests for amendments by clients. Palmetto Community Care must also document requests for amendments and the resolution of those requests. Palmetto Community Care must retain this documentation from the date of its creation until 6 years after the date when it was last in effect.

## **III. PROCEDURES/FORMS**

- A. A client requesting an amendment to his or her PHI or record in designated record set shall complete the attached Request to Amend Protected Health Information form and deliver it to the Palmetto Community Care location(s) which the client believes maintains PHI about him or her, or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
- B. The Palmetto Community Care HIPAA Privacy Officer shall respond to requests for amendment by completing and sending to the client the attached Response to Request to Amend Protected Health Information form.
- C. The Palmetto Community Care Privacy Officer shall provide the attached Notification of Amendment to Protected Health Information to those persons whom

Palmetto Community Care must make reasonable efforts to inform as described at Section I.B.3 above.

- D. If a client disagrees with a denial of a requested amendment by Palmetto Community Care, the client may submit a statement of disagreement as described at Section I.C.2.b., by completing and delivering to Palmetto Community Care the attached Statement of Disagreement/Request to Include Amendment Request and Denial with Future Disclosure form.
- E. If a client does not file a statement of disagreement but wishes to have his or her request for amendment and denial by Palmetto Community Care included with future disclosures as described at Section I.C.2.d.(ii), the client shall complete and deliver to Palmetto Community Care the attached Statement of Disagreement/Request to Include Amendment Request and Denial with Future Disclosure form. These forms are located in Appendix I of this document.



## **HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES**

### **23. REQUESTING ADDITIONAL PRIVACY OR ALTERNATIVE COMMUNICATIONS**

**POLICY:** It is Palmetto Community Care's policy to evaluate all client requests for additional restrictions on the use and disclosure of their protected health information ("PHI") on a case-by-case basis in compliance with the procedures set forth below. Palmetto Community Care will accommodate a client's reasonable request to receive communications from Palmetto Community Care by alternative means or at alternative locations, if the client specifies the alternative means or location.

**PURPOSE:** The purpose of this policy is to explain: (1) when a client has a right to request that Palmetto Community Care restrict the use or disclosure of his or her PHI; (2) when a client has a right to request that Palmetto Community Care send communications of PHI by alternative means or at alternative locations; and (3) the procedures that Palmetto Community Care must follow to handle these requests.

#### **I. RIGHT TO REQUEST RESTRICTION OF USES AND DISCLOSURES**

A. Client's right to request restrictions. A client may request additional restrictions on Palmetto Community Care's use and disclosure of his or her PHI when the PHI is used or disclosed for the following purposes:

1. To carry out treatment, payment, or health care operations;
2. To persons assisting in the client's care; or
3. To friends, caregivers, or family members for notification purposes.

All requests for additional restrictions shall be sent to the Palmetto Community Care Privacy Officer.

B. Agreeing to a restriction. Palmetto Community Care is not required to agree to a request for a restrictions, except where the disclosure of PHI is to a health plan for the purpose of payment or health care operations, not otherwise required by law, and the PHI relates only to an item or service that was paid for in full (outside of a health plan) by the client or on his or her behalf.

1. If Palmetto Community Care agrees to a restriction it must document the agreement, and may not use or disclose PHI in violation of the restriction except in the following circumstances:

- a. Emergency treatment situations;
  - b. Disclosures permitted without a client's permission; and
  - c. Disclosures made to the federal government during an investigation of Palmetto Community Care's compliance with the HIPAA privacy rules.
2. If the restricted PHI is disclosed in an emergency treatment situation, Palmetto Community Care must ask the health care provider to whom it is disclosed not to use or disclose the PHI for other purposes.
  3. Except in emergency treatment situations, all determinations regarding agreeing to requests for restrictions shall be made by the Palmetto Community Care Privacy Officer.
- C. Terminating a restriction. Palmetto Community Care may terminate its agreement to a restriction if:
1. The client agrees to or requests the termination in writing.
  2. The client orally agrees to the termination and a Palmetto Community Care employee documents the oral agreement by a notation in the client's record and sends this notification to the Palmetto Community Care Privacy Officer; **or**
  3. Palmetto Community Care informs the client that it is terminating its agreement to the restriction. In this situation, the termination is effective only for the PHI created or received after Palmetto Community Care has informed the client of the termination.
- D. Documentation of restriction. Palmetto Community Care must document any restriction that it accepts, and must retain the documentation until 6 years after the date the restriction was last in effect.

## **II. RIGHT TO REQUEST ALTERNATIVE COMMUNICATIONS**

- A. Client's right to request alternative communications. Unlike requests for additional restrictions on uses and disclosures, which Palmetto Community Care is, in most instances, free to grant or deny, Palmetto Community Care **must accommodate reasonable requests** by clients to receive communications of PHI from Palmetto Community Care by alternative means or at alternative locations. For example, a client may request that Palmetto Community Care communicate with him or her at the client's place of employment, by mail to a designated address, or by telephone to a certain phone number.
- B. Writing requirement. Palmetto Community Care may require the client to make a request for alternative communication in writing.

- C. Refusing requests. Palmetto Community Care may refuse to accommodate a request if the client has not provided information as to how payment, if applicable, will be handled, or has not specified an alternative address or other method of contact.
- D. Reasons for requests. Palmetto Community Care may not require the client to give a reason for the request as a condition of accommodating the request.

### **III. PROCEDURES/FORMS**

- A. All required requests, notations, and documentation that clients complete under this policy shall be delivered to the Palmetto Community Care location(s) which the client believes maintains PHI about him or her or sent to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. If the request, notation, or documentation is received by a Palmetto Community Care employee at Palmetto Community Care location, the employee shall keep a copy of the request, notation, or documentation for the Palmetto Community Care and send the original form to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
- B. A client who wishes to request an additional restriction on the use or disclosure of his or her PHI shall complete the attached Request for Additional Restriction on Use or Disclosure of Protected Health Information form.
- C. Palmetto Community Care will respond in writing to a client requesting an additional restriction on the use or disclosure of his or her PHI by completing and delivering to the client the attached Response to Request for Additional Restriction in Use or Disclosure of Protected Health Information form.
- D. If a client wants to terminate a restriction he or she has previously requested, the client shall complete the attached Termination of Additional Restriction form.
- E. A client who wishes to receive communications by alternative means or at alternative locations shall complete the attached Request for Alternative Communications on Use or Disclosure of Protected Health Information form.
- F. The Palmetto Community Care HIPAA Privacy Officer will respond to the individual's request for alternative communications by completing and delivering to the client the attached Response to Request for Alternative Communications on Use or Disclosure of Protected Health Information form. These forms are located in Appendix J of this document.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 24. CONTINGENCY PLAN

**POLICY:** Palmetto Community Care will follow the procedures outlined below in the event the Palmetto Community Care facility is disrupted or destroyed by either natural or manmade forces.

**PURPOSE:** Under the HIPAA Security Rule, covered entities are to implement standards for the security of electronic protected health information (“PHI”). In the event the Palmetto Community Care facility requires recovery and resumption of operations, this plan will detail actions necessary to secure data and resume normal operations.

#### I. OVERVIEW

The Palmetto Community Care network provides information processing, as well as electronic mail capabilities for its authorized users. The system is a Windows based network consisting of 1 VMWare Virtual host that hosts 3 Windows Server 2019 servers. There are approximately 43 workstations and laptops on the network and 1 administrator account specific to the network. System recovery time varies depending on the reasons necessary to exercise the contingency plan.

#### II. INTRODUCTION

- A. The purpose of the Contingency Plan (CP) is to prepare for and address the elements necessary to ensure continuity of services during various emergencies. Once a particular emergency is resolved, a synopsis of the problem and the resolution process in the form of a “lessons learned” document is generated and disseminated to all concerned.
- B. The CP is intended to serve as the centralized repository for the information, tasks, and procedures that would be necessary to facilitate the management’s decision-making process and its timely response to any disruptive or extended interruption of normal business operations and services. This is especially important if the cause of the interruption is such that a prompt resumption of operations cannot be accomplished by employing only normal daily operating procedures.
- C. In terms of personnel and financial resources, the information tasks and procedures detailed in this plan represent the Palmetto Community Care and demonstrate

commitment to response, resumption, recovery, and restoration planning.

### **III. PLAN INFORMATION**

- A. The CP contains two types of information related to the frequency of updates required. The one type contains the plan's static information (i.e., the information that will remain constant and will not be subject to frequent revisions). The other type contains the plan's dynamic information (i.e., the information that must be maintained regularly to ensure that the plan remains viable and in a constant state of readiness). This dynamic information is viewed as the action plan. The action plan should be considered a living document and will require continuing review and modification in order to keep up with the changing environment as users, technology and the Palmetto Community Care mission evolves.
- B. For ease of use and reference, the static and dynamic information is maintained separately. While it is necessary to be familiar with the static information during resumption, it should not be necessary to read that information at the time of the event. The completed action plan of dynamic information provides all of the necessary lists, tasks, and reports used for response, resumption, or recovery.

### **IV. CONTINGENCY AND BUSINESS CONTINUITY PLAN OVERVIEW**

#### **V. OBJECTIVES**

- A. The primary focus of a CP revolves around the protection of the two most important assets of any organization: personnel and data. The primary objective of this plan is to establish policies and procedures to be used for information systems in the event of a contingency, to protect and ensure functioning of those assets. This includes establishing an operational capability to process pre-designated critical applications, recovering data from offsite backup data sets, and restoring the affected systems to normal operational status. The plan seeks to accomplish the following additional objectives:
  - 1. Minimize the number of decisions that must be made during a contingency.
  - 2. Identify the resources needed to execute the actions defined by this plan.
  - 3. Identify actions to be undertaken by pre-designated teams.
  - 4. Identify critical data in conjunction with customers that will be recovered during the recovery phase of the contingency plan
  - 5. Define the process for testing and maintaining this plan and for providing training for contingency teams.

#### **VI. ORGANIZATION**

- A. In the event of a disaster or other circumstances that may bring about the need for contingency operations, the normal organization of the Palmetto Community Care will

shift into that of the contingency organization. The focus will shift from the current structure and function of “business as usual” to the structure and function of working towards the resumption of time-sensitive business operations. In this plan, the Palmetto Community Care will operate through phases of response, resumption, recovery, and restoration.

- B. Each phase involves exercising procedures of the CP and the designated individuals executing those plans. The individuals associated with the plan represent functions of a department or support functions developed to respond, resume, recover, or restore operations or facilities and affected systems.
- C. The Palmetto Community Care Chief Executive Officer will facilitate the execution of this plan. Each individual designated by the Chief Executive Officer will be a member of the contingency team. The individual members of the team will be structured to provide dedicated, focused support in the areas of their particular experience and expertise for specific response, resumption and recovery tasks, responsibilities, and objectives. A high degree of interaction among all individuals will be required to execute the corporate plan. Each individual’s eventual goal is the resumption/recovery of, and the return to, stable and normal business operations and technology environments. Status and progress updates will be reported by each individual leader to the director. Close coordination must be maintained throughout the resumption and recovery operations.
- D. The Chief Executive Officer and his designated contingency responders’ primary duties are:
  - 1. Account for missing or destroyed computer and information assets.
  - 2. Protect employees and information assets until normal business operations are resumed.
  - 3. Ensure that a viable capability exists to respond to an incident.
  - 4. Manage all response, resumption, recovery, and restoration activities.
  - 5. Support and communicate with employees and personnel associated with the Palmetto Community Care.
  - 6. Accomplish rapid and efficient resumption of time-sensitive business operations, technology, and functional support areas.
  - 7. Ensure regulatory requirements are satisfied.
  - 8. Exercise resumption and recovery expenditure decisions.
  - 9. Streamline the reporting of resumption and recovery progress between the teams and management of each system

## **VII. CONTINGENCY PHASES**

## **VIII. RESPONSE PHASE**

- A. Key activities associated with the Response Phase include:
  1. Establish an immediate and controlled presence at the Palmetto Community Care site
  2. Conduct a preliminary assessment of incident impact, known injuries, extent of damage, and disruption to services and business operations.
  3. Find and disseminate information regarding if or when access will to Palmetto Community Care will be allowed.
  4. Provide impacted parties with the facts necessary to make informed decisions regarding subsequent resumption and recovery activity.

## **IX. RESUMPTION PHASE**

- A. Key activities associated with the Resumption Phase include:
  1. Establish and organize a control center for resumption of operations.
  2. Mobilize and activate the individuals and support personnel necessary to facilitate and support the resumption process.
  3. Notify and appraise time-sensitive business associates of the Palmetto Community Care of the situation.
  4. Alert employees, vendors and other internal and external individuals and organizations.

## **X. RECOVERY PHASE**

- A. Key activities associated with the Recovery Phase include:
  1. Prepare and implement procedures necessary to facilitate and support the recovery of time-sensitive business operations.
  2. Coordinate with appropriate business leaders and partners to discern responsibilities of the recovery.
  3. Coordinate with employees, vendors, and other internal and external individuals and organizations.

## **XI. RESTORATION PHASE**

- A. Key activities associated with the Restoration Phase include:

1. Prepare procedures necessary to facilitate the relocation and migration of business operations to the new or repaired facility.
2. Implement procedures necessary to mobilize operations, support and technology department relocation or migration.
3. Manage the relocation/migration effort as well as perform employee, vendor, and customer.

**XII. CRITICAL SUCCESS FACTORS AND ISSUES**

A. These factors are as follows:

1. Absolute commitment by management to Contingency Planning and Disaster Recovery.
2. Budgetary commitment to Disaster Recovery.
3. Modifications and improvements to the current scheduling procedures for the retention and transportation of backup files to the offsite storage facility.
4. Development and execution of the necessary agreements with supporting organizations for a smooth resumption of business activities.
5. Completion of requirement assessment and then completion of the procurement of an alternate power source.

**XIII. MISSION-CRITICAL SYSTEMS/APPLICATIONS/SERVICES**

The following mission-critical systems/applications/services must be recovered at the time of disaster:

System Name	System Description	Priority
VMWare Host	DC01 and FS01	1

**XIV. CONTINGENCY AND BUSINESS CONTINUITY PLAN**

**XV. PLAN MANAGEMENT**

- A. Contingency Planning Workgroups
- B. The development of recovery strategies and work-around requires technical input, creativity, and pragmatism. The best way to create workable strategies and cohesive teams that leverage out-of-the-box thinking is to involve management and information resource management personnel in an ongoing, informative dialogue.
- C. Contingency Plan Coordinator

- D. The Chief Executive Officer of Palmetto Community Care will establish business continuity responsibilities, outline the tasks individuals will perform, and direct them to develop and document detailed procedures for their responsibilities in the event of an emergency. The Chief Executive Officer will ensure that all of the information in the plan is correct, and reviews each new version for accuracy. In addition, the Chief Executive Officer establishes and maintains a staff alert roster containing after-hours telephone numbers.
- E. When a disaster occurs, the Chief Executive Officer is the first-line manager of all recovery.
- F. The Contingency Plan coordinator is: Bradley Childs – Chief Executive Officer of the Palmetto Community Care. Their primary task is to monitor and coordinate the Contingency and Business Continuity Planning, training and awareness, exercises, and testing.

## **XVI. NOTIFICATION**

The Chief Executive Officer of the Palmetto Community Care will call individuals responsible for the recovery of Palmetto Community Care business operations. Upon notification, the team will meet where required (as directed by the Chief Executive Officer) for the purpose of conducting initial incident assessment of a disaster. If the Chief Executive Officer has determined that the Palmetto Community Care building cannot be entered, the alternate meeting place will be specified in the notification message.

## **XVII. TEAM**

The Disaster Response Team will be assigned to execute the CP. The Disaster Response Team will hold multiple roles as the size of the system and staffing requirements do not allow for individual team assignment.

## **XVIII. DISASTER RESPONSE TEAM**

- A. The Disaster Response Team is a group responsible for assessing damage to the Facility/System and its components. It is composed of personnel with a thorough understanding of hardware and equipment and the authority to make decisions regarding the procurement and disposition of hardware and other assets. This team is primarily responsible for initial damage assessment, accounting of damage assessment, loss minimization, and salvage and procurement of necessary replacement equipment and interfaces.
- B. The Disaster Response Team will enter the facility as soon as they have received permission to do so from Emergency Services. A written, detailed account will be made of the general status of the work area, with specific attention to the condition of hardware, software, furnishings, and fixtures. Recommendations will be made that all damaged equipment, media, and documentation be routed immediately to disaster recovery and restoration experts for a determination as to its ability to be salvaged or

restored.

**C. Disaster Response Team Members are:**

**1. Chief Executive Officer**

**2. Privacy Officer**

**3. Security Officer**

**4. IT Director**

D. The Disaster Response Team is responsible for re-establishing computer operations at the backup site or remote sites and for assisting with reinstating PC applications.

E. The Disaster Response Team is also responsible for restoring data communications links between users and the computers, regardless of location, in the event of a loss or outage. Communication vendor (carrier) input in designing and implementing the recovery plan is very important.

F. The Disaster Response Team is responsible for entering data as it is restored. They ensure that the data is the best available backup and meets validation for the system. The Disaster Response Team is also responsible for retrieving backup copies of operating systems, applications, application data, and for ensuring security of the data. The Disaster Response Team is responsible for reassembling all documentation for standards, procedures, applications, programs, systems, and forms, as required at the backup site.

**XIX. VITAL RECORDS/DOCUMENTATION**

A. Vital records which contain PHI and important documentation are backed up and include any documents or documentation that is essential to the operations of an organization, such as personnel records, software documentation, legal documentation, benefits documentation, etc.

B. The following documentation will be available:

1. Complete hardware and software listings.

2. Detailed IT architecture schematics (logical/physical, network, devices).

3. System testing plans/procedures.

4. System configuration.

5. Data backup/restoration procedures and procedures for storage, transportation and handling of backup tapes.

**XX. OFFICE EQUIPMENT, FURNITURE AND SUPPLIES**

The current strategy is for office equipment, furniture, and supplies to be ordered on an “emergency as required” basis at the time of the disaster.

**XXI. TESTING PROCEDURES**

The CP will be maintained routinely and exercised/tested at least annually. Contingency procedures must be tested periodically to ensure the effectiveness of the plan. The scope, objective, and measurement criteria of each exercise will be determined and coordinated by the Chief Executive Officer on a “per event” basis. The purpose of exercising and testing the plan is to continually refine resumption and recovery procedures to reduce the potential for failure.

