



Policy Title: Standards and Requirements of HIT Access and Training Policy	DOH Policy Name: Health Homes and Health Information Technology Standards (HIT) DOH Reference Number: NA Effective Date:
Policy Number: BCHN016	QMP Review Date: N/A
Original Date: 11/11/2022 Revision Date: 07/25/2023 Date of Issue: 07/27/2023	Created by: Kali Angell Approved by: Miranda Blakeslee

POLICY STATEMENT

Bassett Community Health Navigation Health Home (BCHNHH) takes an active role in monitoring privacy and security measures for Care Management Agencies (CMA) and other individuals and entities who access Medicaid Confidential Data (MCD). The intent of this policy is to ensure all system users have met appropriate access and identifying credentials, safely and securely access participant’s Personal Health Information (PHI) and Personal Identifying Information (PII). Protecting Health Home participant’s PHI and PII is a major priority for the BCHNHH and its stakeholders.

New York State Law and the Health Insurance Portability and Accountability Act (HIPAA) offer protection of all written and verbal health-related information for individuals who are served by BCHNHH. All member information maintained by BCHNHH and its partners, including that which is contained in Electronic Health Record Systems, is to be protected in accordance with these laws. Procedures for access to, storage of, and disclosure of health-related information will be followed to ensure compliance with the Mental Hygiene Law, New York State HIV/AIDS Confidentiality Law, and HIPAA laws governing PII and PHI.

This policy establishes a trustworthy process, based on national standards, for identity proofing individuals, managing authentication credentials that are tied to an individual’s digital identity, and connecting that digital identity to the individual. This standard covers all systems that require authenticated access. This includes all test, quality control, production and other ad hoc systems.

SCOPE

BCHNHH will ensure processes are in place to gather and document patient consent, and that the privacy and security of patient’s Protected Health Information (PHI) remains secure while facilitating the sharing of such information to provide better quality health care. This policy will outline Privacy and Security Policies and Procedures under 10 N.Y.C.R.R § 300.3 (b) (1) that all BCHNHH staff and CMA must follow.

To ensure secure health information exchange through the Statewide Health Information Network for NY (SHIN-NY) that will improve health care delivery and health outcomes for all New Yorkers. It is the responsibility of BCHNHH to ensure that all staff are fully qualified to utilize any network information source within this all network sharing information systems.



OBJECTIVES

BCHNHH ensures with this policy that all staff are aware of privacy guidelines, and how to ensure the protection of every member's PHI and how BCHNHH will effectively track and monitor access each staff member has and training requirements.

DEFINITIONS

Affirmative Consent

The consent of a patient obtained through the patient's execution of (i) a Level 1 Consent (ii) a Level 2 Consent; (iii) an Alternative Consent; or (iv) a consent that may be relied upon under the *Patient Consent Transition Rules*.

Alternative Consent

A consent form approved as an alternative to a Level 1 consent or Level 2.

Approved Consent

An Affirmative Consent other than the consent relied upon by a participant under the *Patient Consent Transition Rules*.

Authorized User

An individual who has been authorized by a Participant or a Qualified Entity (QE) to access patient information via the SHIN-NY governed by a QE in accordance with these Policies and Procedures.

Breach

The acquisition, access, use, or disclosure of Protected Health Information in a manner not permitted under the HIPAA Privacy Rule, which compromises the security or privacy of the PHI. Unless the participant or QE can demonstrate that there is a low probability that the PHI has been compromised based on a risk assessment.

Community-Based Organization

An organization, which may be a not-for-profit entity or government agency, which has the primary purpose of providing social services such as housing assistance, nutrition assistance, employment assistance, or benefits coordination. A Community-Based Organization may or may not be a covered entity.

Covered Entity

Meaning ascribed to this term in 45 C.F.R. § 160.103 and is thereby bound to comply with the HIPAA Privacy Rule and HIPAA Security Rule. Any facility or institution included in the definition of "hospital" in section 2801 of the Public Health Law, including but not limited to general hospitals, nursing homes, and diagnostic and treatment centers.



