



# Elson S. Floyd College of Medicine

WASHINGTON STATE UNIVERSITY

Policy Title: University Speech and Hearing Clinic HIPAA and Privacy

Policy Number: EC.00.06.200414

Applies to: WSU Elson S. Floyd College of Medicine faculty, staff, and students participating in the WSU Health Sciences Spokane Hearing and Speech Clinic operated and managed by Eastern Washington University.

Date: 04/14/2020

## 1.0 Policy Statement:

It is WSU College of Medicine's policy that faculty, staff and students assigned to or involved with the University Speech and Hearing Clinic ("Clinic") protect the confidentiality, integrity, and availability of protected health information (PHI) and health care information in accordance with the Clinic's privacy/security policies, and federal and state laws.

## 2.0 Definitions

**HIPAA:** The Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, was enacted on August 21, 1996. Sections 261 through 264 of HIPAA require the Secretary of HHS to publicize standards for the electronic exchange, privacy, and security of health information.

**Protected Health Information (PHI):** 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; that identifies the individual, or concerning which there is a reasonable basis to believe the information can to identify the individual. *See* [45 CFR § 160.103](#).

**EWU Workforce Member:** EWU, as a hybrid entity, has operational and managerial responsibility, including compliance oversight for the University Speech and Hearing Clinic and its workforce members. *See* [EWU Policy 401-06](#) states that WSU College of Medicine students who are part of EWU's Communication Sciences and Disorders program are EWU workforce members while participating in the training program at the Clinic. WSU College of Medicine and EWU faculty, staff, who are licensed health care providers, render health care services for the Clinic's patients and provide supervision and educational direction to both WSU College of Medicine and EWU students. EWU qualifies WSU College of Medicine faculty and staff working within the Clinic to be the Clinic's workforce members.

**Washington's Uniform Health Care Information Act, RCW 70.02:** Washington's state law that governs the use, access, and disclosure of patients' health care information, whether oral or recorded in any form or medium. The law applies to licensed health care providers, an individual who assists a health care provider in the delivery of health care, or an agent and employee of a health care provider. *See* [RCW 70.02.020](#).

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**3.0 Responsibility**  
Office of Compliance, Compliance Specialist

**4.0 Procedures**

## **Verification**

WSU College of Medicine faculty, staff, and students participating in the Clinic must adhere to any Clinic privacy and security policies and undertake and complete any compliance education provided by the Clinic. WSU College of Medicine faculty, staff, and students are required to complete and sign privacy, confidentiality, and data security agreements and complete triennial HIPAA training. WSU College of Medicine faculty, staff, and students must maintain the confidentiality of the Clinic's PHI and limit the disclosure of PHI in accordance with the Clinic's policy and the law. WSU College of Medicine faculty, staff, and students must not use, access, or disclose PHI without the patient's written authorization unless permitted by law. WSU College of Medicine faculty, staff, and students must undertake and successfully complete basic and specific and/or supplemental clinical HIPAA training appropriate to their role in the clinic's function.

In accordance with the HIPAA Privacy Rule, WSU College of Medicine trains Clinic faculty, staff, and students at an appropriate level to fulfill their roles and responsibilities. WSU College of Medicine provides participating faculty, staff, and students with triennial training regarding HIPAA and state regulatory requirements. Clinic administrators function as a member of the Clinic's workforce and receive HIPAA training to help assure compliance with employees and students as necessary and appropriate for them to carry out their responsibilities at the Clinic. Faculty, staff, and students must complete training triennially. Participating WSU College of Medicine students must undergo data security and privacy (HIPAA) training through WSU College of Medicine's electronic education and document management system.

## **Monitoring**

EWU Policy 401-06 prohibits any storage of PHI outside the EWU information technology (IT) environment. Email that contains PHI is prohibited to limit unsecured transmission of PHI. EWU stores all PHI within their IT environment. WSU College of Medicine policy prohibits any maintenance or storage of Clinic related PHI with the WSU College of Medicine or WSU IT or physical environments. Under the HIPAA Security Rule, WSU College of Medicine faculty, staff, and students must comply with all safeguards put in place to protect PHI.