## **XXII. RECOMMENDED STRATEGIES**

The following information represents potential strategies for execution and are considered as solutions that potentially may assist in the continued development of recovery capabilities in a post-disaster situation.

## **XXIII. BASIC EMERGENCY RESPONSE PROCEDURES**

The actions set forth as responses to disasters, are basic procedures that will be followed immediately prior to or during an actual contingency event. These procedures are designed to protect life; minimize damage, injury or disruption; and contribute to timely restart and recovery.

## **XXIV. FIRE**

The location of the facility and the notification / response time of the area professional firefighters necessitate that personnel be knowledgeable and trained in fire safety. Prompt, effective firefighting at the point where the fire breaks out can significantly reduce damage. All fire control measures should be coordinated with the local Fire Department. **NOTE:** Personal safety is paramount. Do not risk injury to put out a fire!

## **XXV. FIRE EMERGENCY RESPONSE**

- A. The following guidelines are recommended as an emergency response for a fire at the Palmetto Community Care:
1. Upon hearing a detection alarm or discovery of the fire, sound a vocal alarm, e.g., yell “FIRE” or “FIRE IN (space)”.
  2. Dial 911 and notify the dispatcher of the situation
  3. If possible, at no risk to personal injury, attempt to fight or contain the fire with the proper type of fire extinguisher.
  4. All attempts should be made to remain on site until relieved by professional Fire Fighters and to provide guidance and direction to the location of the fire.

## **XXVI. FIRE FIGHTING EQUIPMENT MAINTENANCE**

All firefighting equipment located within the Palmetto Community Care shall be placed in readily accessible locations. Each location shall be marked for rapid identification, e.g., a

large red spot, band or sign protruding from the wall or column where each fire extinguisher is located

## **XXVII. FIRE DRILLS**

- A. Fire drills will ensure that personnel are cognizant of their responsibilities, proper procedures, and exit points during an emergency situation.
- B. Periodic fire drills will be performed as required, but no less than annually.
- C. All personnel will participate in the drills. The location of evacuation routes will be prominently posted.

## **XXVIII. RESTORATION**

- A. Restoration of services will use the following sequence:
  1. Assess Damage.
  2. Ensure site can be operated safely.
  3. Repair or replace damaged hardware.
  4. Monitor restoration progress.
  5. If it is determined that the emergency event is a disaster situation, proceed to Backup, Restore and Recovery Procedures.

## **XXIX. WATER HAZARDS**

Flooding within the Palmetto Community Care can result from many different natural sources to include excessive rain, storms or hurricanes. Within the building those sources can include ruptured water pipes and structural defects allowing rainwater to enter. Because some problems generally occur with little or no warning, it is important to be constantly alert to any warning signs of pending problems.

## **XXX. FLOODING EMERGENCY RESPONSE**

- A. Upon noticing flooding from any source, immediately notify the Chief Executive Officer.
- B. Shut down equipment in the affected area. Either move equipment away from the flooding, or place plastic sheets over the equipment to minimize exposure to water.
- C. If the source of the flooding can be determined and controlled, close valves or take appropriate measures to neutralize the offending systems.
- D. Note: If severe flooding is expected, enlist all available personnel to assist in removing / covering as much of the equipment as possible.

## **XXXI. RESTORATION**

- A. Restoration of services will use the following sequence:
  - 1. Assess Damage.
  - 2. Ensure site can be operated safely.
  - 3. Repair or replace damaged hardware.
  - 4. Monitor restoration progress.
  - 5. If it is determined that the emergency event is a disaster situation, proceed to Backup, Restore and Recovery Procedures.

**XXXII. POWER FAILURES**

- A. The following actions will be taken in the event of a power failure:
  - 1. Determine the extent of power loss.
  - 2. Notify the Chief Executive Officer, Privacy Officer, Security Officer and IT Director.
  - 3. Obtain an estimate of time to repair.

**XXXIII. MECHANICAL FAILURES**

- A. The following emergency response activities will be accomplished in the event of a mechanical failure:
  - 1. Notify the Chief Executive Officer.
  - 2. Notify service repair personnel.
  - 3. Determine extent of outage.
  - 4. Determine source of outage.
  - 5. Obtain estimated time to complete repairs.

**XXXIV. SABOTAGE**

- A. The following emergency response activities will be accomplished in the event of sabotage:
  - 1. Consider personnel safety first.
  - 2. Notify security/police and the Chief Executive Officer.
  - 3. Conduct a visual search of the facility.

4. Do not touch strange or suspicious objects.
5. Order evacuation if strange or suspicious object is found.
6. Shut off all power, and open doors, desks, etc.
7. Identify and isolate the suspected saboteur.
8. Determine the extent of the sabotage.
9. If damage has been done to any information system:
  - a. Log off all active users
  - b. Shut down the computer
  - c. Complete a report of incident

#### **XXXV. BOMB THREAT / ALERT**

- A. Some activists' groups pose a serious threat to the Palmetto Community Care. Advanced sophisticated weapons and technology dictate that each individual in the facility shall be aware of the potential of bomb threats and the actions required when a threat is received. The following sections provide procedures to be initiated by personnel in the event of a bomb threat:
1. Should a bomb threat be announced, or a call received that a bomb has been planted in the building, immediately notify the Chief Executive Officer and call 911.
  2. Evacuate all non-essential personnel from the building.
  3. REMEMBER, personnel safety is paramount. Do not risk injury.

#### **XXXVI. BACKUP, RESTORE, AND RECOVERY PROCEDURES**

- A. Systems containing and PHI are considered to be essential and are included in the contingency planning strategy. The system is independently restorable to operations to the as-of-date of the backed up data and backed up for business continuity on a daily basis. The IT Director synchronizes backups for all production data and process files, including the database, master files, supporting data, and all required processing and support software.
- B. Effective procedures to perform full data backups on a regular nightly basis are implemented. A copy of the weekly backups is securely transported on a weekly basis and stored offsite. Frequent backups are implemented to ensure the recovery of the most current data version and to increase the likelihood of usable media in a post-event scenario.

#### **XXXVII. BACKUP CAPABILITIES**

The following hardware and software features provide system backup: Due to their common availability, Palmetto Community Care system hardware for non-critical functionality can be purchased commercially.

#### **XXXVIII. BACKUP PROCEDURES**

- A. Backup procedures are vital to ensure that any interruption of service is minimized as far as is possible. The procedures that follow encompass daily backups of data and weekly backups of data and all operating and application software.
  - 1. Backup Log – All backups, other than daily data backups, are described with the date, time, and type, and written into a backup log.
  - 2. Schedule – Systems perform full backups on a nightly basis. The last backup of the month is labeled a monthly backup and is stored offsite for three months.
  - 3. Third party software is copied and stored off-site as it is purchased.
  - 4. Documentation – For any change made to the Palmetto Community Care network corresponding documentation is generated.

#### **XXXIX. OFFSITE BACKUP PROCEDURES**

The current schedule implemented for the transfer of backup tapes to the offsite storage facility is consistent with the objectives of CP coordination.

#### **XL. RESTORE PROCEDURES**

- A. There are three basic types of software recovery that must be anticipated, namely, data error recovery, hard disk recovery, and virus recovery. The guidelines for these procedures are as follows:
  - 1. Data Error Recovery – Use the last daily backup tape set. Overwrite the data with the contents of the tape, using the appropriate vendor software.
  - 2. Hard Disk Crash – Use the last weekly backup tape to re-install the system and application software. Follow up with the last daily backup tape to recover the latest data.
  - 3. Virus – Once the start date of the virus has been determined, use the last weekly backup tape before that date to restore the system and application software.
- B. The Palmetto Community Care Security Officer shall train personnel to identify possible security breaches and report them immediately to the Palmetto Community Care Privacy Officer.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **25. NOTIFICATION IN THE EVENT OF BREACH OF UNSECURED PHI**

**PURPOSE:** Following the discovery of a Breach of Unsecured PHI, the HIPAA Privacy Rule requires a Covered Entity to provide notification of the Breach to the Department of Health and Human Services and to each individual whose Unsecured PHI has been, or is reasonably believed by the Palmetto Community Care Privacy Officer to have been, Breached. Notification of a Breach of Unsecured PHI, in some cases, is also required to be provided to the media. The purpose of such notifications is to ensure that affected individuals are informed when their Unsecured PHI has been improperly used or disclosed and that such use or disclosure may lead to harm to the individual.

**POLICY:** Palmetto Community Care will comply with the notice requirements set forth in the HIPAA Privacy Rule for all Breaches of Unsecured PHI and these policies and procedures. For any Breach of Unsecured PHI, the Palmetto Community Care Privacy Officer will investigate the Breach, mitigate (to the extent possible) any harm to the individual whose Protected Health Information (“PHI”) is involved in the Breach, and protect against any further Breaches.

#### **I. PROCEDURES**

##### **A. Individuals.**

1. Notice to Individuals – Palmetto Community Care Privacy Officer shall provide written notification (or by e-mail if the individual agrees) of a Breach of Unsecured PHI as soon as reasonably possible, but no later than 60 days after discovering the Breach, to each affected individual (or the individual’s next of kin or Personal Representative if deceased). Each notice shall be provided by first-class mail to the last known address and include, to the extent possible, the following information:
  - a. a brief description of what happened, including the date of the Breach and the date the Breach was discovered;
  - b. a description of the types of Unsecured PHI involved in the Breach (i.e. full name, social security number, etc.);
  - c. any steps the individual should take to protect him or herself from potential harm resulting from the Breach;
  - d. a brief description of the actions Palmetto Community Care is taking to investigate the Breach, mitigate any harm to individuals, and protect

- e. against any further Breaches; and contact information for individuals to learn more information, which should include a toll-free number, e-mail address, website, or postal address.
- 2. Substitute Notice to Individuals – If there is insufficient or out-of-date contact information to notify the affected individual, the Palmetto Community Care Privacy Officer shall provide a substitute form of notice reasonably calculated to reach the affected individual.
  - a. If there is insufficient contact information for less than 10 individuals, the Palmetto Community Care Privacy Officer shall provide a substitute notice by telephone, e-mail, or other means reasonably calculated to reach the individual.
  - b. If there is insufficient contact information for 10 or more individuals, the Palmetto Community Care Privacy Officer shall provide a substitute notice by providing either a conspicuous posting on Palmetto Community Care’s website for 90 days or a conspicuous notice in major print media for 90 days. Either posting shall also contain a toll-free number where additional information may be obtained.
  - c. Urgent Notice to Individuals - The Palmetto Community Care Privacy Officer may provide information to affected individuals regarding the Breach via telephone or other means if the Palmetto Community Care Privacy Officer determines the situation requires urgency because of possible imminent misuse of Unsecured PHI. Any such notice shall be provided in addition to notice required under Subsection A.1. or 2. above.

B. Media.

- 1. Notice to the Media - In addition to any notice provided to affected individuals, if there is a Breach of Unsecured PHI involving more than 500 residents of a state or jurisdiction, the Palmetto Community Care Privacy Officer shall notify prominent media outlets serving that state or jurisdiction of the Breach. The Palmetto Community Care Privacy Officer shall provide such notice as soon as reasonably possible but no later than 60 days after discovering the Breach. The media notice (which may be in the form of a press release) should contain, to the extent possible, the same content required to be included in the individual notice.

C. Department of Health and Human Services.

- 1. Notice to the Department of Health and Human Services – The Palmetto Community Care Privacy Officer shall notify the Department of Health and Human Services (HHS) of any Breach of Unsecured PHI.
  - a. involving less than 500 individuals by maintaining a log or other documentation of such Breaches and providing notice to HHS in the manner prescribed on the HHS website, within 60 days after the end of each calendar year;

- b. involving 500 or more individuals as soon as reasonably possible but no later than 60 days after discovery of the Breach and in the manner prescribed on the HHS website.
  
- D. The Palmetto Community Care Privacy Officer shall ensure that the terms of any of its Business Associate agreements require the Business Associate to notify the Palmetto Community Care Privacy Officer as soon as reasonably practical, but in no event later than 60 days of discovery of a Breach of Unsecured PHI, and that such notice contain all of the content required under Subsection A.1. above, to the extent possible.
  
- E. The Palmetto Community Care Privacy Officer shall delay providing any notice required under these procedures if it receives a request from a law enforcement official which states that such notice would impede a criminal investigation or cause damage to national security. The Palmetto Community Care Privacy Officer shall delay such notice until:
  - 1. the time specified in a written statement from a law enforcement official. Such statement should contain a request that the Palmetto Community Care Privacy Officer delay issuing the Breach notice in order to avoid impeding a criminal investigation or causing damage to national security; **or**
  - 2. a date that is no later than 30 days from a verbal request from law enforcement unless a written statement (as identified in paragraph 1. above) is submitted before the expiration of the 30 days.
  
- F. The Palmetto Community Care Privacy Officer shall train all workforce members with access to protected health information on these policies and procedures and to report any possible Breach of Unsecured PHI to the Privacy Officer immediately.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 26. INCIDENT RESPONSE PLAN FOR UNAUTHORIZED DATA DISCLOSURE

**PURPOSE:** The Palmetto Community Care network incident response plan (IRP) documents the high-level procedures used to coordinate identification of system disruptions and security incidents and the steps for reporting them.

**POLICY:** Palmetto Community Care will comply with the notice requirements set forth in the HIPAA Privacy Rule for all breaches of Unsecured PHI and these policies and procedures. The IRP addresses what action employees of PCC must take in the event of an unauthorized data disclosure.

---

#### I. OBJECTIVES

- A. The Palmetto Community Care Network Incident Response Plan is predicated on the following processes:
  - 1. A process to protect information and information systems.
  - 2. A process of reporting incidents step-by-step.
  - 3. A process to detect attacks or intrusions.
  - 4. A restoration process to mitigate the effects of incidents and restoration of services.
  - 5. A closeout process for reporting and documenting lessons learned.
- B. The objective of the IRP is to protect the Palmetto Community Care networks, data stored and processed, and to minimize loss or theft of information or disruption of critical computing services when incidents occur. Furthermore, this plan will include how to manage incident responses.
- C. To accomplish this objective, it is necessary to:
  - 1. Coordinate proactive activities to reduce the risk to Palmetto Community Care computers and network systems.
  - 2. Determine the size and trends of the security incident problem.
  - 3. Coordinate preparation for and response to disruptions and security incidents.
  - 4. Help the site quickly and efficiently recover from security incidents and enable it to return to normal operation as soon as possible.

## **II. APPLICABILITY & SCOPE**

Because every incident is different, the guidelines provided in this plan do not comprise an exhaustive set of incident handling procedures. These guidelines document basic information about responding to incidents that can be used regardless of hardware platform or operating system. This document describes the six stages of incident handling, with the focus on preparation and follow-up, including reporting guidelines and requirements.

## **III. REPORTING STRUCTURE**

Typically, the incident reporting community is organized into multiple levels. For the purposes of this plan, all incidents and reportable events will be reported to the Palmetto Community Care Chief Executive Officer, Privacy Officer and Security Officer.

## **IV. DEFINITIONS**

### **A.) EVENT**

An event is an occurrence not yet assessed that may affect the performance of an information system and/or network. Examples of events include an unplanned system reboot, a system crash, and packet flooding within a network. Events sometimes provide indication that an incident is occurring.

### **B.) INCIDENT**

An incident is an assessed occurrence having potential or actual adverse effects on the information system. A security incident is an incident or series of incidents that violate the security policy. Security incidents include penetration of computer systems, exploitation of technical or administrative vulnerabilities, and introduction of computer viruses, or other forms of malicious code. Examples of security incidents include unauthorized use of another user's account, unauthorized use of system privileges, and execution of malicious code.

## **V. SECURITY INCIDENT RESPONSE**

A security incident response outlines steps for reporting incidents and lists actions to be taken to resolve information systems security incidents and protect national security systems. Handling an incident entails forming a team with the necessary technical capabilities to resolve an incident, and contacting the appropriate sources to aid in the resolution when required, and report closeout after an incident has been resolved.

## **VI. KNOWN RISKS AND VULNERABILITIES TO PALMETTO COMMUNITY CARE**

### **A.) TECHNICAL VULNERABILITY**

A technical vulnerability is a hardware, firmware, or software weakness or design deficiency that leaves a system open to potential exploitation, either externally or internally, thus increasing the risk of compromise, alteration of information, or denial of service.

## **B.) ADMINISTRATIVE VULNERABILITY**

An administrative vulnerability is a security weakness caused by incorrect or inadequate implementation of a system's existing security features by the system administrator, security officer, or users. An administrative vulnerability is not the result of a design deficiency. It is characterized by the fact that the full correction of the vulnerability is possible through a change in the implementation of the system or the establishment of a special administrative or security procedure for the system administrators and users. Poor passwords and inadequately maintained systems are the leading causes of this type of vulnerability.

## **VII. CAUSES OF INCIDENTS**

- A. There are at least four generic causes of computer security incidents:
1. Malicious Code. Malicious code is software or firmware intentionally inserted into an information system for an unauthorized purpose.
  2. System Failures, Procedures Failures, or Improper Acts. A secure operating environment depends upon proper operation and use. Failure to comply with established procedures increase vulnerability/risk. While advances in computer technology enable the building of more security much still depends upon the people operating and using the system. Improper acts may be differentiated from insider attack according to intent. With improper acts, someone may knowingly violate policy and procedures, but is not intending to damage the system or compromise the information it contains.
  3. Intrusions or Break-Ins. An intrusion or break-in is entry into and use of a system by an unauthorized individual.
  4. Insider Attack. Insider attacks can provide the greatest risk. In an insider attack, a trusted user or operator attempts to damage the system or compromise the information it contains.

## **VIII. TYPES OF INCIDENTS**

- A. The term "incident" encompasses the following general categories of adverse events:
1. Data Destruction or Corruption. The loss of data integrity can take many forms including changing permissions on files so that they are writable by non-privileged users, deleting data files and or programs, changing audit files to cover-up an intrusion, changing configuration files that determine how and what data is stored and ingesting information from other sources that may be corrupt.
  2. Data Compromise and Data Spills. Data compromise is the exposure of information to a person not authorized to access that information either through clearance level or formal authorization. This could happen when a person accesses a system he is not authorized to access or through a data spill. Data spill is the release of information to another system or person not authorized to access that information, even though the person is authorized to access the system on which the data was released. This can occur through the loss of control, improper storage, or improper escorting of media, computer equipment (with memory), and computer-generated output.