Electronic Health Record System

A structured information system inclusive of Member's Personal Identifying Information (PII) and Protected Health Information (PHI), maintained by the BCHNHH, and made available for CMAs and Health Home Network Partners to utilize, as applicable and appropriate to their role in the Health Home. Also referred to as Netsmart Care Manager or Care Management Record System.

Personal Identifying Information (PII)

Refers to information that can be used to distinguish or trace an individual's identity, either alone or when combined with other personal or identifying information that is linked or linkable to a specific individual. PII is not attached to any single category of information or technology. Rather, it requires a case-by-case assessment of the specific risk that an individual can be identified. It is important to recognize that non-PII can become PII whenever additional information is made publicly available in any medium and from any source - that, when combined with other available information, could be used to identify an individual.

Qualified Entity

A Qualified Entity, or Regional Health Information Organization (RHIO), is a regional network where electronic health information is stored and shared.

SHIN-NY (Statewide Health Information Network of New York)

The technical infrastructure (SHIN-NY Enterprise) and the supportive policies and agreements that make possible the electronic exchange of clinical information among QEs, Participants, and other individuals and entities for authorized purposes, including both the infrastructure that allows for exchange among Participants governed by the same QE and the infrastructure operated by the State Designated Entity that allows for exchange between different QEs. The goals of the SHIN-NY are to improve the quality, coordination and efficiency of patient care, reduce medical errors and carry out public health and health oversight activities, while protecting patient privacy and ensuring data security.

ROLES AND RESPONSIBILITIES

Health Home Administration Roles

It is the responsibility of the Health Home to monitor and track staff access within programs and to what extent their access is granted for. BCHNHH will track any trainings that all staff with access are required to take and if they are overdue and will send email reminders with trainings that are upcoming as requirements to their roles.

CMA Roles

It is the role of all CMAs to ensure that all staff fully understand their role when it comes to accessing members Electronic Health Record (EHR), the limitations each staff member has in regards to accessing and sharing member's information. Trainings should be fully up to date annually and reported to the HH. CMAs should ensure that all staff requesting access to EHRs have signed and submitted.



PROCEDURES

Standard Practices

- BCHNHH has structured interoperable Health Information Technology (HIT) systems, policies, procedures, and practices to support the creation, documentation, execution, and ongoing management of a plan of care for every patient within all CMAs.
- BCHNHH uses an Electronic Health Record (EHR) system that qualifies under the Meaningful Use Provisions of the HITECH Act, which allows the Patient's Health Information (PHI) and Plan of Care to be accessible to the interdisciplinary team of providers.
- BCHNHH will comply with the current and future version of the Statewide Policy Guidance which includes common information policies, standards and technical approaches governing health information exchange.
- BCHNHH commits to joining regional health information networks or qualified health IT entities for data exchange and includes a commitment to share information with all providers participating in a care plan. RHIOs/QE provides policy and technical services required for health information exchange through the Statewide Health Information Network of New York (SHIN-NY).
- BCHNHH supports the use of evidence based clinical decision-making tools, consensus guidelines, and best practices to achieve optimal outcomes and cost avoidance. One example of such a tool is PSYCKES.

Authorization

- BCHNHH and partnering CMAs are to determine whether a particular individual within a Participant has the right to Access PHI. Authorization is role-based. They are designed to limit exchange of information to the minimum number of individuals necessary for accomplishing the intended purpose.
- Only Authorized Users access information, in accordance with patient consent, and limiting their Access to specified information that is relevant to a patient's treatment. This is designed to reduce unauthorized Access and ensure information is used for authorized purposes.
- BCHNHH and CMA must establish and implement policies and procedures that:
 - Establish categories of Authorized Users.
 - Define the purposes for which Authorized Users in the categories may Access PHI.
 - Define the types of PHI that Authorized Users within such categories may access (example, demographic data only, or clinical data only)
- BCHNHH and CMA's will verify the identity of an individual who has been authorized and is seeking to access information. Via proof of identity.