WSU College of Medicine faculty, staff, and students must not have access to PHI in a clinical setting unless they have completed the WSU College of Medicine's HIPAA training. The WSU College of Medicine Office of Compliance must perform all audits of faculty, staff, and student training on an appropriate basis or when otherwise deemed necessary. WSU College of Medicine Students must remain in compliance with this standard to satisfy degree requirements. All documentation of data security and privacy (HIPAA) training for students is managed in CastleBranch. The Office of Talent Recognition & Enhancement manages faculty and staff HIPAA training documentation. In accordance with the law, WSU College of Medicine retains training documentation for six years.

## **Reporting**

WSU College of Medicine faculty, staff, and students participating in the Clinic must immediately report any known or suspected security incidents or breaches of PHI to the Clinic's Privacy Officer and WSU College of Medicine's Office of Compliance. Disclosure of any known or suspected security incident to the WSU College of Medicine's Office of Compliance should not include

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disclosure of any PHI. WSU College of Medicine faculty, staff, and students must report any attempted or successful unauthorized access, use, disclosure, modification, or destruction of PHI within EWU's information system operations. Failure to comply with WSU College of Medicine or EWU HIPAA policies may result in, among other things, appropriate corrective action including termination or appropriate discipline in accordance with WSU policy or loss of your assignment/appointment in the Clinic in accordance with the Clinic's corrective action policy.

WSU College of Medicine Office of Compliance may assist the Clinic's Privacy Officer where appropriate and necessary in investigating potential or actual privacy or security violations at the Clinic, but only to the extent, there is no exchange or access of PHI. Where appropriate or necessary, the Office of Compliance has the right to involve necessary stakeholders to assist with the investigation, such as the WSU College of Medicine Information Security Office, the Attorney General's Office, or administrative areas as appropriate. Stakeholders will need to be part of WSU's health care component or take all necessary action to comply with HIPAA if there will be access to PHI. In the event any other WSU College of Medicine department receives the notification of a potential HIPAA violation or violation of this policy, the department promptly notifies the Office of Compliance. Any investigations and/or inquiries from EWU must be handled promptly by the WSU College of Medicine Office of Compliance.

WSU College of Medicine faculty, staff, and students participating in the Clinic are required to cooperate in such investigations and promptly respond to inquiries from WSU College of Medicine Office of Compliance and to any other such requests from administrative areas assisting with or coordinating the investigation. Failure to cooperate with an investigation concerning a privacy or security breach, or a violation of this policy, may result in corrective action per the Clinic's policy or discipline in accordance with the WSU College of Medicine policy.

WSU College of Medicine faculty, staff, and students participating in the Clinic may disclose PHI to make a whistleblower complaint to a health oversight agency, a public health authority authorized to investigate the conduct in question or a healthcare accreditation organization. Intimidation, retaliation, and/or discrimination against any individual for exercising an individual's rights under applicable privacy laws, including, but not limited to, filing a complaint regarding a privacy practice, is strictly prohibited.

Violations of this policy and EWU Policy 401-06 regarding state and federal law may result in appropriate disciplinary and/or other corrective action. WSU College of Medicine's existing policies and procedures determine corrective measures regarding investigations and determinations. Students in violation of this policy may be subject to disciplinary action under the applicable student policies and procedures. Individuals who violate HIPAA or other privacy laws may be subject to civil and criminal penalties as provided by state and federal law.

## **5.0 Related Policies**

[EWU Policy 401-06 Protected Health Information](#)

[45 CFR § 160.103](#)

[RCW 70.02.020](#)

## **6.0 Key Search Words**

Hearing and Speech Clinic, Protected Health Information, Privacy, Security, Health Insurance Portability and Accountability Act
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## 7.0 **Revision/Review History**

Date of Original Approval	Policy number	Review/Revision
04/14/2020	EC.00.06.200414	

**Responsible Office:** Office of Compliance

**Policy Contact:** Compliance Specialist

**Supersedes:** N/A