3. Malicious Code. Malicious code attacks include attacks by programs such as viruses, Trojan horse programs, worms, and scripts used by crackers/hackers to gain privileges, capture passwords, and/or modify audit logs to exclude unauthorized activity. Malicious code is particularly troublesome in that it is typically written to masquerade its presence and, thus, is often difficult to detect. Self-replicating malicious code such as viruses and worms can replicate rapidly, thereby making containment an especially difficult problem.
4. Virus Attack. A virus is a variation of a Trojan horse. It is propagated via a triggering mechanism (e.g., event time) with a mission (e.g., delete files, corrupt data, send data). Often self-replicating, the malicious program segment may be stand-alone or may attach itself to an application program or other executable system component in an attempt to leave no obvious signs of its presence.
5. Worm Attack. A computer worm is an unwanted, self-replicating autonomous process (or set of processes) that penetrates computers using automated hacking techniques. A worm spreads using communication channels between hosts. It is an independent program that replicates from machine to machine across network connections often clogging networks and computer systems.
6. Trojan Horse Attack. A Trojan horse is a useful and innocent program containing additional hidden code that allows unauthorized computer network exploitation (CNE), falsification, or destruction of data.
7. System Contamination. Contamination is defined as inappropriate introduction of data into a system not approved for the subject data (i.e., data of a higher classification or of an unauthorized formal category).
8. Privileged User Misuse. Privileged user misuse occurs when a trusted user or operator attempts to damage the system or compromise the information it contains.
9. Security Support Structure Configuration Modification. Software, hardware, and system configurations contributing to the Security Support Structure (SSS) are controlled since they are essential to maintaining the security policies of the system. Unauthorized modifications to these configurations can increase the risk to the system.
10. Note: These categories of incidents are not necessarily mutually exclusive.

## **IX. AVENUES OF ATTACK**

- A. Attacks originate through certain avenues or routes. The following list outlines these avenues of attack:
  1. Local networks.
  2. Illegally connected devices (including non-approved connections to a local network).
  3. Gateways to outside networks.
  4. Communications devices.
  5. Shared disks.

6. Downloaded software.
7. Direct physical access.

## **X. EFFECTS OF AN ATTACK**

- A. There are at least four effects of attacks that compromise computer security:
  1. Denial of Service. Any action that causes all or part of the network's service to be stopped entirely, interrupted, or degraded sufficiently to impact operations. Examples of denial of service include network jamming, introducing fraudulent packets, and system crashes and/or poor system performance, in which people are unable to effectively use computing resources.
  2. Loss or Alteration of Data or Programs. An example of loss or alteration of data or programs would be an attacker who penetrates a system, then modifies an Operating System-level program/configuration file (e.g., audit) so that the intrusion will not be detected.
  3. Compromise of Protected Data. One of the major dangers of a computer security incident is that information may be compromised. The release of classified information to people without the proper clearance or formal authorization jeopardizes our nation's security. Efficient incident handling minimizes this danger.
  4. Loss of Trust in Computing Systems. Users may lose trust in computing systems and become hesitant to use one that has a high frequency of incidents or even a high frequency of events that cause the user to distrust availability or integrity.

## **XI. ROLES AND RESPONSIBILITIES**

All Palmetto Community Care network account holders are responsible for reporting any suspected intrusion to the network. This ensures that appropriate policies are followed. Below are those responsibilities related specifically to the handling of an incident. In addition, this document outlines the responsibilities of the user, IAO and Auditor in handling an incident.

## **XII. NETWORK USERS**

- A. Computer users are nearly always most effective in discovering intrusions that occur. Despite the advances in automated intrusion detection systems, the end users detect most computer incidents. Users need to be vigilant for unusual system behavior that may indicate a security incident in progress.
- B. Users are responsible for:
  1. Reporting all suspected network security violations immediately to the Palmetto Community Care Security Officer.
  2. Reporting any suspected compromise, component failure, abnormal system behavior, or vulnerability to the Palmetto Community Care Security Officer.
  3. Complying with network security policies and procedures.

**XIII. SYSTEM & NETWORK ADMINISTRATORS**

- A. The IT Director is responsible for computer systems, including:
  1. Reporting all suspected security violations to the Chief Executive Officer and Security Officer.
  2. Advising the Chief Executive Officer and Security Officer of security anomalies and vulnerabilities associated with the information system.
  3. Providing potential means of fixing identified vulnerabilities.
  4. Participating in the information system security incident reporting program.
  5. Coordinating with the Chief Executive Officer and Security Officer to investigate and resolve security problems.

**XIV. CONDUCTING TRAINING**

- A. Training is an important part of protection. A workshop on responding to incidents can be one of the most valuable ways to help personnel at an organization learn how to handle incidents. Personnel should also be required to participate in periodic mock incidents in which written incident response procedures are followed for simulated incidents. For example, conduct “dry runs” in which, computer security personnel, system administrators, and managers simulate handling an incident. A major incident is not the time to discover that preparations and procedures are incomplete.
- B. One of the most critical facets of responding to incidents is being prepared to respond *before* an incident occurs. Without adequate preparation, it is very likely that response efforts will be disorganized and that there will be considerable confusion among personnel. Preparation limits the potential for damage by ensuring responsible actions are known and coordinated. Planning for this preparation is an integral portion of setting the security policy.

**XV. REPORTING RESPONSIBILITIES OF THE IT DIRECTOR AND SECURITY OFFICER**

- A. Report all known or suspected security weaknesses and incidents, including unauthorized disclosures of information to the Security Officer, Privacy Officer, and IT Director.
- B. Ensure the proper review and integrity of audit trails.

**XVI. REPORTING GUIDELINES**

Any user noticing anomalous or suspicious activity (incident or reportable event) will report the situation immediately to the Chief Executive Officer and Security Officer. The following table contains a list of reportable events.

Reportable Incident or Event
<ul style="list-style-type: none"><li>• Any intrusion with a perceived unauthorized result.</li><li>• Any ongoing unauthorized privileged user, administrator, or root level access of a a system.</li><li>• Any indications of Denial of Service or Distributed Denial of Service attacks.</li></ul>

- Any new virus or worm.
- Any incident that negatively impacts the Palmetto Community Care computer systems.

**XVII. INCIDENT CATEGORIES**

Incidents reported shall be categorized according to the framework outlined in the following table:

Category	Description
0	<b>Exercise or Test</b>
1	<b>Root Level Intrusion:</b> An unauthorized person completely controlled a computer.
2	<b>User Level Intrusion:</b> An unauthorized person gained user level privileges on a computer.
3	<b>Attempted Access:</b> An unauthorized person specifically targeting a service/vulnerability on a computer in order to gain unauthorized or increased access/privileges, but is denied access
4	<b>Denial of Service:</b> Use of a computer or computer system is denied due to an overwhelming volume of unauthorized traffic
5	<b>Poor Security Practice:</b> A computer was incorrectly configured or a user did not follow established policy
6	<b>Scan/Probe:</b> Open ports on a computer were scanned with no DOS or mission impact
7	<b>Malicious Logic:</b> Hostile code successfully <b>infected</b> a computer. Unless otherwise directed, only those computers that were infected will be reported as a Category 7 incident.
8	Unknown

**XVIII. RESPONDING TO AN INCIDENT**

A. There are generally six stages of response:

1. Preparation – one of the most important facilities to a response plan is to know how to use it once it is in place. Knowing how to respond to an incident BEFORE it occurs can save valuable time and effort in the long run.
2. Identification – identify whether or not an incident has occurred. If one has occurred, appropriate actions can be taken.
3. Containment – involves limiting the scope and magnitude of an incident. Because so many incidents observed currently involve malicious code, incidents can spread rapidly. This can cause massive destruction and loss of information. As soon as an incident is recognized, immediately begin working on containment.
4. Eradication – removing the cause of the incident can be a difficult process. It can involve virus removal, conviction of perpetrators, or dismissing employees.
5. Recovery – restoring a system to its normal business status is essential. Once a restore has been performed, it is also important to verify that the restore operation was successful and that the system is back to its normal condition.

6. Follow-up – some incidents require considerable time and effort. It is little wonder, then, that once the incident appears to be terminated there is little interest in devoting any more effort to the incident. Performing follow-up activity is, however, one of the most critical activities in the response procedure. This follow-up can support any efforts to prosecute those who have broken the law. This includes changing any company policies that may need to be narrowed down or be changed altogether.

#### **XIX. INCIDENT RESPONSE PROCESS**

All incidents will be investigated by the IT Director and Security Officer and the results reported the Chief Executive Officer for appropriate action.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **27. PROHIBITION ON SALE OF ELECTRONIC HEALTH RECORDS OR PHI**

**PURPOSE:** The HIPAA privacy and security rules prohibit a covered entity from receiving remuneration either directly or indirectly in exchange for any PHI of an individual unless the individual has provided his or her authorization, subject to certain exceptions. This policy is designed to provide guidance to Palmetto Community Care on exchanges of information for compliance with the HIPAA privacy and security rules prohibition on the sale of electronic health records and PHI.

---

**POLICY:** Palmetto Community Care shall not directly nor indirectly receive remuneration in exchange for any Protected Health Information (“PHI”) of an individual unless it has obtained an authorization from the individual; The Palmetto Community Care Privacy and Security Official will ensure that any Business Associates agree that they will not directly or indirectly receive remuneration in exchange for any PHI of an individual unless with a valid authorization.

---

#### **I. PROCEDURE**

- A. The Palmetto Community Care Privacy and Security Official will review any exchanges of PHI by Palmetto Community Care or its Business Associates to determine whether Palmetto Community Care or Business Associate receives remuneration either directly or indirectly for any such exchange.
- B. If Palmetto Community Care or a Business Associate of Palmetto Community Care receives remuneration for any exchange of PHI, the Palmetto Community Care Privacy and Security Official will ensure that Palmetto Community Care or its Business Associates, as applicable, obtain the individual’s authorization for such exchange and that the authorization specifies that PHI can be further exchanged for remuneration by the entity receiving the PHI of that individual.
- C. The requirements of Subsection A and B above, will not apply in the following cases:
  - 1. the purpose of the exchange is for public health activities;
  - 2. the purpose of the exchange is for research (as set forth in Sections 164.501 and 164.152(i) of the Privacy Rule) and the price charged reflects the costs of preparation and transmittal of the data for such purpose;

3. the purpose of the exchange is for the treatment of the individual, subject to any regulation that the Secretary may promulgate to prevent PHI from inappropriate access, use or disclosure;
4. the purpose of the exchange is the health care operation of the Palmetto Community Care as set forth in Section 164.501 of the Privacy Rule;
5. the purpose of the exchange is for the remuneration that is provided by Palmetto Community Care to a Business Associate for activities involving the exchange of PHI that the Business Associate undertakes on behalf of and on the specific request of the Palmetto Community Care pursuant to a Business Associate agreement;
6. the purpose of the exchange is to provide the individual a copy of the individual's PHI; and
7. the purpose of the exchange is otherwise determined by the Secretary in regulations to be similarly necessary and appropriate as the exceptions in the above subparagraphs (1) – (7).



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 28. PHYSICAL AND TECHNICAL SECURITY MEASURES TO PROTECT PHI

**PURPOSE:** The HIPAA privacy and security rules require physical and technical security measures be taken to protect the PHI of patients. Physical and technical security measures are applied to the facility, systems, hardware and software utilized by the Palmetto Community Care.

---

**POLICY:** Palmetto Community Care shall implement physical technical security measures to ensure the security posture of Palmetto Community Care systems, computers and networks protect PHI from unauthorized disclosure.

---

#### I. OVERVIEW

Consistent standards for facility and network access and authentication are critical to the Palmetto Community Care physical security, information security and are required by HIPAA regulations. All users, clients and guests accessing the Palmetto Community Care facilities or computer systems have the ability to impact the security posture of the Palmetto Community Care. An appropriate access and authentication policy reduces the risk of potential security incidents. Consistent application of authentication, access controls and standards across the facility and the network are essential to a secure facility and the protection of PHI.

#### II. PURPOSE

The purpose of this policy is to describe security measures taken to ensure users accessing the Palmetto Community Care facility and computer assets are authenticated in compliance with facility standards and best practices. All access to facilities, information, and computer assets will be based on a need-to-know basis and minimum access will be ensured at every level of the Palmetto Community Care organizational structure.

#### III. SCOPE

The scope of this policy includes all employees of the Palmetto Community Care.

#### IV. PHYSICAL SECURITY MEASURES

- A. Facility Access – Facility access inside the working spaces, not to include the patron lobby, will be restricted to employees only. In the event a patron accesses the working spaces they will be escorted at all times.

- B. Swipe Access – Only employees of the Palmetto Community Care will be granted swipe access to the working spaces of the facility. The Chief Executive Officer will determine levels of access and working times of access. Access will be based on a need-to-know basis.
- C. Alarm System – The Palmetto Community Care utilizes a commercial alarm system and any unauthorized intrusions during non-business hours will automatically set off the alarm and notify the local police department, fire service and Chief Executive Officer. Alarms are placed on all doors and windows within the facility and are armed upon the last employee departure every evening.
- D. Business Hours – The business hours for the Palmetto Community Care facility is 8:00AM – 5:00PM, Monday through Friday. During business hours an employee will occupy the front desk area at all times to ensure no one enters the building undetected.
- E. Posted Security Information – A posted notification of facility hours and a monitored alarm is clearly posted on the front and rear doors. This notice is clearly marked and easy to read.
- F. Paper files – All paper files of cases and work deemed essential to the Palmetto Community Care shall be kept in locked areas. Locked areas can either be through the means of a padlock or behind a locked door. Only employees with a Need-to-know are granted keys to the locked workspaces where critical files are stored.
- G. Maintenance of facility access controls – Facility access controls will be monitored daily and reviewed every 90 days to ensure they meet the needs of the Palmetto Community Care requirements. Changes to facility controls will be at the sole discretion of the Chief Executive Officer.
- H. Swipe Cards – A list of employees who are issued a swipe card will be maintained by the Chief Executive Officer and Security Officer. Swipe cards are for the use of the employee they are issued and are not to be shared under any circumstances. Tailgating, or following another employee through a swipe area is forbidden. All employees must swipe into secured area when access is required.
- I. Employee Departures – Any employee who is voluntarily or is terminated from employment with the Palmetto Community Care must surrender their swipe card to the Chief Executive Officer and Security Officer prior to departure. The employee will then be escorted from the premises of the Palmetto Community Care facility.

## V. INFORMATION SECURITY MEASURES

- A. Account Setup/User Accounts
  1. During initial account set up, certain checks must be performed in order to ensure the integrity of the process.
  2. Positive ID, background check and coordination with Human Resources is required.
  3. Users will be granted the least amount of access to perform their duties.

- a. User account access will be designated as follows:
        - i. Administrator Account – The Administrator account has access to all aspects of the network, laptops and workstations Administrator accounts will be given to IT personnel only.
        - ii. User Account – User accounts will have access to all applications and files deemed necessary to perform their duties. User accounts access to applications and files will be a on a need-to-know basis and decided by the Chief Executive Officer and Security Officer.
  4. Users will only be granted access to the Palmetto Community Care network if he or she signs the User Agreement Form and accepts the Terms of Use policy.
  5. Access to the network will be granted in accordance with the User Agreement.
  6. Failure to abide by the terms of the User Agreement Form could result in disciplinary action and up to termination of employment with the Palmetto Community Care.
  7. User accounts will be deleted and removed from the network upon departure or termination of the employee.
  8. User accounts will be investigated for access on shared network or hard drives and PHI will be deleted or removed as necessary.
  9. User accounts will be suspended immediately in the event of activity in conflict of the User Agreement form and the Chief Executive Officer will be notified immediately.
- B. Account Use
1. Network accounts will be implemented in a standard procedure.
  2. Accounts will be created using a standard format for the username.
  3. Accounts must be password protected
  4. Accounts must be for individual use only and will not be shared with any other Palmetto Community Care employee under any circumstances.
  5. User accounts will not be given administrator access or root access on any device or computer.
  6. No guest accounts will be permitted on the Palmetto Community Care network.
- C. Account Information
1. A naming convention which ties the account to the actual user will be issued.
  2. User accounts will be maintained by the IT Director and a list of user accounts will be held by the Chief Executive Officer, Security Officer and IT Director.
  3. The User account list will be screened every 30 days to ensure the list is accurate.
- D. Authentication/Passwords
1. Passwords will be kept private by all users and will not be shared with anyone.
  2. Passwords will not be written down or stored on any electronic media.
  3. Passwords must be 10 characters and contain at least one uppercase, lower case, number and special character.
  4. Passwords much be changed at least every 6 months.
  5. Passwords must not contain, names, known names, or words in the dictionary.
- E. Authentication
1. User computers must be configured to require a username and password at the login screen.

2. Specific network files or applications on a need-to-know basis will also require user name and passwords for access
- F. Warning Banner
1. Every PCC computer will have a Warning Banner that will flash upon startup.
  2. By clicking 'OK' users will acknowledge they will abide by PCC terms of use policy.
- G. Screen Saver and Sleep Mode
1. PCC will automatically go into Screen Saver or Sleep mode after 3 minutes of nonuse.
  2. After 1 hour the workstation will automatically shut down and require restart.
- H. Remote Network Access
- Remote access to the network can be provided for the convenience of users. A username and password will be required for authentication. Remote access users must adhere to the Remote Access Policy. Remote sessions will take place with HTTPS enabled.
- I. Encryption
1. All Palmetto Community Care workstations and laptops will employ Full Disk Encryption (FDE). For a computer that is not booted, all the information encrypted by FDE is protected, assuming that pre-boot authentication is required. When the device is booted, then FDE provides no protection; once the OS is loaded, the OS becomes fully responsible for protecting the unencrypted information. The exception to this is when the device is in a hibernation mode; most FDE products can encrypt the hibernation file.
  2. File/Folder Encryption will also be utilized. File/folder encryption protects the contents of encrypted files (including files in encrypted folders) until the user is authenticated for the files or folders. If single sign-on is being used, this usually means that the files are only protected until the user logs onto the device. If single sign-on is not being used, then protection is typically provided until the user explicitly authenticates to a file or folder. File/folder encryption does not provide any protection for data outside the protected files or folders, including swap and hibernation files that could contain the contents of unencrypted files that were being held in memory. File/folder encryption software also cannot protect the confidentiality of filenames and other file metadata, which itself could provide valuable information to attackers (for examples, files that are named by Social Security number).
- J. Audit Logging
- All user activity will be logged on the local machine and on the PCC server. Audit logs will only be accessible by the IT Director.
- K. Login Attempts
- User of the PCC will have 5 attempts to login to their workstation successfully. After 3 failed attempts the account will be locked and require the IT Director to

unlock the account. Users will be notified when an unsuccessful login occurs and each attempt will be logged in the audit log file.

