

## SHIBA's confidentiality requirements

**What is confidentiality:** Trusting someone, especially when sharing private matters. Firm belief, trust or reliance that another person will not disclose private and personal matters to unauthorized people.

**Why it's important:** Confidentiality is about building and maintaining trust. It frees clients to share personal information that counselors need to do their work. It shows respect for and helps protect clients. It builds SHIBA's reputation as a trusted, reliable resource. It helps prevent costly privacy and security breaches (e.g., legal fees and fines). Federal and state laws authorize fines for certain privacy and security breaches.

**VRPM Confidentiality Policy:** Policy 3.94 - SHIBA volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information involves a member of staff, a volunteer, a beneficiary or other person, or involves the overall business of SHIBA. Unique ID users are required to complete privacy and confidentiality training and re-attest the confidentiality agreement annually.

What is HIPAA? Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy rule: Federal law that protects all "individually identifiable health information" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. It defines, establishes permitted use and disclosure of, and regulates uses of Protected Health Information (PHI).

Who must comply?: "Covered Entities" and their business associates including health plans, health care providers, health care clearinghouses and business associates.

**How does HIPAA apply to SHIBA?:** Local co-sponsors may be covered entities if they provide health care services or contract with those who do. Most third parties SHIBA interacts with are covered entities (i.e., Medicare, Medicare Advantage plans, hospitals, doctor offices, 1-800-MEDICARE, etc.).

There are a variety of individually identifiable health information rules, privacy rule protections, required disclosures, permitted disclosures, and privacy rule protections associated with HIPPA. State privacy protection laws apply to individuals and

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organizations, including non-profit agencies and define Personal Protected Information (PPI).

**NOTE:** Technically, SHIBA is not subject to HIPAA, however, confidentiality applies to volunteer's work and HIPAA applies to the work of some of our partners.

What are PII, PHI and PPI and why are these important?: In conducting SHIBA work, we collect both Personally Identifiable Information (PII) and PHI. The biggest differences between PII and PHI are:

- PII is ANY potentially identifying information either on its own or when combined with other information. It's information that can be used to trace an individual's identity, such as their name, social security number, biometric records, etc., alone or when combined with other personal or identifying information that is linked or linkable to a specific individual, such as a data and place of birth, mother's maiden name, etc.
- **PHI is HEALTH information and specifically identifies a person.** It includes many common identifiers (e.g., name, address, birth date, Social Security Number) when they can be associated with the health information listed. This is sometimes entered in a notes/comment field.
- **PPI = PII and PHI.** PPI is a beneficiary's first name and last name or first initial and last name in combination with at least one from the following:
  - Social Security number
  - Driver's license number or state-issued identification card number
  - Financial account number or credit or debit card number, with or without any required security code, access code, personal identification number or password, that would permit access to a resident's financial account

Keep in mind that PPI is the combination of PII and PHI, so there could be more personal identifiers than just those listed above, such as Medicare ID number, date of birth, account numbers or health record information. PPI does not, however, include information that is lawfully obtained from federal, state, or local government records that are available to the general public.

What is a security breach?: A security violation that occurs when unauthorized people gain access to confidential, private and personally identifiable information by stealing, overhearing, dumpster diving, reading documents, extracting data and any other means.

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- Do not disclose any information you collect or obtain through your SHIBA work other than when it's clearly approved by an authorized SHIBA representative.
- There is zero tolerance for breaching confidentiality in connection with any SHIBA work. (VRPM Policy 3.94)
- Immediately notify your supervisor if you misplace, lose or someone stole information, files or data so SHIBA can appropriately notify the affected clients and authorities, and can institute the appropriate future safeguards. (VRPM Policies 3.94, 4.3 and Volunteer Handbook pages 47-48).

**Confidentiality best practices:** Use private spaces, use computer screens with covers, store confidential documents in secured locations and shred written notes when no longer needed. If you need help, consult with your volunteer coordinator.

## **Computer Internet Technology (IT) Policy:**

**Do's:** Do control access, maintain safe operation of computers, use password protection as required, clear browser history, report lost or stolen information to your supervisor, use strong passwords and lock your computer and portable devices. Be sure to use encrypted email when sending sensitive and confidential data unless otherwise authorized. For questions about encrypted email, consult your volunteer coordinator.

**Don'ts:** Don't send or forward emails with PPI to personal email accounts and don't use unauthorized devices.

**Source:** *Protecting Client Privacy and Confidentiality* SHIP TA Center, <u>https://portal.shiptacenter.org</u>

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