



Member PHI Inquiry Procedure (BEN-P009)

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, by phone, or by e-mail with inquiries relating to PHI and HIPAA for the Washoe County School District from a member.

2.0 RESPONSIBILITY:

- 2.1 Risk Manager

3.0 APPROVAL AUTHORITY:

- 3.1 Risk Management Senior Technician

(Approval signature on file)

Signature

Date

4.0 DEFINITIONS:

- 4.1 RM – Risk Management
- 4.2 PHI – Protected Health Information
- 4.3 HIPAA – Health Insurance Portability and Accountability Act

5.0 PROCEDURE:

Contact made by Phone or in Person

- 5.1 A member contacts the Risk Management Office by phone or in person.
 - 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; and
 - 5.1.1.4 Verbal consent must be obtained at the time of each contact.
 - 5.1.2 Once the member gives verbal consent to the RM Technician, Program Technician, or Risk Manager he/she:
 - 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.
 - 5.1.3 The member can provide written authorization of information authorizing a spouse, relative, and friend or advocacy group to obtain information about his or her record.

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5.1.4 Written authorization must include the end date or specifies that this is to be in place for the duration of the policy.

5.1.5 The RM staff can only discuss information authorized by the written authorization and will disclose only the minimum amount of information necessary to satisfy the request.

Contact made by E-mail

5.2 A member contacts the Risk Management Office by e-mail.

5.2.1 If the e-mail has all required information in the body of the text, RM will only address issues where the response does not include any PHI.

5.2.1.1 RM will respond with only claim status data.

5.2.2 If the member wants additional information, the member will need to contact RM by phone or fax. RM will then follow the above step 5.1-5.1.5.

5.2.3 The e-mail will be printed, stamped "confidential" and will be accessible to RM until resolution and maintained in a confidential file, deleted from the system, or shredded as necessary.

6.0 ASSOCIATED DOCUMENTS:

6.1 Member Non-Member PHI Inquiry Procedure – BEN-P008

6.2 Printed E-mail

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
E-Mails	Locked RM office	Until resolution	Discard as desired	Standard file cabinet in secured office

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 spelling of "contact" in 5.2.2; and updated Record Retention Table

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