L. Monitoring

The Palmetto Community Care network will be monitored through automated software to check for unauthorized access and employee network use. Results of monitoring will be reviewed by the IT Director and Security Officer. Any unusual finding will be reviewed by the Chief Executive Officer for action.

M. Accountability

It is the responsibility of every Palmetto Community Care employee to maintain accountability of any workstation or laptop they are issued. Upon loss or damage to any PCC workstation or laptop, the IT Director and Chief Executive Officer must be notified immediately of the situation. Failure to notify the either individual in a timely manner could result in disciplinary action or termination. PHI must protect and prompt notification is essential to either recovering the system or mitigating the damage to any loss of PHI.

N. Reporting

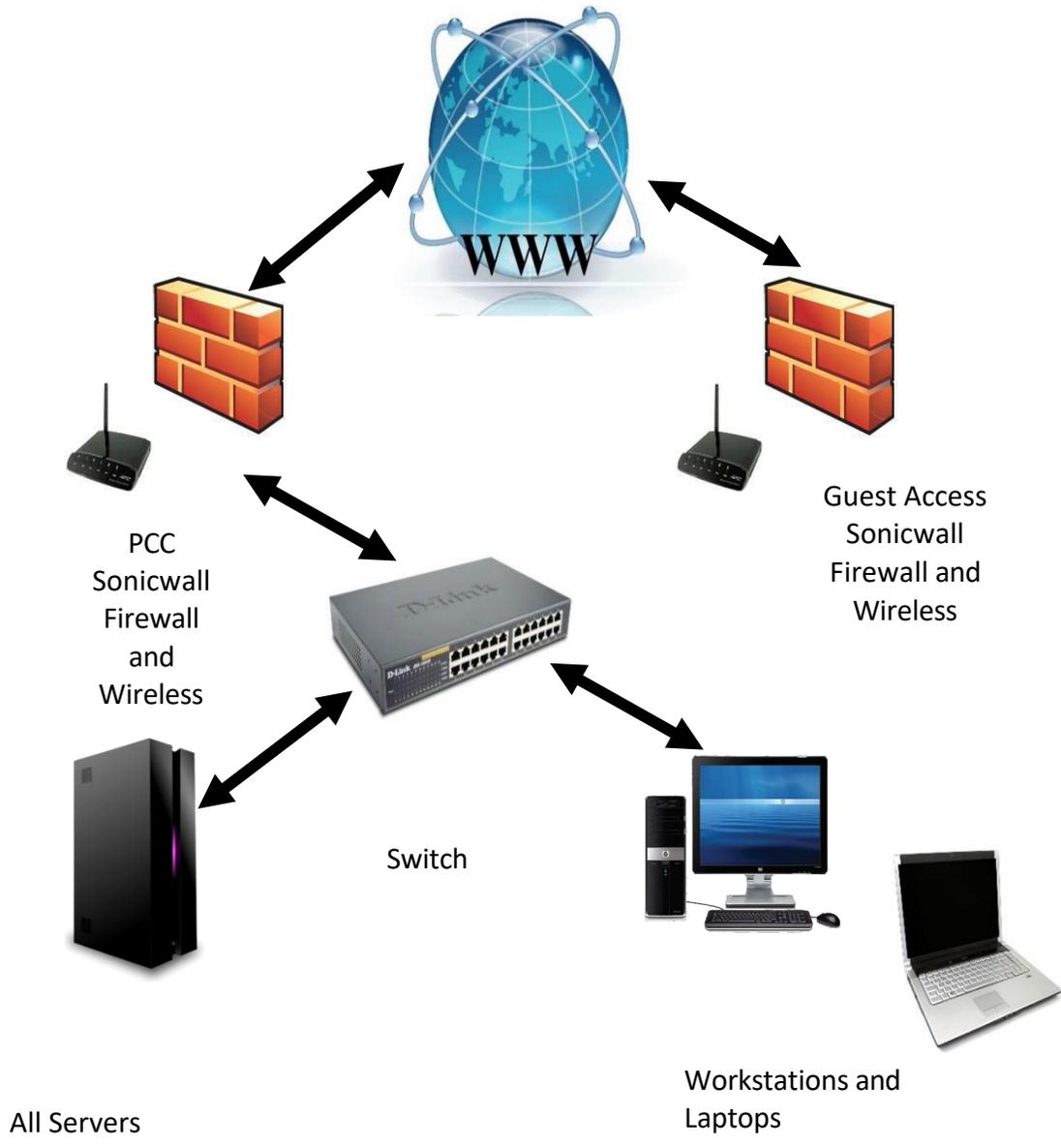
In the event any employee of the PCC misplaces hardware, software, or any media they suspect has PHI, they must notify the Chief Executive Officer, Security Officer, Privacy Officer and IT Director immediately for further instructions. While Palmetto Community Care equipment and accounts are encrypted and password protected, situational awareness of a 'loss' situation is critical to possibly recover the missing device or media.

O. Enforcement

The Chief Executive Officer has ultimate authority enforce these requirements regarding the Palmetto Community Care network and PHI. The Data User Agreement form can be found in Appendix L of this document.

P. Network Diagram

The Palmetto Community Care network is configured below. All network traffic outside of the Guest network is encrypted and the network utilizes encryption and password protection protocols to ensure unauthorized access. The guest network is for access to the WWW only and does not connect to the Palmetto Community Care network.



- Q. Destruction of hardware  
Any hardware devices removed from service from the Palmetto Community Care inventory will be wiped with an approved data removal tool. This action will be completed by the IT Director and Security Officer and recorded and logged. The time and location the hardware was sanitized will be noted and kept on file by the Security Officer.
- R. Destruction of physical media  
Destruction of physical media to include: Paper, Filing Systems, Disks, CDs, or any other physical form where media can reside will be disposed of in a secure container marked for the destruction of PHI media. Destruction of media will be made by a certified office media destruction company. The Chief Executive Officer and Security Officer will be the only Palmetto Community Care employees with access to the container.
- S. Use of 3rd Party Software for PCC patron PHI  
The Palmetto Community Care utilizes two 3rd party applications for the tracking of Palmetto Community Care patron information. These applications have been approved for use by Palmetto Community Care parent company and meet the requirements of protection for PHI. These applications use HTTPS. HTTPS (HTTP over SSL or HTTP Secure) is the use of Secure Socket Layer (SSL) or Transport Layer Security (TLS) as a sublayer under regular HTTP application layering. HTTPS encrypts and decrypts user page requests as well as the pages that are returned by the Web server. Palmetto Community Care utilizes Provide Enterprise and Evaluation Web patient portals. These portals are password protected and SSL.
- T. Backups  
Palmetto Community Care makes backup copies of all managed server, workstation and laptop images daily and stores all backup images offsite.
- U. Updates  
The Palmetto Community Care IT Director will update all managed servers, workstations and laptops with the latest anti-virus, operating system updates and service packs, and vulnerability updates on a weekly basis.
- V. Technology Review  
The Chief Executive Officer, Security Officer, Privacy Officer, and IT Director will conduct quarterly technology reviews to ensure the Palmetto Community Care privacy and security policy is keeping pace with the latest technologies.
- W. Facsimile Transmissions
1. PHI will be sent by facsimile only when the original record or mail-delivered copies will not meet an immediate need for treatment, payment and/or operations. For example, Palmetto Community Care employees may transmit

PHI by facsimile when urgently needed for client care or required by a third-party payer for ongoing certification of payment for a client.

2. Information transmitted must be limited to the minimum necessary to meet the requester's needs.
3. Except as authorized for treatment, payment, operations, or federal or state law, a properly completed and signed authorization must be obtained before releasing PHI for transmittal via facsimile.
4. The Palmetto Community Care Facsimile Cover Page must be used to send faxes containing PHI. Whenever possible, all pages plus the cover page of all confidential documents to be faxed must be marked "Confidential" before they are transmitted.
5. Palmetto Community Care employees shall make reasonable efforts to ensure that they send the facsimile transmission to the correct destination by performing the following:
  - a. For a new recipient, the sender must verify the fax number by requesting the recipient submit a faxed or email request for PHI, which would include the fax number of the recipient.
  - b. Periodically reminding those who are frequent recipients of PHI to notify Palmetto Community Care if their fax number is to change.
6. Misdirected Faxes
  - a. If a fax transmission contains PHI that is not received by the intended recipient because of a misdial, check the internal logging system of the fax machine to obtain the misdial number.
  - b. If possible, a phone call (supplemented by a note referencing the conversation) should be made to the recipient of the misdirected fax requesting that the entire content of the misdirected fax be destroyed.
  - c. If the recipient cannot be reached by phone, a fax using a letter for misdirected faxes should be sent to the recipient requesting that the entire content of the misdirected fax be destroyed.
  - d. The fax confirmation sheet or activity report should be sent along with the misdirected fax cover letter to Palmetto Community Care Privacy Officer.
  - e. Misdirected faxes will be recorded in the Accounting of Disclosure by Palmetto Community Care Privacy Officer.
7. Receipt of Faxes

- a. Fax machines used for client care or client related services shall not be located in areas accessible to the general public but rather must be in secure areas, and the employee on duty or designee is responsible for limiting access to them.
- b. Incoming faxes shall immediately be removed from the fax machine.

X. Email Transmissions

1. Unless otherwise approved in writing by the Palmetto Community Care Privacy Officer and authorized by the client in accordance with state law requirements, Palmetto Community Care employees may email PHI only upon the following conditions:
  - a. The receiver of the email transmission containing the PHI is a Palmetto Community Care employee;
  - b. The purpose of the email transmission is treatment, payment, or health care operations; and
  - c. Any PHI transmitted shall be limited to the minimum necessary to meet the needs of the party receiving the PHI.
2. Palmetto Community Care employees will identify and report individuals who violate the email policy to the Palmetto Community Care Privacy Officer, and if it is determined that an individual has violated this policy, they will be subject to the appropriate and applicable disciplinary processes, up to and including termination or dismissal.
3. All email accounts used by the PCC will be standard and have a confidentiality notice in the signature block of any email sent by an employee of the PCC. The confidentiality notice will state the confidentiality of the content of the email and steps to execute in the event the email is received by an unintended recipient.

Y. Applicability of other policies

This document is part of the Palmetto Community Care cohesive set of policies. Other policies may apply to the topics covered in this document and as such may compliment such polies.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 29. CLIENT COMPLAINTS

**POLICY:** Because customer service and privacy are of utmost importance to Palmetto Community Care, it is Palmetto Community Care policy to promptly receive, respond, and resolve complaints regarding allegations of improper use or disclosure of protected health information ("PHI") by Palmetto Community Care or our business associates.

---

**PURPOSE:** The purpose of this policy is to establish a process for the receipt and resolution of privacy-related complaints.

---

#### I. GENERAL RULE

- A. Subject of complaints. An individual may lodge a formal complaint about Palmetto Community Care's information practices, including but not limited to complaints regarding:
1. The privacy and security of PHI;
  2. Use and disclosure of PHI;
  3. Clients' access to, or amendment of, their PHI;
  4. Practices or actions of Palmetto Community Care's business associates;
  5. Palmetto Community Care's marketing practices; or
  6. Any other complaint relating to Palmetto Community Care's privacy and security policies and procedures.
- B. Documentation of complaints. Palmetto Community Care must maintain complete documentation of the complaint and Palmetto Community Care's review and disposition of the matter, including a record of any changes to policies or procedures or the imposition of sanctions against members of its workforce, if any. Palmetto Community Care must retain all documents (either in hard copy or electronic form) relating to the complaint and the investigation for a period of at least 6 years after the date of their creation.

- C. No Waiver. Palmetto Community Care will not require an individual to waive their right to file a complaint with the Secretary of the United States Department of Health and Human Services as a condition to filing a complaint under this policy, of the provision of treatment, payment, enrollment in a health plan, or eligibility for benefits.
- D. Non-Retaliation. Palmetto Community Care will not retaliate in any way against an individual for filing a complaint.

## **II. PROCEDURES/FORMS**

- A. Individuals may submit formal complaints by completing the attached Client Privacy Complaint form and delivering it to any Palmetto Community Care location or by sending it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. If the Client Privacy Complaint form is received by a Palmetto Community Care employee at Palmetto Community Care location, the employee shall keep a copy of the complaint form and send the original to 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
- B. Individuals may submit verbal complaints to employees. If this is the case, the complaint must be documented by the appropriate employee on the attached Client Privacy Complaint form and forwarded immediately to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. A copy of the complaint form shall be maintained in the Palmetto Community Care.
- C. Individuals may contact Palmetto Community Care by calling (843) 747-2273 to lodge a verbal complaint. The Palmetto Community Care Customer Service department will document the complaint and forward it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.
- D. If the Palmetto Community Care Privacy Officer determines that there has been a Breach of any privacy policy, the Palmetto Community Care employee determined to be responsible for such Breach shall be subject to appropriate sanctions in accordance with the Internal Enforcement policy. The Palmetto Community Care Privacy Officer shall further recommend any appropriate further action for preventing future Breaches of any privacy policy or unauthorized disclosure of PHI, including without limitation, privacy training, revisions to existing policies, and/or implementation of new policies.
- E. The Client Privacy Compliant form is located in Appendix K of this document.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 30. BUSINESS ASSOCIATES

**POLICY:** All agreements with business associates of Palmetto Community Care must be in writing and must contain certain mandatory provisions designed to protect the privacy and security of the protected health information ("PHI") of Palmetto Community Care clients. No Palmetto Community Care employee shall disclose PHI to a business associate without a signed business associate agreement and valid client authorization.

**PURPOSE:** The purpose of this policy is to protect, through the execution and enforcement of written agreements, the privacy and confidentiality of PHI that Palmetto Community Care discloses to individuals and entities that are business associates of Palmetto Community Care.

---

#### I. INTRODUCTION

- A. Need for business associate agreements. From time to time, Palmetto Community Care contracts with an individual or company to provide services to Palmetto Community Care or on behalf of Palmetto Community Care. If such a relationship involves sharing PHI that Palmetto Community Care maintains, then Palmetto Community Care is required to enter into a written contract, known as a "Business Associate Agreement," with the individual or company. The primary purpose of the Agreement is to ensure that the business associate will use or disclose the PHI for lawful purposes only.
- B. General rules regarding business associates. Palmetto Community Care may disclose PHI to a business associate or allow the business associate to create or receive PHI on its behalf, so long as Palmetto Community Care enters into a valid business associate agreement and obtains a written authorization from the client.
- C. Limitations on the use of PHI. The business associate may only use the PHI that it receives in its capacity as Palmetto Community Care's business associate as permitted by law and its contract with Palmetto Community Care.
- D. Additional compliance obligations. Disclosures of PHI to business associates must comply with all of Palmetto Community Care's other policies and procedures.

#### II. PROPOSED AGREEMENTS WITH BUSINESS ASSOCIATES

- A. Proposed business associate agreements. Palmetto Community Care employees must forward to the Palmetto Community Care Privacy Officer all proposed agreements between Palmetto Community Care and an entity or individual pursuant to which Palmetto Community Care may provide access to PHI.
- B. Review of proposed agreements. To determine whether a business associate agreement is required, the Palmetto Community Care Privacy Officer and Palmetto Community Care legal counsel will review each proposed agreement between Palmetto Community Care and an outside contractor if the contractor will use and disclose PHI pursuant to the agreement.

### **III. PRIVACY VIOLATIONS COMMITTED BY A BUSINESS ASSOCIATE**

- A. Employee's duty to notify. If a Palmetto Community Care employee knows or has reason to believe that a business associate of Palmetto Community Care is inappropriately using or disclosing PHI, whether the PHI was received by Palmetto Community Care or not, the Palmetto Community Care employee is required to notify Palmetto Community Care's Privacy Officer immediately regarding the suspected violation.
- B. Review of alleged violations. Upon receiving notice of an alleged or actual violation of a business associate agreement from **any** source, including notice obtained through client complaints and employee reports, the Palmetto Community Care Privacy Officer will initiate a review of the conduct or activities at issue.
- C. Investigation and resolution of violations. If the Palmetto Community Care Privacy Officer determines that the complaint, report or other form of notice contains substantial and credible evidence of violations by a business associate, the Palmetto Community Care Privacy Officer will commence a formal investigation into the conduct or activities of the business associate.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### **31. HIPAA COMPLIANCE REPORTING PROCESS (NON-RETRIBUTION/NON-RETALIATION)**

**POLICY:** Palmetto Community Care believes that positive employee relations and morale are best achieved and maintained in an environment that promotes ongoing open communication between employees and management. Palmetto Community Care also recognizes that an essential element of its HIPAA Privacy and Security Policies and Procedures is the maintenance of an environment that promotes the detection and resolution of inappropriate conduct. To achieve both of these goals, Palmetto Community Care has established a compliance reporting process and a strict non-retribution/non-retaliation policy to protect employees who report violations of the HIPAA privacy rules or Palmetto Community Care's HIPAA Privacy and Security Policies and Procedures in good faith from retribution and retaliation. All employees are responsible for reporting any actual or potential violations of the HIPAA Privacy and Security Rules or Palmetto Community Care's HIPAA Privacy and Security Policies and Procedures.

**PURPOSE:** The purpose of this policy is to explain: (1) the process to report suspected violations of the HIPAA Privacy and Security Rules or Palmetto Community Care's HIPAA Privacy and Security Policies and Procedures; and (2) Palmetto Community Care's policy of non-retribution and non-retaliation with respect to such reports.

#### **I. GENERAL REQUIREMENTS**

- A. All suspected or actual violations of HIPAA privacy rules or Palmetto Community Care's HIPAA Privacy and Security Policies and Procedures must be reported by Palmetto Community Care employees to the employee's supervisor. If the employee desires anonymity or otherwise feels that he or she cannot report suspected or actual violations to his or her supervisor, he or she should contact the Palmetto Community Care Privacy Officer.
- B. All supervisors are charged with the responsibility to take all necessary measures to ensure that their employees understand that Palmetto Community Care requires the reporting of HIPAA privacy compliance problems and that their team members will not be retaliated against for reporting such compliance problems in good faith.

