

Access Controls for Protected Health Information Policy

Policy 5004

Purpose:

The purpose of this policy is to define how to access Bullhook Community Health Center (BCHC) confidential or internal use information, Protected Health Information (PHI), BCHC information systems, facilities, devices and networks will be limited to those individuals who need access in order to perform their job duties. Any such access shall be subject to reasonable security safeguards.

Scope:

This policy applies to all BCHC workforce members (Employees, interns, students, consultants, contractors, subcontractors), and others who may have access to BCHC confidential or internal use information and PHI, including information that is used for compliance activities, product development, Help Desk, data aggregation, claims processing, BCHC member support, and quality improvement.

Policy:

It is the policy of BCHC to protect the confidentiality, integrity and availability of patient information belonging to our patients. It is also BCHC's policy to protect confidential business information and BCHC property. BCHC workforce members and any other individuals that have an appropriate need to access BCHC information, information systems, facilities, devices or networks in connection with their job duties and functions will be granted appropriate access.

It is also the policy of BCHC to utilize Active Directory and/or Application specific Security Groups to manage access to systems containing PHI, utilizing the principle of least privilege in assigning rights and permissions to systems. Administrators will add access as authorized by the manager/supervisor on the employee BCHC request form .

Review of employee access and assignment will be conducted semi-annually.

Notification to Systems Team:

The Executive Assistant may initiate the systems and network access process. The Executive Assistant will send the request for information systems and telephone access request to the IT staff for completion. Access and equipment will be granted based on the role the individual will be performing at BCHC and their need to know the information and that access is based on the CEO's request.

Access Controls:

Access to information, information systems, processes, facilities, devices or networks is subject to BCHC policies relating to confidentiality, integrity and availability of BCHC information. Any such access to BCHC information will be consistent with State and Federal laws, rules, regulations, accreditation standards and other BCHC policies. Workforce members and any other individuals that are permitted this access shall take reasonable precautions to prevent the disclosure of such information, unauthorized use of systems, processes, facilities, devices and networks.

All users will be responsible to access only those systems and devices that have been authorized for their use. Any use of BCHC information and/or systems, facilities, networks or devices not specifically authorized by BCHC is prohibited. Employees must lock their work stations when they walk away.

Termination of Employment:

Upon termination of employment, internship or contract, the CEO will notify the appropriate manager and IT staff of the termination. This notification should be in writing. The CEO, Manager and Executive Assistant will ensure the employee is removed from the information system access and they will deactivate their proximity card (key card). BCHC laptops, proximity cards, keys, company owned cell/smart phones, iPads, telephones, etc. must be returned to the individual's manager on the last day of employment.

Data Center Access:

Access to the BCHC data center and servers will be granted by BCHC Executive Staff. Access to the data center is allowed by the use of a key, and entrance being granted by Executive Staff who requires visitor sign-in.

Reporting improper use of Information and Information Systems:

Workforce members and any other individual with access to BCHC information or information systems, facilities, devices and networks are required to immediately notify a BCHC Compliancy Officer and the CEO in the event that they become aware that BCHC information, information systems, facilities, devices or networks are being used improperly, in an unauthorized manner, and/or if that use has resulted in an unauthorized or improper disclosure of confidential information. Please see the Notification of Breach of Unsecured Protected Health Information, policy 5006 for additional information pertaining to unauthorized or improper disclosures of PHI.

Lyndie Hall Date: 3/9/2020

CHIEF EXECUTIVE OFFICER

Deli K. Rhuris Date: 3/9/2020

CHAIR, BOARD OF DIRECTORS

Date first adopted	6/24/2015 QI Committee
Date revised/QI Board Approval	06/24/2015, 02/26/2020
New date adopted/Board of Directors approval	07/13/2015, 03/09/2020