

Inland Northwest Therapy
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As mandated by the Health Insurance Portability and Accountability Act (HIPPA). Inland Northwest Therapy (INT), as a **Health Care Provider** (HCP) shares **Protected Health Information** (PHI) only with other HCP's, **Health Plans** (HP) and **Health Care Clearinghouses** (HCC) that have demonstrated adherence to HIPPA regulations (with exceptions to this as noted below). HIPPA calls an individual's Protected Health Information (PHI) as Individually Identifiable Health Information (IIHI).

HCP's, HP's and HCC's are considered covered entities (CE's).

INT shares PHI & IIHI with other HCP's only as needed to provide medical care for a patient.

INT provides PHI/IIHI billing information with HCP's, HP's & HCC's only as necessary to verify health plan coverage benefits or as necessary to facilitate billing requirements.

INT shares PHI/IIHI within its organization strictly on a need-to-know basis just as it does with other HCP's, HP's & HCC's as described above.

The basic guideline for PHI/IIHI usage is: A covered entity may not use or disclose protected health information, except either: (1) as the privacy rule permits or requires; or (2) as the individual who is the subject of the information (or the individual's personal representative) authorizes in writing.

There are exceptions:

Required disclosures: A covered entity must disclose protected health information in only two situations: (a) to individuals (or their personal representatives) specifically when they request access to, or accounting of disclosures of, their protected health information; and (b) to Health & Human services (HHS) when it is undertaking a compliance investigation or review or enforcement action.

The specifics of HIPPA permitted usage and disclosures (ie...sharing) that you may disclose PHI/IIHI are listed below. Primary rule of thumb is to disclose no more information that is necessary. If the matter is medical, all medical records can be shared, but non-medical information such as payment or health plan information need not be shared.

Minimum necessary is a HIPPA principle that basically means need to know only. Need to know only is, however, superseded by right to know, which include:

- Doctors
- Persons authorized to represent an individual
- Investigations by Human & Health services.
- Disclosures required by law, and
- Disclosures required for compliance with HIPPA

PHI/IIHI may be shared:

- With the individual (this means patient) to whom the information pertains.
- For treatment, payment, and healthcare operations.

- Treatment and payment are easily understood concepts.

Healthcare operations are any of the following activities:

- Quality assessment including case management and care coordination;
- Competency assurance activities, credentialing and accreditation;
- Conducting or arranging for medical reviews, audits, or legal services, including fraud and abuse detection and compliance programs;
- Specified insurance functions, such as underwriting, risk rating, and reinsuring risk;
- Business planning, development, management and administration;
- Business management and general administrative activities of the entity