## **II. COMPLIANCE REPORTING ACTIONS**

- A. Palmetto Community Care shall conduct HIPAA compliance training for its employees and as part of this training Palmetto Community Care will review the HIPAA compliance reporting process, including the non-retribution/non-retaliation policies of Palmetto Community Care. See also the Training policy.
- B. **Every employee must understand that any incident where retribution or retaliation can be related to an employee reporting a HIPAA privacy compliance problem will not be tolerated. Reports of this nature will be investigated thoroughly and expeditiously by Palmetto Community Care, with appropriate disciplinary actions taken, up to and including termination of employment.**

## **III. RESPONSE TO VIOLATION**

- A. If a Palmetto Community Care employee becomes aware of an actual or suspected violation of the HIPAA privacy rules or Palmetto Community Care's HIPAA Privacy and Security Policies and Procedures, that employee must immediately notify his or her supervisor or the Palmetto Community Care Privacy Officer. If the employee notifies his or her supervisor, the supervisor shall notify the Palmetto Community Care Privacy Officer.
- B. Palmetto Community Care has a non-retaliation policy so that no employee shall be subjected to any adverse action solely on the basis that the team member reported what was reasonably believed to be a violation of the HIPAA privacy rules or Palmetto Community Care's HIPAA Privacy and Security Policies and Procedures. Nevertheless, an employee will not be afforded the above protection should Palmetto Community Care reasonably determine that the team member's allegation of a violation was knowingly fabricated by the team member or was knowingly exaggerated or otherwise distorted to adversely affect another employee or person or to protect the reporting employee.



---

## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 32. INTERNAL ENFORCEMENT

**POLICY:** This policy addresses violations of federal and state privacy laws and Palmetto Community Care Privacy and Security Policies and Procedures ("Privacy Violations") by members of Palmetto Community Care's workforce or volunteer workforce. The Palmetto Community Care Privacy Officer will administer any appropriate discipline related to Privacy Violations, consistent with the procedures established below. Appropriate discipline may be based on factors such as the severity, frequency, degree of deviation from expectations, and length of time involved in any privacy violations. Whether to impose discipline, and the appropriate discipline to impose, are always within the discretion of Palmetto Community Care. Privacy Violations may result in disciplinary action, including but not limited to informal counseling, verbal warning, written warning, probation, suspension, demotion, dismissal and/or restitution. However, progressive discipline is not a right. Palmetto Community Care reserves the right to terminate employment or dismiss a volunteer at any time, for any reason, with or without undertaking any of the progressive disciplinary actions outlined in this policy. In light of the variety of possible situations that may arise, Palmetto Community Care may need to make decisions related to employment or volunteers in a manner other than as provided in this section.

---

**PURPOSE:** The purpose of this policy is to establish written guidelines for undertaking disciplinary action against Palmetto Community Care employees or volunteers who violate federal or state privacy laws or Palmetto Community Care's Privacy and Security Policies and Procedures.

---

#### I. GENERAL RULES

- A. Members of Palmetto Community Care's workforce and volunteers are encouraged to report possible Privacy Violations to Palmetto Community Care's Privacy Officer.
- B. Whenever possible Privacy Violations arise, the Palmetto Community Care Privacy Officer will conduct an investigation and determine whether a violation has occurred.
- C. If the Palmetto Community Care Privacy Officer determines that an employee has committed a Privacy Violation, that employee or volunteer shall be subject to appropriate discipline as determined by the employee's or volunteers immediate supervisor, the Palmetto Community Care Privacy Officer or legal counsel. Even if no actual Privacy Violation has occurred, disciplinary measures may be imposed if otherwise warranted by the circumstances.

- D. The discipline imposed may include, but are not limited to, informal counseling, verbal warning, written warning, suspension, or termination. An employee may also be placed on probation or demoted, and a volunteer may be placed on probation or dismissed. Restitution will be required if appropriate in the circumstances. In all cases, the discipline imposed will be in the discretion of Palmetto Community Care. In most cases the discipline will depend on the seriousness of the offense, among other factors. See Section II below.
- E. A supervisor may also be sanctioned to the extent that inadequate supervision or a lack of due diligence contributed to the violation, or if the supervisor's conduct was culpable or sanctionable in other ways. Supervisors may be sanctioned for failing to detect noncompliance with applicable policies and legal requirements, where reasonable diligence would have led to the discovery of any problems or violations.
- F. A record of the event and any discipline imposed shall be maintained in the employee's personnel file or the volunteer's file with a copy to be filed in a master file maintained by the Palmetto Community Care Privacy Officer, in accordance with applicable policies of Palmetto Community Care.

## **II. PROGRESSIVE DISCIPLINARY PROCESS**

The following summarizes the types of discipline that may be imposed by Palmetto Community Care if a Privacy Violation has occurred. Progressive discipline is not a right, and Palmetto Community Care reserves the right to impose discipline or to terminate employment or to dismiss a volunteer at any time, for any reason, with or without undertaking any of the lesser discipline outlined in this or any other policy. The type of discipline imposed will generally reflect the seriousness of the problem or violation. Factors may include the severity, frequency, degree of deviation from expectations, and length of time involved in any Privacy Violations. Some offenses, such as intentional violations, are so serious that they will justify termination or suspension on the first offense. For offenses which may not justify serious discipline on the first offense, lesser discipline may be applied in the discretion of Palmetto Community Care.

- A. **Informal Counseling.** The Palmetto Community Care Privacy Officer may engage in informal counseling with respect to privacy issues that do not warrant more severe discipline. Documentation of informal counseling may be maintained in personnel and departmental files.
- B. **Verbal Discussion.** The Palmetto Community Care Privacy Officer may have a verbal discussion with an employee or volunteer. Documentation of the verbal discussion will be maintained in personnel and departmental files.
- C. **Written Reprimand.** The Palmetto Community Care Privacy Officer may issue a written reprimand to an employee or volunteer. Such a reprimand may be appropriate, for example, when the behavior of the employee or volunteer is a repeated violation and verbal counseling has been administered, or the violation is more serious in nature

and/or subjects Palmetto Community Care to potential legal liability. Written reprimands will be documented in personnel and departmental files.

- D. Suspension. Suspension, or temporary release from duty, is a more severe action that may be imposed at the discretion of the Palmetto Community Care Privacy Officer. Suspension may be used during investigations in order to more easily conduct such investigations.
  - 1. Suspensions may vary in length, according to the nature of the investigation of the Privacy Violation.
  - 2. Suspensions will be documented in personnel and departmental files.
- E. Demotion. In appropriate circumstances, an employee or volunteer may be demoted (transferred to a lower-level position) as a disciplinary action for Privacy Violations. Demotions will be documented in personnel and departmental files.
- F. Termination of Employment/Dismissal of Volunteers. Termination of employment or dismissal of a volunteer is generally the most serious disciplinary action for Privacy Violations.
  - 1. Employment with Palmetto Community Care is at-will, and may be terminated at any time, for any reason, in the discretion of Palmetto Community Care or the Palmetto Community Care employee. Similarly, Palmetto Community Care may dismiss a volunteer at any time, for any reason, in its discretion.
  - 2. Termination or, in the case of a volunteer, dismissal, as a disciplinary action may, for example, be imposed after other disciplinary measures have failed or when a first-time incident occurs that is extremely serious.
  - 3. Copies of relevant documentation pertaining to terminations will be maintained in personnel and departmental files.
- G. Restitution. Where an employee's or volunteer's Privacy Violations have caused harm or damage to Palmetto Community Care or its clients, discipline may include restitution to Palmetto Community Care or its clients.

### **III. ACTIONS THAT MAY RESULT IN DISCIPLINE**

Without limiting Palmetto Community Care's right to discharge an employee at any time, or to dismiss a volunteer at any time, with or without cause, the following acts of misconduct are provided as nonexclusive examples of unacceptable activity that may result in discipline up to and including termination or dismissal:

- A. Misuse, inappropriate possession, or theft of protected health information (PHI), with or without the intent to unlawfully sell the information to an outside party.

- B. Failure to properly maintain an up-to-date accounting of instances in which Palmetto Community Care has released a client's PHI to a third party.
- C. Discussion of the client's conditions and medications in the presence of unrelated third parties.
- D. Use of unapproved marketing materials.
- E. Removal of PHI from its proper area.
- F. Failure to properly secure PHI in a manner that could lead to inappropriate access to the PHI.
- G. Breach of confidentiality.



## HIPAA PRIVACY AND SECURITY POLICIES AND PROCEDURES

### 33. GLOSSARY

Terms used, but not defined, in this HIPAA Privacy and Security Policies and Procedures Manual shall have the same meaning as those terms in the HIPAA Privacy and Security Rules.

***Breach*** means:

- A. Except as provided in Paragraph (B) of this definition, Breach means the acquisition, access, use or disclosure of Protected Health Information in a manner that compromises the security or privacy of such information unless there is a low probability that the Protected Health Information has been compromised.
- B. Breach excludes:
  - 1. any unintentional acquisition, access, or use of Protected Health Information by a workforce member or person acting under the authority of a Covered Entity or Business Associate, if made in good faith and within the scope of their authority and does not result in further use or disclosure in violation of the Privacy Regulations.
  - 2. any inadvertent disclosure by a person who is authorized to access Protected Health Information at a Covered Entity or Business Associate to another person authorized to access Protected Health Information at the same Covered Entity or Business Associate, or Organized Health Care Arrangement in which the Covered Entity participates, and the information is not further used or disclosed in a manner not permitted under the Privacy Regulations.
  - 3. a disclosure of Protected Health Information where there is a good faith belief that the unauthorized person to whom the disclosure was made could not reasonably have retained such information.

***Business Associate*** means:

- A. Except as provided in paragraph (B) of this definition, Business Associate means, with respect to a Covered Entity, a person who:
  - 1. on behalf of such Covered Entity or of an Organized Health Care Arrangement (as defined in § 164.501 of the Privacy Rule) in which the Covered Entity

participates, but other than in the capacity of a member of the workforce of such Covered Entity or arrangement, creates, receives, maintains, or transmits Protected Health Information for a function or activity regulated by the HIPAA Privacy and Security Rules, including claims processing or administration, data analysis, processing or administration, utilization review, quality assurance, client safety activities listed at 42 CFR 3.20, billing, benefit management, and pricing;

2. provides, other than in the capacity of a member of the workforce of such covered entity, legal actuarial, accounting consulting, data aggregation (as defined at § 164.501 of the HIPAA Privacy and Security Rules), management, administrative, accreditation, or financial services to or for such covered entity, or to or for an Organized Health Care Arrangement in which the covered entity participates, where the provision of the service involves the disclosure of Protected Health Information from such covered entity or arrangement, or from another Business Associate of such covered entity or arrangement, to the person;
3. is a Health Information Organization, E-prescribing Gateway, or other person that provides data transmission services with respect to Protected Health Information to a covered entity and that requires access on a routine basis to such Protected Health Information;
4. offers a personal health record to one or more individuals on behalf of a covered entity; **or**
5. is a subcontractor that creates, receives, maintains, or transmits Protected Health Information on behalf of the Business Associate.

B. A Business Associate does not include:

1. A health care provider, with respect to disclosures by a covered entity to the health care provider concerning the treatment of the individual;
2. A plan sponsor, with respect to disclosures by a group health plan (or health insurance issuer or HMO with respect to a group health plan) to the plan sponsor, to the extent that the requirements of § 164.504(f) of the HIPAA Privacy and Security Rules are met;
3. A government agency, with respect to determining eligibility for, or enrollment in, a government health plan that provides public benefits and is administered by another government agency, or collecting Protected Health Information for such purposes, to the extent such activities are authorized by law;
4. Covered Entity participating in an Organized Health Care Arrangement that performs a function or activity as described by paragraph (A)(1) of this definition for or on behalf of such Organized Health Care Arrangement, or that provides a service as described in paragraph (A)(2) of this definition to or for such Organized Health Care Arrangement by virtue of such activities or services.

C. A Covered Entity may be a Business Associate of another Covered Entity.

**Covered Entity** means:

- A. A health plan;
- B. A health care clearinghouse;
- C. A health care provider who transmits any Health Information in electronic form in connection with a transaction covered by this subchapter.

**De-identified PHI:** is information that has been stripped of all identifiers and, to the knowledge of the person who de-identifies the PHI, cannot be re-identified without a special code or re-identification tool. For example, if the Business Associate replaces all identifiers from a report of high claims under the health plan with a number or code, and reasonably believes that the high claims cannot be linked to any individual without the number or code, the report is de-identified. See the de-identification procedure for details.

**Designated Record Set** means:

- A. A group of records maintained by or for a Covered Entity that is:
  - 1. The medical records and billing records about Individuals maintained by or for a covered health care provider;
  - 2. The enrollment, Payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; **or**
  - 3. Used, in whole or in part, by or for the Covered Entity to make decisions about Individuals.
- B. For purposes of this paragraph, the term *record* means any item, collection, or grouping of information that includes Protected Health Information and is maintained, collected, used, or disseminated by or for a Covered Entity. § 164.501

**Electronic Health Record:** is an electronic record of health-related information of an individual that is created, gathered, managed, and consulted by authorized health care physicians and staff.

**Electronic PHI:** is PHI that is maintained in or transmitted by electronic media. Electronic media includes (i) electronic storage media on which data is or may be recorded electronically, including, for example, devices in computers (hard drives) and any removable/transportable digital memory medium, such as magnetic tape or disk, optical disk, or digital memory card; and (ii) transmission media used to exchange information already in electronic storage media, including, for example, internet, extranet or intranet, leased lines, dial-up lines, private networks, and the physical movement of removable/transportable electronic storage media. Certain transmissions, including of paper, via facsimile, and of voice, via telephone, are not considered to be transmissions via electronic media if the information being exchanged did not exist in electronic form immediately before the transmission.

**Genetic Information** means: with respect to an individual, information about (1) the individual's genetic tests; (2) the genetic tests of family members of the individual; (3) the manifestation of a disease or disorder in family members of such individual; or (4) any request for, or receipt of, genetic services, or participation in Palmetto Community Care clinical research which includes genetic services, by the individual or any family member of the individual. Genetic Information includes genetic information of a fetus carried by the individual or family member who is a pregnant woman, and any embryo legally held by an individual or family member utilizing an assisted reproductive

technology. Genetic Information excludes information about the sex or age of any individual.

***Health Care Operations*** means: any of the following activities of the Covered Entity to the extent that the activities are related to covered functions:

- A. Conducting quality assessment and improvement activities, including outcomes evaluation and development of Palmetto Community Care clinical guidelines, provided that the obtaining of generalizable knowledge is not the primary purpose of any studies resulting from such activities; population-based activities relating to improving health or reducing health care costs, protocol development, case management and care coordination, contacting of health care providers and clients with information about Treatment alternatives; and related functions that do not include Treatment;
- B. Reviewing the competence or qualifications of health care professionals, evaluating practitioner and provider performance, health plan performance, conducting training programs in which students, trainees, or practitioners in areas of health care learn under supervision to practice or improve their skills as health care providers, training of non-health care professionals, accreditation, certification, licensing, or credentialing activities;
- C. Underwriting, premium rating, and other activities relating to the creation, renewal or replacement of a contract of health insurance or health benefits, and ceding, securing, or placing a contract for reinsurance of risk relating to claims for health care (including stop-loss insurance and excess of loss insurance), provided that the requirements of § 164.514(g) are met, if applicable;
- D. Conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs;
- E. Business planning and development, such as conducting cost-management and planning-related analyses related to managing and operating the entity, including formulary development and administration, development, or improvement of methods of Payment or coverage policies; and
- F. Business management and general administrative activities of the entity, including, but not limited to:
  1. Management activities relating to implementation of and compliance with the requirements of this subchapter;
  2. Customer service, including the provision of data analyses for policy holders, Plan Sponsors, or other customers, provided that Protected Health Information is not disclosed to such policy holder, Plan Sponsor, or customer;
  3. Resolution of internal grievances;
  4. The sale, transfer, merger, or consolidation of all or part of the Covered Entity with another Covered Entity, or an entity that following such activity will become a Covered Entity, and due diligence related to such activity; and

5. Consistent with the applicable requirements of § 164.514, creating de-identified Health Information or a limited data set, and fundraising for the benefit of the Covered Entity. § 164.501

**Health Information** means: any information, including genetic information, whether oral or recorded in any form or medium, that:

- A. Is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and
- B. Relates to the past, present, or future physical or mental health or condition of an Individual; the provision of health care to an Individual; or the past, present, or future Payment for the provision of health care to an Individual. § 160.103

**Health Oversight Agency** means: an agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, or a person or entity acting under a grant of authority from or contract with such public agency, including the employees or agents of such public agency or its contractors or persons or entities to whom it has granted authority, that is authorized by law to oversee the health care system (whether public or private) or government programs in which Health Information is necessary to determine eligibility or compliance, or to enforce civil rights laws for which Health Information is relevant. § 164.501

**Individual** means: the person who is the subject of Protected Health Information. § 164.501

**Individually Identifiable Health Information:** is information that is a subset of Health Information, including demographic information collected from an Individual, and:

- A. Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
- B. Relates to the past, present, or future physical or mental health or condition of an Individual; the provision of health care to an Individual; or the past, present, or future Payment for the provision of health care to an Individual; and
  1. That identifies the Individual; or
  2. With respect to which there is a reasonable basis to believe the information can be used to identify the Individual. § 160.103

**Law Enforcement Official** means: an officer or employee of any agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, who is empowered by law to:

- A. investigate or conduct an official inquiry into a potential violation of law; **or**
- B. prosecute or otherwise conduct a criminal, civil, or administrative proceeding arising from an alleged violation of law. § 164.501

**Payment** means:

- A. The activities undertaken by:

1. A health plan to obtain premiums or to determine or fulfill its responsibility for coverage and provision of benefits under the health plan; **or**
  2. A health care provider or health plan to obtain or provide reimbursement for the provision of health care.
- B. The activities in paragraph (A) of this definition relate to the Individual to whom health care is provided and include, but are not limited to:
1. Determinations of eligibility or coverage (including coordination of benefits or the determination of cost sharing amounts), and adjudication or subrogation of health benefit claims;
  2. Risk adjusting amounts due based on enrollee health status and demographic characteristics;
  3. Billing, claims management, collection activities, obtaining payment under a contract for reinsurance (including stop-loss insurance and excess of loss insurance), and related health care data processing;
  4. Review of health care services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges;
  5. Utilization review activities, including pre-certification and preauthorization of services, concurrent and retrospective review of services; and
  6. Disclosure to consumer reporting agencies of any of the following Protected Health Information relating to collection of premiums or reimbursement:
    - a. Name and address;
    - b. Date of birth;
    - c. Social security number;
    - d. Payment history;
    - e. Account number; and
    - f. Name and address of the health care provider and/or health plan.