Health Home Technology

- BCHNHH must make use of available Health Information Technology (HIT) and access data through an available Regional Health Information Organization (RHIO)/Qualified Entity to obtain and share information for providing effective services in compliance with NYS DOH HH Statewide Policy Guidance.
- BCHNHH must utilize available Health Information Technology and a Care Management Record System which:
 - Qualifies under the Meaningful Use provisions of the HITECH Act.



- Allows the member's health information and Plan of Care to be accessible to the interdisciplinary team of providers.
- Facilitate interdisciplinary collaboration among all providers, the member, family, care givers, and local supports.
- Allows for population management and identification of gaps in care including preventive services.
- BCHNHH will periodically review NYS DOH Statewide Policy Guidance and Bassett CHN Policies and Procedures to ensure compliance and update HIT and Care Management Record Systems as necessary.

Data Use Agreement (DUA) /HIT Access

- BCHNHH will maintain current compliance with all NYS DOH policy guidance for Medicaid HH Providers.
- BCHNHH will maintain a Data Use Agreement (DUA) with the DOH and will establish and maintain subcontractor agreements with any network partners receiving member lists prior to members consenting to HH services.
- The DOH requires that all HHs submit and receive acceptance of the Medicaid Confidential Data Use Agreement from the department of Health Insurance Programs, Division of Operations and Systems, Security and Privacy Bureau in order to access Medicaid Confidential Data (MCD). Completed DUAs should be sent to: doh.sm.Medicaid.Data.Exchange@health.ny.gov
- BCHNHH will provide the DOH an updated organizational partner list upon initial designation and on an ongoing basis as needed.
- If any changes to the original approved HH Application and Designation Letter are needed a HH Notification Letter attesting to the applicable revision(s) must be completed, signed by the BCHNHH, and submitted to the DOH for review.

Access

- Each user will obtain a unique user name and password and must comply with the following minimum standards:
 - Authorized users shall be authenticated with a government issue photo ID.
 - Passwords shall meet the strength requirements set forth by the Health Home.
 - Group or temporary user names shall be prohibited.
 - Authorized users shall be required to change their passwords per requirements set forth by the Health Home and when prompted within the system.
 - Authorized users shall be prohibited from sharing their user names, passwords, or other authentication tools (i.e. Tokens), with others and from using the user names, passwords or other authentication tools of others.
- Each Authorized User must sign a certification that they have received training on the proper use of Health Information Technology (HIT) systems uses, and the accessing of PHI and will comply with policies and procedures. Such certification may be made on a paper form or electronically and shall be retained by the HH or their CMA for at least **six** years.

QEs shall ensure that if the access of a Participant is terminated, this is completed within one business day of termination of a Participant's Participation Agreement with the QE.



COMMUNICATION/TRAINING/IMPLEMENTATION

BCHNHH shall implement, either directly or through Participants, minimum training requirements for educating individuals about the policies and procedures for Accessing PHI. These trainings shall be tailored to reflect the purposes for which an Authorized User is authorized to Access PHI through Health Information Exchanges provided by the Health Home or NYS Department of Health.

Quality Management & Performance Improvement

BCHNH will monitor staffs access and ensure all staff meet all requirements and monitor access levels. Audits will be completed to quarterly to ensure that only the appropriate authorized participants have appropriate access. Any suspicion of a breach must be reported to BCHNHH Administration within 48 hours of identification for Admin to investigate immediately.

RELATED FORMS

- *BCHN System Access Request Form*
- *BCHN System Access Termination Form*
- *BCHN Computer Account Request Form*
- *Bassett Medical Center Confidentiality Remote Access Agreement*
- *BCHN Remote Access Request for Bassett Employees Only*