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Author Scott Remmich
Area Corporate Compliance
Applicability Aspirus System Wide
References Courier, NEO Contracts, Orientation, System Administration, System Wide

Confidentiality Policy (System)

PURPOSE:

TO ESTABLISH A POLICY TO PROTECT, ENSURE AND MAINTAIN THE RIGHT OF EACH PATIENT TO CONFIDENTIALITY WITH REGARDS TO HIS/HER PROTECTED HEALTH INFORMATION.

TO DEFINE THE LEGAL REQUIREMENTS OF CONFIDENTIALITY FOR ASPIRUS, INC. STAFF, MEDICAL STAFF AND OTHERS.

AREAS AFFECTED/STAKEHOLDER(S):

Aspirus, Inc.	Volunteers
Medical Staff	Students
Allied Health Practitioners	

DEFINITION:

Protected health information (PHI) is defined as "individually identifiable health information" that is transmitted electronically, maintained electronically or transmitted or maintained in any other form or medium. This broad definition includes electronic, magnetic, optical and paper records, as well as oral statements.

Individually identifiable health information is information, including demographic data, that relates to:

- the individual's past, present or future physical or mental health or condition,
- the provision of health care to the individual, or
- the past, present or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, social security number).

POLICY:

- I. All protected health information will remain confidential and will not be released without authorization by the patient or person authorized by the patient, except in specific circumstances designated by law.
- II. Only individuals authorized by the patient or the patient's legal representative are permitted to access that patient's medical record. Relatives, or other individuals assisting in a patient's care, may receive patient health information (PHI) to the extent necessary for them to care for the patient's needs.
- III. The following protected health information may be disclosed for directory purposes to the clergy and to other persons who ask for the individual, including minors, by first and last name, unless the patient or the patient's legal representative has opted for privacy patient status and/or excluded his/her name from the Clergy List:
 - the individual's name;
 - the individual's location in the facility;
 - the individual's condition described in general one-word terms, i.e. undetermined, good, fair, serious or critical (see Release of Information to News Media, policy #3873; and
 - the individual's religious affiliation (to members of the clergy only).
- IV. All Board of Directors, Aspirus Employees and Medical Staff members and others affiliated with Aspirus, Inc., such as volunteers and students, have a duty of confidentiality. All Aspirus employees and volunteers will complete the "Agreement to Maintain Confidentiality of Records" as a condition of employment or service.
- V. A patient's medical history, condition, prognosis, or any aspect of a patient's protected health information must not be accessed for personal use without proper authorization or the subject of casual conversation or correspondence within or outside all Aspirus facilities. Physicians, employees, and volunteers must be particularly aware of the harmful effects of discussing a patient's health record in a cafeteria/breakroom, corridors, elevators, rest rooms, clinic waiting rooms, or any other location where conversation might be overheard.
- VI. Aspirus staff will access only the minimum necessary protected health information needed to carry out their professional responsibilities. This does not apply to treatment.
- VII. Employees are not authorized to access their own medical records using Epic or any other electronic medical record system at their entity. This includes accessing medical records of family, friends, or others with whom there is no treatment, payment, or operational purpose. Further, employees are prohibited from asking a co-worker or manager to access information on behalf of the employee. Employees should contact the Health Information Management

department or sign up for the online patient portal at their entity for access to their medical records.

- VIII. Aspirus, Inc. staff and medical staff will collaborate and follow through on a decision to disclose PHI to protect the patient or the community from imminent and substantial danger or to avert a serious threat to health or safety.
- IX. Aspirus staff and physicians abide by State of Wisconsin statutes regarding the mandatory reporting of child abuse and neglect, gunshots, burns, and wounds reasonably believed to have occurred as a result of a crime.
- X. Confidentiality of records is maintained in accordance with the state mental health law for adults and minors admitted to the hospital or treated for the primary purpose of mental illness, developmental disability, and alcohol dependency. Aspirus, Inc. also abides by the additional requirements associated with HIV test results.
- XI. Person willfully violating confidentiality requirements are subject to disciplinary action as indicated by other Aspirus policies, medical staff bylaws, rules and regulations, and State law (See the Code of Conduct - Aspirus System-wide Policy).

REFERENCE:

Health Insurance Portability and Accountability Act of 1996 ("HIP") Pub. L.104-191.

WISCONSIN STATUTES

51.30 Mental Health Records

146.82 & 146.83 Confidentiality of an access to patient health care records.

905.04 Rule of evidence.

252.15 HIV status

48.981 Reports of child abuse

255.40 Reporting of wounds and burn injuries

Aspirus Wausau Hospital Policy, #3835 "Abuse and Neglect--Reporting of.

Medical Records Policy #1412, "Confidentiality of Records - Mental Health and Drug Dependency"

ONBASE POLICY ID: 3867

Attachments

[A: Confidentiality of Information](#)

[Employee Agreement.pdf](#)

Approval Signatures

Step Description	Approver	Date
Approver	Scott Remmich: CHIEF COMPLIANCE OFFICER	12/2021
Policy Author	Scott Remmich: CHIEF COMPLIANCE OFFICER	12/2021

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