



Non-Member PHI Inquiry Procedure (BEN-P008)

The online version of this procedure is official. Therefore, all printed versions of this document are unofficial copies.

1.0 SCOPE:

- 1.1 This procedure describes the process in which Risk Management deals with contacts made in person or by phone with inquiries relating to PHI and HIPAA for the Washoe County School District for a member's spouse, relative, friend or advocacy group.

2.0 RESPONSIBILITY:

- 2.1 Risk Manager

3.0 APPROVAL AUTHORITY:

(Approval signature on file)

Signature

Date

- 3.1 Risk Management Senior Technician

4.0 DEFINITIONS:

- 4.1 RM – Risk Management
- 4.2 PHI – Protected Health Information
- 4.3 HIPAA – Health Insurance Portability and Accountability Act
- 4.4 EOB – Explanation of Benefits

5.0 PROCEDURE:

Contact made by Phone or in Person

- 5.1 A member's spouse, relative, friend, provider, plan sponsor (Washoe County School District) or advocacy group contacts the Benefits Office.

- 5.1.1 Risk Management Technician, Program Technician, or Risk Manager must verify the identity of the member by asking the member for his/her:

5.1.1.1 Full Name

5.1.1.2 Date of Birth and Social Security Number along with

5.1.1.3 One additional piece of information such as address or phone number.

5.1.1.4 Verbal consent must be obtained at the time of each contact.

5.1.1.4.1 Neither verbal consent nor written authorization is required if the parent is requesting information and the member is a dependent under the age of 18.

5.1.1.5 Document name of contact caller.

- 5.1.2 Once the member gives verbal consent to the RM Technician, Program Technician, or Risk Manager he/she:

WASHOE COUNTY SCHOOL DISTRICT

Non-Member PHI Inquiry Procedure (BEN-P008)

- 5.1.2.1 **Can** release any enrollment and claim information and answer any questions pertaining to the member coverage and will disclose only the minimum amount of information necessary to satisfy the request
- 5.1.2.2 **Cannot** release information related to diagnosis, unless the caller initiates specifics.
- 5.1.3 The member does not have to remain on the line during the conversation, or even be at the same place as the contact.
- 5.1.4 RM technician, Program Technician or Risk Manager may obtain the member's consent to speak with the contact via another line or three-way calling.
- 5.2 If the member is not available to verbally consent for RM staff to speak with the caller and there is no release of information on file, the following must take place.
 - 5.2.1 RM staff advises the caller that information may not be given out without the member's consent.
 - 5.2.2 The caller may call back at a later time with the member present to give consent or
 - 5.2.3 The member could provide written authorization of information authorizing caller to obtain information about his or her record.
 - 5.2.4 The RM staff **cannot** release any claim information or answer any questions pertaining to the member.
 - 5.2.5 The RM staff **can** advise the contact that the information is protected under HIPAA and the Federal Privacy Act of 1974 and it is for the member's protection that we will not release the information.
 - 5.2.6 The RM staff can release general benefit and network information.
- 5.3 If there is written authorization on file that allows the RM staff to give member-specific information to the caller, the caller must provide the member's:
 - 5.3.1 Full Name
 - 5.3.2 Date of Birth and Social Security Number along with
 - 5.3.3 One additional piece of information such as address or phone number.
 - 5.3.4 The RM staff must ensure that the caller is the authorized individual, and within the authorized time period.
 - 5.3.5 Written authorization must include the end date or specifies that this is to be in place for the duration of the policy.
 - 5.3.6 The RM staff **cannot** discuss information related to diagnosis.
 - 5.3.7 The RM staff **can** only discuss information authorized by the written authorization.
- 5.4 If the previous written authorization of the information specified by the member has expired, the caller must provide see 5.3.1 – 5.3.3 above.

WASHOE COUNTY SCHOOL DISTRICT

Non-Member PHI Inquiry Procedure (BEN-P008)

- 5.4.1 The RM staff must advise the caller that the written authorization has expired. RM staff can obtain the member's verbal consent or request a new written authorization.
- 5.4.2 RM staff **cannot** release any claim information or answer any questions pertaining to the member, unless RM staff has received a verbal or new written authorization of information.
- 5.4.3 RM staff **can** advise the caller that the information is protected under HIPAA and the Federal Privacy Act of 1974 and it is for the member's protection that we will not release the information.
- 5.4.4 The RM staff can release general benefit and network information
- 5.5 If the member is not available to verbally consent for the RM staff to speak with the caller and there is not written authorization of information naming the caller on file, however the caller has the member's
- Full Name
 - Date of Birth and Social Security Number and
 - Information on a specific claim with the service date

The RM staff will suggest that the caller have the member forward written authorization of information, if he/she anticipates any need for future telephone contacts.

5.5.1 The RM staff can release information **only**

5.5.1.1 On whether or not the claim has been received or processed and

5.5.1.2 The date the member can expect to receive the EOB.

6.0 ASSOCIATED DOCUMENTS:

6.1 Member PHI Inquiry Procedure – BEN-P009

6.2 WCSD Group Health Plan Log of PHI Inquiries – BEN-F010)

7.0 RECORD RETENTION TABLE:

<u>Identification</u>	<u>Storage</u>	<u>Retention</u>	<u>Disposition</u>	<u>Protection</u>
CDS database and Bi-Tech System	Electronic	99 years	Discard as desired	Electronic
PHI Inquiries Log	Risk Manager Office – HIPAA Privacy Guide	99 years	Discard as desired	Standard file cabinet in secured office

WASHOE COUNTY SCHOOL DISTRICT
Non-Member PHI Inquiry Procedure (BEN-P008)

8.0 REVISION HISTORY:

<u>Date:</u>	<u>Rev.</u>	<u>Description of Revision:</u>
6/2/05	A	Initial release
5/15/07	B	Corrected typographical errors in 1.1, 5.1.4, and 5.2; renamed identified form 6.2; updated Record Retention Table.

* * * E n d o f p r o c e d u r e * * *