***Plan Administration Functions*** means: administration functions performed by the Plan Sponsor of a group health plan on behalf of the group health plan, and excludes functions performed by the Plan Sponsor in connection with any other benefit or benefit plan of the Plan Sponsor. § 164.504

***Plan Sponsor*** is defined as defined at section 3(16)(B) of ERISA, 29 U.S.C. 1002(16)(B). § 164.501

***Protected Health Information*** means: Individually Identifiable Health Information:

- A. Except as provided in paragraph (B) of this definition, that is:
  1. Transmitted by electronic media;
  2. Maintained in any medium described in the definition of *electronic media* at § 162.103; **or**
  3. Transmitted or maintained in any other form or medium.
- B. *Protected Health Information* excludes Individually Identifiable Health Information in:

1. Education records covered by the Family Educational Rights and Privacy Act, as amended, 20 U.S.C. 1232g;
2. Records described at 20 U.S.C. 1232g(a)(4)(B)(iv) of the Family Educational Rights and Privacy Act; and
3. Employment records held by a Covered Entity in its role as employer of an individual who has been deceased for more than 50 years.

**Psychotherapy Notes** means: notes recorded (in any medium) by a health care provider who is a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a group, joint, or family counseling session, and that are separated from the rest of the Individual's medical record. *Psychotherapy Notes* excludes medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of Treatment furnished, results of Palmetto Community Care clinical tests, and any summary of the following items: diagnosis, functional status, the Treatment plan, symptoms, prognosis, and progress to date. § 164.501

**Required by Law** means: a mandate contained in law that compels an entity to make a use or disclosure of Protected Health Information and that is enforceable in a court of law. *Required by Law* includes, but is not limited to, court orders and court-ordered warrants; subpoenas or summons issued by a court, grand jury, a governmental or tribal inspector general, or an administrative body authorized to require the production of information; a civil or an authorized investigative demand; Medicare conditions of participation with respect to health care providers participating in the program; and statutes or regulations that require the production of information, including statutes or regulations that require such information if payment is sought under a government program providing public benefits. § 164.501

**Research** means: a systematic investigation, including research, development, testing, and evaluation, designed to develop or contribute to generalizable knowledge. § 164.501

**Subcontractor** means: a person to whom a Business Associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such Business Associate.

**Summary Health Information** means: information, that may be Individually Identifiable Health Information, and:

- A. That summarizes the claims history, claims expenses, or type of claims experienced by Individuals for whom a Plan Sponsor has provided health benefits under a group health plan; and
- B. From which the information described at § 164.514(b)(2)(i) has been deleted, except that the geographic information described in § 164.514(b)(2)(i)(B) need only be aggregated to the level of a five-digit zip code. § 164.504

**Treatment** means: the provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a

health care provider with a third party; consultation between health care providers relating to a client; or the referral of a client for health care from one health care provider to another. § 164.501

***Unsecured Protected Health Information*** (Unsecured PHI) means: Protected Health Information that has not been rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of technology or methodology specified by the Secretary of the Department of Health and Human Services.



---

### **34. APPENDIX A – HIPAA PRIVACY POLICY AGREEMENT**

Under the HIPAA Privacy and Security Rules, Palmetto Community Care is required by law to maintain the privacy and security of protected health information of individuals, to provide such individuals with notice of the Palmetto Community Care’s duties and privacy practices concerning protected health information, and to afford individuals certain rights, including the rights to access, amend, and restrict access to their protected health information. Palmetto Community Care has developed the below notice of privacy practices and policies in order to comply with its obligations under the HIPAA Privacy and Security Rules.

#### **NOTICE OF PRIVACY PRACTICES**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

Palmetto Community Care is required by law to maintain the privacy of protected health information ("PHI") and to provide individuals with notice of Palmetto Community Care’s legal duties and privacy practices with respect to PHI. PHI is information that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services. This Notice of Privacy Practices ("Notice") describes how Palmetto Community Care may use and disclose PHI to carry out treatment, payment, or health care operations and for other specified purposes that are permitted or required by law. The Notice also describes your rights with respect to PHI about you.

Palmetto Community Care is required to follow the terms of this Notice. Palmetto Community Care will not use or disclose PHI about you without your written authorization, except as described in this Notice. Palmetto Community Care reserves the right to change its practices and this Notice and to make the new Notice effective for all PHI Palmetto Community Care maintains, including PHI created or received before the changes were made. Palmetto Community Care will provide any revised Notice to you (either at any Palmetto Community Care location or through the Palmetto Community Care Privacy Officer).

Palmetto Community Care will post a copy of the current Notice in each Palmetto Community Care location. In addition, the current Notice and any revised Notice will be posted on Palmetto Community Care’s website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org).

#### **I. YOUR HEALTH INFORMATION RIGHTS**

You have the following rights with respect to PHI about you:

**Breach of Unsecured PHI.** Palmetto Community Care will provide written notification of a breach of your unsecured PHI. You have the right to receive written notification of a breach where your unsecured PHI has been accessed, used, acquired, or disclosed to an unauthorized person as a result of such breach, and the breach compromises the security and privacy of your PHI. Unless specified in writing by you to receive this breach notification by electronic mail, we will provide this notification by first-class mail or, if necessary, by such other substituted forms of communication allowable under the law.

**Obtain a paper copy of the Notice upon request.** You may request a copy of this Notice at any time. You may obtain a paper copy at any Palmetto Community Care location or by writing to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

**Request a restriction on certain uses and disclosures of PHI.** You have the right to request additional restrictions on Palmetto Community Care use or disclosure of PHI about you by completing a Request for Additional Restriction on Use or Disclosure of Protected Health Information form (available at any Palmetto Community Care location) and delivering it to the Palmetto Community Care location(s) which you believe maintains PHI about you or sending it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Palmetto Community Care is not required to agree to additional restrictions that are requested, unless your request is to restrict disclosure of your PHI to a health plan and such disclosure is for payment or health care operations, is not required by law, and the PHI pertains only to an item or service that has been paid for in full by you.

**Inspect and obtain a copy of PHI.** You have the right to access and copy PHI about you that is contained in a designated record set for as long as Palmetto Community Care maintains the PHI. The designated record set usually will include treatment, prescription, and billing records. To inspect or copy PHI about you, you must complete a Request for Access to Protected Health Information form (available at any Palmetto Community Care location) and deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Palmetto Community Care may charge you a fee for the costs of copying, mailing and supplies that are necessary to fulfill your request. Palmetto Community Care may deny your request to inspect and copy in certain limited circumstances. If you are denied access to PHI about you, you may request that the denial be reviewed.

**Request an amendment of PHI.** If you feel that PHI Palmetto Community Care maintains about you is incomplete or incorrect, you may request that Palmetto Community Care amend it. You may request an amendment for as long as Palmetto Community Care maintains the PHI. To request an amendment, you must complete a Request to Amend Protected Health Information form (available at any Palmetto Community Care location) and deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. You must include a reason that supports your request. Palmetto Community Care may deny your request for amendment if the PHI:

- Was not created by Palmetto Community Care, unless the person or entity that created the PHI is no longer available to make the amendment;
- Is not part of the PHI kept by or for Palmetto Community Care;
- Is not part of the PHI which you would be permitted to inspect and copy; **or**
- Is accurate and complete.

If Palmetto Community Care denies your request for amendment, you have the right to submit to Palmetto Community Care a statement of disagreement with the decision and Palmetto Community Care may give a rebuttal to your statement.

**Receive an accounting of disclosures of PHI.** You have the right to receive an accounting of the disclosures Palmetto Community Care made of PHI about you in the past six years for most purposes other than treatment, payment, or health care operations. The accounting will exclude certain disclosures, such as disclosures made directly to you, disclosures you authorize, disclosures to friends or family members involved in your care, and disclosures for notification purposes. The right to receive an accounting is subject to certain other exceptions, restrictions, and limitations. To request an accounting, you must complete a Request for an Accounting of Disclosures form (available at any Palmetto Community Care location) and deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Your request must specify the time period but may not be longer than 6 years. The first accounting you request within a 12-month period will be provided free of charge, but you may be charged for the cost of providing additional accountings. Palmetto Community Care will notify you of the cost involved and you may choose to withdraw or modify your request at that time. Certain other exceptions may apply for PHI maintained in an electronic health record.

**Request communications of PHI by alternative means or at alternative locations.** You have the right to request how and where Palmetto Community Care contacts you about PHI. For instance, you may request that Palmetto Community Care contact you about medical matters only in writing or at a different residence or post office box. To request confidential communication of PHI about you, you must complete a Request for Alternative Communications on Use or Disclosure of Protected Health Information form (available at any Palmetto Community Care location) and deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Your request must state how or where you would like to be contacted. Palmetto Community Care will accommodate all reasonable requests.

## **II. EXAMPLES OF HOW PALMETTO COMMUNITY CARE MAY USE AND DISCLOSE PHI**

- A. The following are descriptions and examples of ways Palmetto Community Care may use and disclose PHI without your authorization:

**Palmetto Community Care will use PHI for treatment.** Example: To the extent your PHI is obtained by Palmetto Community Care it will be recorded in your file and

used to determine the best treatment for you. The health care team will document your treatment goals, actions taken, and Palmetto Community Care observations.

**Palmetto Community Care will use PHI for payment.** Example: Palmetto Community Care may bill you or a third-party payor for the cost of services rendered to you and prescription medications dispensed to you. The information on or accompanying the bill may include information that identifies you, your diagnoses, treatments and supplies used.

**Palmetto Community Care will use PHI for health care operations.** Example: Palmetto Community Care may use information in your health record to monitor the performance of the health care team providing treatment to you. This information will be used in an effort to continually improve the quality and effectiveness of the health care service provided to you.

B. Palmetto Community Care is likely to use or disclose PHI for the following purposes:

**Business Associates.** There are some services provided by Palmetto Community Care through contracts with business associates. Examples may include archive records storage, software support and maintenance companies, as well as select telecommunications companies assisting in transmission of electronic data for payment/treatment. When these services are contracted for, Palmetto Community Care may disclose PHI about you to its business associate, subject to state authorization requirements, so that they can perform the job Palmetto Community Care has asked them to do and bill you or your third-party payor for services rendered. To protect PHI about you, Palmetto Community Care requires the business associate to appropriately safeguard the PHI.

**Communication with individuals involved in your care or payment for your care.** Subject to state authorization requirements, Palmetto Community Care employees, using their professional judgment, may disclose to a family member, other relative, close personal friend or any person you identify, PHI relevant to that person's involvement in your care or payment related to your care. You have the right to object to such disclosure. Any objection must be communicated in writing to the Privacy Officer.

**Health-related communications.** Palmetto Community Care may contact you to provide information about treatment alternatives or other health-related benefits and services that may be of interest to you.

**Food and Drug Administration (FDA).** As required by law, Palmetto Community Care may disclose to the FDA, or persons under the jurisdiction of the FDA, PHI relative to adverse events with respect to drugs, foods, supplements, products and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

**Workers' compensation.** Palmetto Community Care may disclose PHI about you as authorized by and as necessary to comply with laws relating to workers' compensation or similar programs established by law.

**Public health.** As required by law, Palmetto Community Care may disclose PHI about you to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

**Law enforcement.** Palmetto Community Care may disclose PHI about you for law enforcement purposes as required by law or in response to a valid subpoena or other legal process.

**Correctional institution.** If you are an inmate of a correctional institution, Palmetto Community Care may disclose PHI about you to the institution or its agents that is needed for your health or the health and safety of other individuals.

**As required by law.** Palmetto Community Care must disclose PHI about you when required to do so by law.

**Health oversight activities.** Palmetto Community Care may disclose PHI about you to an oversight agency for activities authorized by law. These oversight activities include audits, investigations, and inspections, as necessary for its licensure and for the government to monitor the health care system, government programs, and compliance with civil rights laws.

**Judicial and administrative proceedings.** If you are involved in a lawsuit or a dispute, Palmetto Community Care may disclose PHI about you in response to a court or administrative order, subject to state authorization requirements where applicable. Palmetto Community Care may also disclose PHI about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the requested PHI and subject to state authorization requirements where applicable.

- C. Palmetto Community Care is permitted to use or disclose PHI about you for the following purposes:

**Coroners, medical examiners, and funeral directors.** To the extent required by law, Palmetto Community Care may release PHI about you to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. Palmetto Community Care may also disclose PHI to funeral directors consistent with applicable law to carry out their duties.

**Organ or tissue procurement organizations.** Consistent with applicable law, Palmetto Community Care may disclose PHI about you to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.

**Notification.** To the extent permitted by state law, Palmetto Community Care may use or disclose PHI about you to notify or assist in notifying a family member, personal

representative, or another person responsible for your care, your location, and your general condition.

**Correctional institution.** If you are or become an inmate of a correctional institution, Palmetto Community Care may disclose PHI to the institution or its agents when necessary for your health or the health and safety of others and to the extent required by law.

**To avert a serious threat to health or safety.** Palmetto Community Care may use and disclose PHI about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person.

**Military and veterans.** If you are a member of the armed forces, Palmetto Community Care may release PHI about you as required by military command authorities who are authorized by law to receive such information. Palmetto Community Care may also release PHI about foreign military personnel to the appropriate military authority to the extent required by law.

**National security and intelligence activities.** Palmetto Community Care may release PHI about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

**Victims of abuse, neglect, or domestic violence.** Palmetto Community Care may disclose PHI about you to a government authority, such as a social service or protective services agency, if Palmetto Community Care reasonably believes you are a victim of abuse, neglect, or domestic violence. Palmetto Community Care will only disclose this type of information to the extent required by law, if you agree to the disclosure by written authorization required by state law, or if the disclosure is allowed by law and Palmetto Community Care believes it is necessary to prevent serious harm to you or someone else or the law enforcement or public official that is to receive the report represents that it is necessary and will not be used against you.

### **III. OTHER USES AND DISCLOSURES OF PHI**

Palmetto Community Care will obtain your written authorization before using or disclosing PHI about you for purposes other than those provided for above or as otherwise permitted or required by law. You may revoke any such authorization in writing at any time. Upon receipt of the written revocation, Palmetto Community Care will stop using or disclosing PHI about you, except to the extent that has already taken action in reliance on the authorization. Use of certain types of PHI about you may only be made with your written authorization, including disclosure of your PHI for marketing purposes, or to sell your PHI.

### **IV. FOR MORE INFORMATION OR TO REPORT A PROBLEM**

If you have questions or would like additional information about Palmetto Community Care's privacy practices, you may contact Palmetto Community Care by calling the Palmetto Community Care Privacy Officer at (843) 747-2273 or writing to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. If you

believe your privacy rights have been violated, you can file a complaint in writing with the Palmetto Community Care Privacy Officer or with the Secretary of the United States Department of Health and Human Services. There will be no retaliation for filing a complaint.

**V. EFFECTIVE DATE**

This Notice is effective as of August 22, 2022.

**35. APPENDIX B – ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES**

**Acknowledgment of Receipt**

By signing this form, you acknowledge receipt of the Palmetto Community Care **Notice of Privacy Practices**. Palmetto Community Care **Notice of Privacy Practices** provides information about how it may use and disclose protected health information ("PHI") about you and your rights regarding the use and disclosure of PHI. We encourage you to read it in full.

The Palmetto Community Care **Notice of Privacy Practices** is subject to change. If Palmetto Community Care changes its notice, you may obtain a copy of the revised notice at one of Palmetto Community Care locations, by **accessing its web site at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org), or by contacting Palmetto Community Care at (843) 747-2273.**

If you have any questions about the Palmetto Community Care Notice of Privacy Practices, please call the Palmetto Community Care Privacy Officer at (843) 747-2273 or write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

I acknowledge the receipt of the Palmetto Community Care **Notice of Privacy Practices**.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to client: \_\_\_\_\_  
(*client/parent/conservator/guardian*)

---

**Authorization for South Carolina law purposes**

I hereby authorize Palmetto Community Care to use and disclose my Protected Health Information, ("PHI") as described in the Notice of Privacy Practices provided to me, including as necessary for purposes of my medical treatment and to enable Palmetto Community Care to be paid for the Palmetto Community Care, services and supplies provided to me, including by means of verbal, faxed, telephonic, or electronic data transmissions. I hereby further authorize Palmetto Community Care to disclose PHI to my family members or friends who may present to the Palmetto Community Care location to pick up prescriptions for me, to other health care providers treating me, and to third parties who perform functions on behalf of Palmetto Community Care. This authorization is valid only to the extent my authorization for such use and disclosure is required under **South Carolina** law and does not constitute an authorization as defined under the HIPAA privacy rule.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to client: \_\_\_\_\_  
(*client/parent/conservator/guardian*)

---

**FOR PALMETTO COMMUNITY CARE USE ONLY**

**Inability to Obtain Acknowledgment - To be completed only if no signature is obtained on Acknowledgment of Receipt of Notice of Privacy Practices.**

If it is not possible to obtain the individual's acknowledgment, describe below the good faith efforts made to obtain the individual's acknowledgment, and the reasons why the acknowledgment was not obtained:

---

---

---

**Date Acknowledgment Form Processed into Client Profile:** \_\_\_\_\_

**Signature of Palmetto Community Care employee:** \_\_\_\_\_

**36. APPENDIX C – REQUEST FOR ACCESS TO PROTECTED HEALTH INFORMATION**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

I hereby request access to the protected health information ("PHI") of \_\_\_\_\_  
\_\_\_\_\_ **[insert name of client]** held by Palmetto Community Care in a designated record set.

With respect to the PHI for which I am requesting access, I wish to **[please check appropriate box or boxes]**:

- Inspect the PHI at a Palmetto Community Care location.
- Obtain a hard copy of the PHI maintained by Palmetto Community Care.
- Obtain an electronic copy of the PHI maintained by Palmetto Community Care (send to \_\_\_\_\_  
e-mail address (if applicable))
- Obtain a summary of the PHI maintained by Palmetto Community Care.

If a copy of the PHI is requested, I understand that Palmetto Community Care may charge me a reasonable fee for the cost of copying, sending, and if applicable preparing a summary of the PHI.

I understand that Palmetto Community Care must act on this request for access within 10 days of the date Palmetto Community Care receives this request.

Signature of client or personal representative: \_\_\_\_\_

If personal representative, give relationship: \_\_\_\_\_

---

Upon completion of this Request for Access to Protected Health Information ("PHI"), deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to

Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org) or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**



---

**37. APPENDIX D – RESPONSE TO REQUEST FOR ACCESS TO PROTECTED HEALTH INFORMATION**

[Date]

[Address]

Dear \_\_\_\_\_:

On [insert date], you requested that Palmetto Community Care provide you with access to the protected health information ("PHI") of \_\_\_\_\_ [insert client name] held by Palmetto Community Care in a designated record set.

- Palmetto Community Care agrees to provide you with the access you have requested within the applicable time period.
  
- Palmetto Community Care does not maintain the PHI you requested, but you may obtain access to the PHI by contacting: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- Palmetto Community Care does not agree to provide you access to any of the information to which you requested access.
  
- Palmetto Community Care does not agree to provide you access to the following information to which you requested access: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If your request has been denied in whole or in part, the reason for the denial is:

- The PHI was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information.
- The PHI was compiled by Palmetto Community Care in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding.
- The PHI was obtained by Palmetto Community Care in the course of research that includes treatment of the research participants, while such research is in progress, and the client previously agreed to this temporary suspension.
- The PHI requested is psychotherapy notes.
- A licensed health care professional has determined, in the exercise of professional judgment, that the provision of access to the PHI is reasonably likely to cause substantial harm to the client or another person.
- Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

If the reason for denial is because a licensed health care professional has determined, in the exercise of professional judgment, that the provision of access is reasonably likely to cause substantial harm to the client or another person, you may request a review of this denial by contacting the Palmetto Community Care Privacy Officer at (843) 747-2273 or writing to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on our website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org) or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care by contacting the Palmetto Community Care Privacy Officer at (843) 747-2273 or by writing to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Sincerely,  
 Palmetto Community Care, Privacy Officer



**39. APPENDIX F – REQUEST FOR AN ACCOUNTING OF DISCLOSURES**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

I would like an accounting of how my protected health information was disclosed by Palmetto Community Care, as required by the HIPAA privacy rules. I understand that Palmetto Community Care does not have to tell me about the following types of disclosures:

1. Disclosures for purposes of treatment, payment, and health care operations, or as part of a limited data set.
2. Disclosures to me or disclosures authorized by me.
3. Disclosures to persons involved in my care.
4. For notification purposes (to notify a family member, personal representative or other person of the individual's location, general condition or death).
5. For national security or intelligence purposes.
6. To correctional institutions or law enforcement officials.
7. Disclosures made prior to April 14, 2003.
8. Disclosures incident to a use or disclosure otherwise permitted or required by federal law.

I also understand that my right to an accounting of some or all disclosures may be suspended by the government under limited circumstances.

I want an accounting of disclosures that covers the following time period:

---

*(Note: the time period must be no longer than 6 years (3 years in the case of an electronic health record) and may not include dates before April 14, 2003.)*

---

I want the accounting of disclosures in the following form:

On paper

Electronically

Please send my accounting to the following address (provide an email address if you requested your accounting electronically):\_\_\_\_\_.

I want to pick up the accounting. Please call me at the following phone number when it is ready:\_\_\_\_\_.

I understand that Palmetto Community Care must give me the accounting of disclosures within 60 days or tell me that it needs an extra 30 days (or less) to prepare it.

I am entitled to one free accounting of disclosures in any 12-month period. Additional accountings will cost \$5.00 each.

---

Upon completion of this Request for an Accounting of Disclosures, deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org) or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Signature of client or personal representative:\_\_\_\_\_

If personal representative, give relationship:\_\_\_\_\_

## Response to Request for Accounting of Disclosures

[Date]

[Address]

Dear \_\_\_\_\_:

We received your request for an accounting of disclosures dated\_\_\_\_\_.

We need more time to process your request. We will send you an accounting of disclosures by\_\_\_\_[insert date].

You did not provide all the information we needed on your form. Please complete the form and return it to us.

You have already received one free accounting of disclosures within the last 12 months. Additional accountings cost \$5.00. Please send a check for this amount, made payable to Palmetto Community Care, to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Or bring it to any Palmetto Community Care location.  
Other\_\_\_\_\_

Please include the enclosed "Request for Accounting of Disclosures" form with your check. **[Check this box if request has been made without completing Request for Accounting of Disclosures form and enclose form.]**

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on our website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org) or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Sincerely,

Palmetto Community Care, Privacy Officer



**41. APPENDIX G – AUTHORIZATION TO USE AND/OR DISCLOSE HEALTH INFORMATION**

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

1. I authorize the use or disclosure of the above-named client's health information as described below.
2. Palmetto Community Care is authorized to use and/or disclose the health information.
3. The type and amount of information to be used or disclosed is as follows (e.g., treatment records, prescription records, all information about the client to date, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. This information may be disclosed to and used by the following individuals or organizations (include specific information to identify individuals or organizations, e.g., address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **The information will be used/disclosed for the following purpose(s)** (all purposes must be listed. If client is initiating the authorization, purpose may be described as "At the request of the client):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. This authorization permits the use and disclosure of health care information for marketing purposes as described above. NO \_\_\_\_\_ YES \_\_\_\_\_.

7. If the answer to 6 is YES, Palmetto Community Care WILL \_\_\_\_\_ WILL NOT \_\_\_\_\_ receive remuneration from a third party for the use of this information.

8. I understand that I have the right to revoke this authorization at any time. I understand that if I revoke this authorization, I must do so in writing and present my written revocation to the Palmetto Community Care Privacy Officer or his/her designated person. I understand the revocation will not apply to information that has already been released in response to this authorization or that Palmetto Community Care has already used or disclosed in reliance on this authorization. I understand that the revocation will not apply to my insurance company when the law provides my insurer with the right to contest a claim under my policy. Unless otherwise revoked, this authorization will expire on the following date, event, or condition:

\_\_\_\_\_.

9. I understand that authorizing the disclosure of this health information is voluntary. I can refuse to sign this authorization. I need not sign this form in order to assure treatment, payment, enrollment, or eligibility for benefits where such a condition is prohibited. I understand that I may inspect or copy the information to be used or disclosed. I understand that any disclosure of information carries with it the potential for an unauthorized redisclosure, and the information may not be protected by federal privacy rules. If I have questions about disclosure of my health information, I can contact the Palmetto Community Care Privacy Officer at (843) 747-2273 or by writing to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

Signature of client or personal representative: \_\_\_\_\_

If personal representative, give relationship: \_\_\_\_\_

---

**FOR Palmetto Community Care USE ONLY - To be completed by Palmetto Community Care if the above signature is that of a client's representative.**

Palmetto Community Care has verified the identity of \_\_\_\_\_  
**[insert client's representative name]** by \_\_\_\_\_ **[describe means of verification, e.g. driver's license]** and that in his/her capacity of \_\_\_\_\_  
**[description of authority to act, e.g. husband, wife, etc.]**, he or she is authorized to act on behalf of the client.

Signature of Palmetto Community Care employee: \_\_\_\_\_

**42. APPENDIX H – SAMPLE ACKNOWLEDGEMENT LETTER FOR VENDORS AND OTHERS**

[Insert Palmetto Community Care Letterhead here]

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Re: HIPAA Privacy Rules**

Dear \_\_\_\_\_:

Palmetto Community Care must comply with the standards established by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its related privacy and security regulations set forth at 45 CFR Parts 160 and 164 (the "HIPAA Privacy and Security Rules"). From time to time third parties such as vendors and other visitors like you come onto Palmetto Community Care premises for purposes related to Palmetto Community Care's operations. Your visits to and your purposes for being at Palmetto Community Care do not constitute a "Business Associate" arrangement under HIPAA, nor do they require that Palmetto Community Care provide you or give you access to health care and financial information about Palmetto Community Care clients (this information is referred to in the HIPAA Privacy and Security Rules as "protected health information" or "PHI"); however, it is possible that you may inadvertently become exposed to PHI in the course of your visit(s) to Palmetto Community Care location(s).

Please sign below to acknowledge that you are not entitled to access any PHI and will take all reasonable efforts while on Palmetto Community Care premises to avoid having access to PHI, and to affirm that in the event that you do obtain access to PHI, that you will not take, use or disclose such PHI for any purpose.

If you have any questions, please contact me.

Sincerely,

Palmetto Community Care, Privacy Officer

So acknowledged and agreed as of the date set forth above:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Name of Organization

**43. APPENDIX I – REQUEST TO AMEND PROTECTED HEALTH INFORMATION**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Please tell us what protected health information you want changed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please tell us why you want this change. You must give a reason:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We must tell you within 60 days if we will change your protected health information as you requested, or tell you that we need more time (up to 30 extra days) to decide.

Tell us where to send you a letter:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Give a phone number so we can call you: \_\_\_\_\_

If we decide to change the protected health information as you requested, we will send the change to any person who received the information before it was changed. Tell us if there are any such persons who need the changed information:

- No. *Initials:*
- Yes. *Please list the persons' names and addresses:*


We will also send the amendment to other persons that we know received the information before it was amended if they relied, or might in the future rely, on the information to your detriment (harm). Do you agree to this?

- No. *Initials:*
- Yes. *Initials:*

We do not have to change your protected health information if:

1. We did not create the information, unless the person who created the information is unavailable to act on your request to change it (for example, the doctor who originally created the information has died). If this exception applies to you, please explain:

---



---

- 2. The information is accurate and complete.
- 3. You do not have the legal right to access the protected health information you want changed.
- 4. The protected health information you want changed is not part of the designated record set. This includes your medical records, billing records, and records containing your protected health information that are used by us to make decisions about you.

Signature of client or representative: \_\_\_\_\_

If representative, give relationship: \_\_\_\_\_

When you have finished filling out this form, please deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you, or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org), or at any Palmetto

Community Care location, or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

**Response to Request to Amend Protected Health Information**

[Date]

[Address]

Dear \_\_\_\_\_:

We received your request to amend (change) your protected health information.

We need more time to process your request. We will send you a response to your request by \_\_\_\_\_ [insert date].

We will make the change as you requested and will notify the persons you designated of the change.

We will make the change that you requested, but only in part, and will notify the person(s) you designated of the change. The part of the change that we will make is:

---

---

---

The part of the change that we will not make is:

---

---

---

We will not make the change as you requested because:

You did not include a reason to support your request.

The information we have is accurate and complete.

We did not create the information you want changed, and you did not give us a reasonable basis to believe that the originator of the information is no longer available to act on your request to change the information.

The information you want changed is not information that you have a right to access.

The information you want changed is not part of the designated record set. This means your medical records, billing records, and records containing your protected health information that are used by us to make decisions about you.

Other \_\_\_\_\_  
\_\_\_\_\_

If we denied your request to change your protected health information, in whole or in part, you may submit a "Statement of Disagreement." If you do not submit a "Statement of Disagreement" you may ask us to include your amendment (change) request and our denial along with all future disclosures of the information that you wanted changed.

If you want to submit a "Statement of Disagreement," you must complete a Statement of Disagreement/Request to Include Amendment Request and Denial with Future Disclosures form. This form may be obtained at any Palmetto Community Care location, or by requesting the form in writing and sending the request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Upon completing of the form, you may send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer, or deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you.

If you want us to include your amendment (change) request and our denial along with future disclosures of the information that you wanted changed, you must complete a Statement of Disagreement/Request to Include Amendment Request and Denial with Future Disclosures form. This form may be obtained at any Palmetto Community Care location or by requesting the form in writing and sending the request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. Upon completing of the form, you may send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer, or deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on our website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org) or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Sincerely,

Palmetto Community Care, Privacy Officer

**Notification of Amendment to Protected Health Information**

**[Date]**

**[Address]**

Dear: \_\_\_\_\_

Name of client: \_\_\_\_\_

Client Address: \_\_\_\_\_

\_\_\_\_\_

The client named above requested an amendment to his or her protected health information ("PHI"). We granted this request, in whole or in part, as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

You must amend the PHI in designated record sets by appending or otherwise providing a link from the PHI to the location of the amendment.

If you have any questions, please contact me by writing to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer or by calling me at (843) 747-2273.

Sincerely,

Palmetto Community Care, Privacy Officer

**Statement of Disagreement/Request to Include  
Amendment Request and Denial with Future Disclosures**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

I understand that Palmetto Community Care denied my request to change my protected health information. My request was dated. \_\_\_\_\_.

Mark only one box below:

I want to file this "Statement of Disagreement." I disagree with the denial because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that Palmetto Community Care may prepare a written rebuttal to my Statement of Disagreement. A "rebuttal" is a statement of why Palmetto Community Care thinks my Statement of Disagreement is wrong. If Palmetto Community Care prepares a written rebuttal, I will receive a copy.

I do not want to file a "Statement of Disagreement," but I want Palmetto Community Care to include my amendment (change) request and the denial along with all future disclosures of the information subject to my amendment request.

Signature of client or representative: \_\_\_\_\_

If representative, give relationship: \_\_\_\_\_

---

Upon completion of this Statement of Disagreement/Request to Include Amendment Request and Denial with Future Disclosures, deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you, or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org) or at any Palmetto Community Care location, or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

**44. APPENDIX J – REQUEST FOR SPECIAL INSTRUCTION ON THE USE OR DISCLOSURE OF PROTECTED HEALTH INFORMATION**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

I understand that Palmetto Community Care may use or disclose my protected health information ("PHI") for the purposes of treatment, payment, and health care operations. Palmetto Community Care may also disclose information to someone involved in my care or the payment for my care, such as a family member or friend. I understand that Palmetto Community Care does not have to agree to my request,

I hereby request a restriction on Palmetto Community Care's use or disclosure of PHI.

The information I want limited is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Except in circumstances in which the disclosure of PHI is to a health plan for the purpose of payment or health care operations, not otherwise required by law, and the PHI relates only to an item or service that has been paid for in full (outside of a health plan) by me or on my behalf.

I want to limit:

- Palmetto Community Care's use of this information.
- Palmetto Community Care's disclosure of this information.
- Both the use and the disclosure of this information.
- I want the limits to apply to the following person/entity (for example, a spouse):  
\_\_\_\_\_

I understand that Palmetto Community Care does not have to agree to my request.

Even if Palmetto Community Care agrees to the restriction, it may share the information anyway in the following circumstances:

- During a medical emergency if the restricted information is needed to provide emergency treatment. However, if the information is disclosed during an emergency, Palmetto Community Care will tell the recipient not to use or disclose it for any other purposes.
- For certain public health activities.
- For reporting abuse, neglect, domestic violence, or other crimes.
- For health agency oversight activities or law enforcement investigations.
- For judicial or administrative proceedings.
- For identifying decedents to coroner and medical examiners or determining a cause of death.
- For organ procurement.
- For certain research activities.
- For workers' compensation programs.
- For uses or disclosures otherwise required by law.

If a special restriction is agreed to, it may be terminated if:

1. I request, or agree to, the termination in writing.
2. I orally agree to the termination and the oral agreement is documented.
3. Palmetto Community Care informs me that it is terminating the agreement. In this case, the termination is only effective for PHI created by Palmetto Community Care or received by Palmetto Community Care after I am notified of the termination.

Signature of client or representative: \_\_\_\_\_

If representative, give relationship: \_\_\_\_\_

---

Upon completion of this Request for Special Restriction on Use or Disclosure of Protected Health Information, deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you, or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org), or at any Palmetto Community Care location, or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

**Response to Request for Special Restriction on  
Use or Disclosure of Protected Health Information**

**[Date]**

**[Address]**

Dear \_\_\_\_\_:

On **[insert date]**, you requested that Palmetto Community Care limit its use or disclosure of protected health information ("PHI").

- Palmetto Community Care agrees to the restriction you requested.
- Palmetto Community Care does not agree to the restriction you requested.
- Other

Even if a restriction is agreed to, the information may be shared anyway in the following circumstances:

- During a medical emergency if the restricted information is needed to provide emergency treatment. However, if the information is disclosed during an emergency, Palmetto Community Care will tell the recipient not to use or disclose it for any other purposes.
- For certain public health activities.
- For reporting abuse, neglect, domestic violence, or other crimes.
- For health agency oversight activities or law enforcement investigations.
- For judicial or administrative proceedings.
- For identifying decedents to coroner and medical examiners or determining a cause of death.

If a special restriction is agreed to, it may be terminated if:

1. You request, or agree to, the termination in writing.
2. You orally agree to the termination and the oral agreement is documented.
3. Palmetto Community Care informs you that it is terminating the agreement. In this case, the termination is only effective for PHI created by Palmetto Community Care or received by Palmetto Community Care after you are notified of the termination.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on our website at **[www.palmettocommunitycare.org](http://www.palmettocommunitycare.org)**, or at any Palmetto

Community Care location, or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Sincerely,

Palmetto Community Care, Privacy Officer

**Termination of Special Restriction**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

The client named above requested a special restriction on the use or disclosure of protected health information ("PHI") on \_\_\_\_\_ (date).

The client hereby requests that the special restriction be terminated.

Signature of client or representative: \_\_\_\_\_

If representative, give relationship: \_\_\_\_\_

The client hereby agrees to the termination of the special restriction.

Signature of client or representative: \_\_\_\_\_

If representative, give relationship: \_\_\_\_\_

The client orally agreed to the termination.

Signature of Palmetto Community Care representative who witnessed the oral agreement:

\_\_\_\_\_

Palmetto Community Care is hereby informing you that the agreement is terminated. The termination is effective only with respect to PHI created or received by Palmetto Community Care after you have received this notification.

Signature of Palmetto Community Care Privacy Officer: \_\_\_\_\_

---

Upon completion of this Termination of Special Restriction form, deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you or send it to Palmetto

Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org), or at any Palmetto Community Care location, or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

**Request for Alternative Communications on Use or Disclosure  
of Protected Health Information**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

I would like to request that the use and disclosure of protected health information ("PHI") be communicated confidentially by alternative means or to an alternative location(s).

I understand that Palmetto Community Care does not have to agree to my request.

I hereby request a use and disclosure of PHI be communicated confidentially by Palmetto Community Care.

The information I want to have communicated confidentially includes the following:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I want the use and disclosure of PHI to be communicated confidentially by the following alternative means:

\_\_\_\_\_

\_\_\_\_\_

Or to the following alternative location(s):

\_\_\_\_\_

\_\_\_\_\_

I understand that Palmetto Community Care does not have to agree to my request.

I understand that Palmetto Community Care has the right to deny my request for confidential communications on a use or disclosure of PHI if the request is found to be unreasonable.

Signature of client or representative:

---

If representative, give relationship:

---

---

Upon completion of this Request for Alternative Communications on Use or Disclosure of Protected Health Information, deliver it to the Palmetto Community Care location(s) which you believe maintains PHI about you, or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at [www.palmettocommunitycare.org](http://www.palmettocommunitycare.org), or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

**Response to Request for Confidential Communications of a  
Use or Disclosure of Protected Health Information**

**[Date]**  
**[Address]**

Dear \_\_\_\_\_:

On **[insert date]**, you requested that Palmetto Community Care communicate a use or disclosure of protected health information (PHI) by alternative means or to an alternative location(s).

- Palmetto Community Care agrees to the confidential communications you requested.
- Palmetto Community Care does not agree to the confidential communications you requested.
- Other \_\_\_\_\_

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on our website at **www.palmettocommunitycare.org** or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

If you believe your privacy rights have been violated, you may file a complaint with Palmetto Community Care. To file a complaint with Palmetto Community Care, write to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Sincerely,  
Palmetto Community Care, Privacy Officer

**45. APPENDIX K – CLIENT PRIVACY COMPLAINT**

Name of Client/Complainant: \_\_\_\_\_

Client's Address: \_\_\_\_\_

Date of Complaint: \_\_\_\_\_

The Client/Complainant has the following complaint(s) regarding the treatment of private information about a Client by Palmetto Community Care (include location where complaint arose and Palmetto Community Care employee(s) involved):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Client: \_\_\_\_\_

---

Upon completion of this Client Privacy Complaint form, you may deliver it to any Palmetto Community Care location or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

For more information about your privacy rights, see the "Palmetto Community Care Notice of Privacy Practices" available on its website at **www.palmettocommunitycare.org** or at any Palmetto Community Care location or by sending a written request to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer.

To file a complaint with Palmetto Community Care, deliver the Client Privacy Complaint form to any Palmetto Community Care location or send it to Palmetto Community Care, 3547 Meeting Street Road, North Charleston, SC 29405, Attention: Privacy Officer. **You will not be penalized for filing a complaint.**

---

**FOR PALMETTO COMMUNITY CARE USE ONLY**

Comments regarding the complaint(s) made by the client:

---

---

---

---

Print Name of Employee Taking Complaint: \_\_\_\_\_

Signature of Employee Taking Complaint: \_\_\_\_\_

## 46. APPENDIX L – PALMETTO COMMUNITY CARE HIPAA AGREEMENT

### USER AGREEMENT

This Data Use Agreement (the “Agreement”) is effective as of \_\_\_\_\_ (the “Agreement Effective Date”) by and between Palmetto Community Care (“Covered Entity”) and \_\_\_\_\_ (“Data User”).

### **RECITALS**

WHEREAS, Covered Entity possesses Individually Identifiable Health Information that is protected under HIPAA (as hereinafter defined) and the HIPAA Regulations (as hereinafter defined), and is permitted to use or disclose such information only in accordance with HIPAA and the HIPAA Regulations;

WHEREAS, Data User performs certain Activities (as hereinafter defined);

WHEREAS, Covered Entity wishes to disclose a Limited Data Set (as hereinafter defined) to Data User for use by Data User in performance of the Activities (as hereinafter defined);

WHEREAS, Covered Entity wishes to ensure that Data User will appropriately safeguard the Limited Data Set in accordance with HIPAA and the HIPAA Regulations; *and*

WHEREAS, Data User agrees to protect the privacy of the Limited Data Set in accordance with the terms and conditions of this Agreement, HIPAA and the HIPAA Regulations;

NOW THEREFORE, Covered Entity and Data User agree as follows:

**Definitions.** The parties agree that the following terms, when used in this Agreement, shall have the following meanings, provided that the terms set forth below shall be deemed to be modified to reflect any changes made to such terms from time to time as defined in HIPAA and the HIPAA Regulations.

“*HIPAA*” means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191.

“*HIPAA Regulations*” means the regulations promulgated under HIPAA by the United States Department of Health and Human Services, including, but not limited to, 45 C.F.R. Part 160 and 45 C.F.R. Part 164.

“*Covered Entity*,” means a health plan (as defined by HIPAA and the HIPAA Regulations), a health care clearinghouse (as defined by HIPAA and the HIPAA Regulations), or a health care provider (as defined by HIPAA and the HIPAA Regulations) who transmits any health information in electronic form in connection with a transaction covered by the HIPAA Regulations.

“*Individually Identifiable Health Information*” means information that is a subset of health information, including demographic information collected from an individual, and; is created or received by a health care provider, health plan, employer, or health care clearinghouse; and relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and that identifies the individual; or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

“*Protected Health Information*” or “*PHI*” means Individually Identifiable Health Information that is transmitted by electronic media; maintained in any medium described in the definition of the term *electronic media* in the HIPAA Regulations; or transmitted or maintained in any other form or medium. Protected Health Information excludes Individually Identifiable Health Information in education records covered by the Family Educational Right and Privacy Act, as amended, 20 U.S.C. § 1232g, and records described at 20 U.S.C. § 1232g(a)(4)(B)(iv).

### **Obligations of Covered Entity.**

*Limited Data Set.* Covered Entity agrees to disclose the following Protected Health Information to Data User: (the "Limited Data Set"). Such Limited Data Set shall not contain any of the following identifiers of the individual who is the subject of the Protected Health Information, or of relatives, employers or household members of the individual: names; postal address information, other than town or city, State, and zip code; telephone numbers; fax numbers; electronic mail addresses; social security numbers; medical record numbers; health plan beneficiary numbers; account numbers; certificate/license numbers; vehicle identifiers and serial numbers, including license plate numbers; device identifiers and serial numbers; Web Universal Resource Locators (URLs); Internet Protocol (IP) address numbers; biometric identifiers, including finger and voice prints; and full face photographic images and any comparable images.

### **Obligations of Data User.**

*Performance of Activities.* Data User shall limit the use or receipt of the Limited Data Set to the following individuals or classes of individuals who need the Limited Data Set for the performance of the Activities:

*Nondisclosure Except As Provided In Agreement.* Data User shall not use or further disclose the Limited Data Set except as permitted or required by this Agreement.

*Use Or Disclosure As If Covered Entity.* Data User may not use or disclose the Limited Data Set in any manner that would violate the requirements of HIPAA or the HIPAA Regulations if Data User were a Covered Entity.

*Identification Of Individual.* Data User may not use the Limited Data Set to identify or contact any individual who is the subject of the PHI from which the Limited Data Set was created.

*Disclosures Required By Law.* Data User shall not, without the prior written consent of Covered Entity, disclose the Limited Data Set on the basis that such disclosure is required by law without notifying Covered Entity so that Covered Entity shall have an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, Data User shall refrain from disclosing the Limited Data Set until Covered Entity has exhausted all alternatives for relief.

*Safeguards.* Data User shall use any and all appropriate safeguards to prevent use or disclosure of the Limited Data Set other than as provided by this Agreement. Data User shall abide by the terms of the Palmetto Community Care HIPAA Privacy and Security Policy.

*Data User's Agents.* Data User shall not disclose the Limited Data Set to any agent or subcontractor of Data User except with the prior written consent of Covered Entity. Data User shall ensure that any agents, including subcontractors, to whom it provides the Limited Data Set agree in writing to be bound by the same restrictions and conditions that apply to Data User with respect to such Limited Data Set.

*Reporting.* Data User shall report to Covered Entity within [\_\_\_\_ hours] of Data User becoming aware of any use or disclosure of the Limited Data Set in violation of this Agreement or applicable law.

#### **Material Breach, Enforcement and Termination.**

*Term.* This Agreement shall be effective as of the Agreement Effective Date, and shall continue until the Agreement is terminated in accordance with the provisions of Section 4.c. [or the Agreement between the parties terminates].

*Covered Entity's Rights of Access and Inspection.* From time to time upon reasonable notice, or upon a reasonable determination by Covered Entity that Data User has breached this Agreement, Covered Entity may inspect the facilities, systems, books and records of Data User to monitor compliance with this Agreement. The fact that Covered Entity inspects, or fails to inspect, or has the right to inspect, Data User's facilities, systems and procedures does not relieve Data User of its responsibility to comply with this Agreement, nor does Covered Entity's (1) failure to detect or (2) detection of, but failure to notify Data User or require Data User's remediation of, any unsatisfactory practices constitute acceptance of such practice or a waiver of Covered Entity's enforcement or termination rights under this Agreement. The parties' respective rights and obligations under this Section 4.b. shall survive termination of the Agreement.

*Termination.* Covered Entity may terminate this Agreement: immediately if Data User is named as a defendant in a criminal proceeding for a violation of HIPAA or the HIPAA Regulations; immediately if a finding or stipulation that Data User has violated any standard or requirement of HIPAA, the HIPAA Regulations, or any other security or privacy laws is made in any administrative or civil proceeding in which Data User has been joined; or pursuant to Sections 4.d.(3) or 5.b. of this Agreement.

*Remedies.* If Covered Entity determines that Data User has breached or violated a material term of this Agreement, Covered Entity may, at its option, pursue any and all of the following remedies: exercise any of its rights of access and inspection under Section 4.b. of this Agreement; take any other reasonable steps that Covered Entity, in its sole discretion, shall deem necessary to cure such breach or end such violation; and/or terminate this Agreement immediately.

*Knowledge of Non-Compliance.* Any non-compliance by Data User with this Agreement or with HIPAA or the HIPAA Regulations automatically will be considered a breach or violation of a material term of this Agreement if Data User knew or reasonably should have known of such non-compliance and failed to immediately take reasonable steps to cure the non-compliance.

*Reporting to United States Department of Health and Human Services.* If Covered Entity's efforts to cure any breach or end any violation are unsuccessful, and if termination of this Agreement is not feasible, Covered Entity shall report Data User's breach or violation to the appropriate enforcement entity, and Data User agrees that it shall not have or make any claim(s), whether at law, in equity, or under this Agreement, against Covered Entity with respect to such report(s).

*Return or Destruction of Records.* Upon termination of this Agreement for any reason, Data User shall return or destroy, as specified by Covered Entity, the Limited Data Set that Data User still maintains in any form and shall retain no copies of such Limited Data Set. If Covered Entity, in its sole discretion, requires that Data User destroy the Limited Data Set, Data User shall certify to Covered Entity that the Limited Data Set has been destroyed. If return or destruction is not feasible, Data User shall inform Covered Entity of the reason it is not feasible and shall continue to extend the protections of this Agreement to such Limited Data Set and limit further use and disclosure of such Limited Data Set to those purposes that make the return or destruction of such Limited Data Set infeasible.]<sup>i</sup>

*Injunctions.* Covered Entity and Data User agree that any violation of the provisions of this Agreement may cause irreparable harm to Covered Entity. Accordingly, in addition to any other remedies available to Covered Entity at law, in equity, or under this Agreement, in the event of any violation by Data User of any of the provisions of this Agreement, or any explicit threat thereof, Covered Entity shall be entitled to an injunction or other decree of specific performance with respect to such violation or explicit threat thereof, without any bond or other security being required and without the necessity of demonstrating actual damages. The parties' respective rights and obligations under this Section 4.h. shall survive termination of the Agreement.

*Indemnification.* Data User shall indemnify, hold harmless and defend Covered Entity from and against any and all claims, losses, liabilities, costs and other expenses resulting from, or relating to, the acts or omissions of Data User in connection with the representations, duties and obligations of Data User under this Agreement. The parties' respective rights and obligations under this Section 4.i. shall survive termination of the Agreement.

#### **Miscellaneous Terms.**

*State Law.* Nothing in this Agreement shall be construed to require Data User to use or disclose the Limited Data Set without a written authorization from an individual who is a subject of the PHI from which the Limited Data Set was created, or written authorization from any other person, where such authorization would be required under state law for such use or disclosure.

*Amendment.* Covered Entity and Data User agree that amendment of this Agreement may be required to ensure that Covered Entity and Data User comply with changes in state and federal laws and regulations relating to the privacy, security, and confidentiality of PHI or the Limited Data Set. Covered Entity may terminate this Agreement upon written notice in the event that Data User does not promptly enter into an amendment that Covered Entity, in its sole discretion, deems sufficient to ensure that Covered Entity will be able to comply with such laws and regulations.

*No Third-Party Beneficiaries.* Nothing express or implied in this Agreement is intended or shall be deemed to confer upon any person other than Covered Entity and Data User, and their respective successors and assigns, any rights, obligations, remedies, or liabilities.

*Ambiguities.* The parties agree that any ambiguity in this Agreement shall be resolved in favor of a meaning that complies and is consistent with applicable law protecting the privacy, security and confidentiality of PHI and the Limited Data Set, including, but not limited to, HIPAA and the HIPAA Regulations.

*Primacy.* To the extent that any provisions of this Agreement conflict with the provisions of any other agreement or understanding between the parties, this Agreement shall control with respect to the subject matter of this Agreement.

*Enforcement.* Palmetto Community Care reserves the right to discipline or terminate an employee for knowingly violating the terms of this agreement.



IN WITNESS WHEREOF, the parties hereto have duly executed this User Agreement as of the Agreement Effective Date.

Palmetto Community Care  
Name of Covered Entity

\_\_\_\_\_  
Signature of Data User

\_\_\_\_\_  
Printed Name of Data User

\_\_\_\_\_  
Signature of Authorized Representative  
At Covered Entity

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Printed Name of Authorized Representative  
At Covered Entity

\_\_\_\_\_  
Printed Name of Authorized Representative

\_\_\_\_\_  
Title of Authorized Representative  
At Covered Entity

\_\_\_\_\_  
Title of Authorized Representative



---

## **47. APPENDIX M – PALMETTO COMMUNITY CARE COMPUTER USER AGREEMENT**

---

Appropriate use of computing resources

[Print Computer Use Agreement](#)

This agreement applies to all users of Palmetto Community Care computer resources, which include computers, computer systems, networks, storage, printers and portable/mobile devices, as well as all methods of access, whether local or remote. Computer resources are provided to support the official business of Palmetto Community Care.

---

Privacy

The Palmetto Community Care monitors its computer resources to detect improper use. Investigation of detected improper use may result in confiscation of the offending device for confirmation and evidence gathering by appropriate authorities.

Use of the Palmetto Community Care computer resources implies consent to review and disclose information and usage upon violation of this agreement or when mandated by law. Violations will result in consequences including, but not limited to, loss of access to computer resources, administrative disciplinary action, and civil and criminal penalties.

---

Responsibilities of Computer Users

- Be aware of, knowledgeable about, and comply with the requirements of the Palmetto Community Care HIPAA Privacy and Security Policy.
- Follow Palmetto Community Care policy regarding the use and protection of accounts and passwords.
- Protect sensitive information and Personal Health Information (PHI).
- Observe licensing and other computer-related contract provisions - particularly those that could expose the Palmetto Community Care to legal costs or damages if not followed.
- Ensure that computers under your control have virus-protection software installed and kept up to date.
- Keep computing systems properly configured and patched to remain compliant with current cyber security requirements. This function may be delegated to local system administrators or central IT staff.
- Participate in cyber security training and awareness.

- Report suspicious activity or known security violations to Palmetto Community Care leadership staff as outlined in the Palmetto Community Care HIPAA Privacy and Security Policy.

---

### Limited Personal Use

There is no inherent right for the personal use of the Palmetto Community Care computer resources however limited use for personal purposes is allowed under the following criteria:

- Involves minimal additional expenses to the Palmetto Community Care.
- Does not interfere with the mission and operations of the Palmetto Community Care or interfere with job performance.
- Does not compromise information security.
- Does not involve illegal activities.
- Does not involve operating a private business or supporting any political enterprise.
- Does not involve activities that could potentially embarrass the Palmetto Community Care.
- Does not give the impression of acting in an official capacity when using computing resources for personal purposes.
- Personal use may be restricted if the above criteria are violated, and personal use of classified computer resources is not permitted.

---

### Appropriate Use

The following examples of personal use of Palmetto Community Care computer resources constitute acceptable activities that meet the criteria specified above.

- Ongoing education, self-training, and professional development.
- Personal correspondence and work on your own resume or those of family members.
- Work for charities and non-political local community groups.
- Good-taste Internet access.
- Limited use of instant messaging or internet-based phone programs.
- Research activities, such as reading newspapers and magazine articles, checking airline prices and schedules and purchasing tickets, browsing sales catalogs, comparing prices of automobiles, obtaining road maps, and checking accounts in credit unions and retirement plans.
- Occasional personal banking such as managing checking and savings accounts online or reviewing your retirement portfolio.

If you are unsure whether certain personal use of Lab computing is appropriate, contact the IT Director.

---

### Inappropriate Use

The following are examples of inappropriate use of Palmetto Community Care computer resources and are prohibited.

- Accessing content that promotes hate language, harassments, or threats.
- Accessing content that ridicules others on the basis of race, creed, religion, sex, disability, nationality, or sexual orientation.
- Creating, downloading, viewing, storing, copying, or transmitting sexually oriented or sexually explicit material (e.g., pornography, child pornography)
- Gambling.
- Working for commercial purposes or supporting for-profit organizations that are outside the scope of your BNL appointment.
- Recommending products or services as being endorsed by Palmetto Community Care.
- Participating in any partisan political activity.
- Misleading someone into believing you are acting in an official capacity.
- Hosting services (such as web sites) that are not of general interest to the Palmetto Community Care.
- Using prohibited peer-to-peer (P2P) file sharing services.
- Circumventing the perimeter firewall in a way that allows an internal machine to be accessed from an external, insecure network without first obtaining approval. Example is forwarding an internal port to an external network.
- Creating and/or forwarding of chain letters and unrequested bulk email (SPAM).
- Using software, such as password-cracking tools and vulnerability scanners, without the consent of the IT Director.
- Intentional use of software or techniques meant to disguise or circumvent the detection of computing activities.

This list should not be considered all-inclusive; please check with the IT Director about your proposed usage if it is not covered.

---

Signature

All users are required to have a signed copy of this document on file with Palmetto Community Care. By signing this form, you are acknowledging that you have read, understand, and agree to comply with the above principles governing the use of Palmetto Community Care computer resources.

---

Printed Name of User

---

Signature of User

---

Date