

| Policy Title: Request for Authorized Access to THN Data |                |                 |                    |  |
|---|----------------|-----------------|--------------------|--|
| Department  | Policy         | THN's Effective | Next               |  |
| Responsible:  | Number:        | Date:           | Review/Revision    |  |
| THN Compliance &  | SEC-114        | July 10, 2017   | Date:              |  |
| Integrity   |                |                 | September 30, 2024 |  |
| Title of Person   | THN Approval   | Date Committee  | Date Approved by   |  |
| Responsible:  | Council:       | Approved:       | THN Board of       |  |
| THN Director of   | THN Compliance |                 | Managers:          |  |
| Compliance & Privacy                                    | and Privacy    | June 9, 2023    | August 15, 2023    |  |
|   | Committee      |                 |                    |  |

I. Purpose. To establish guidelines and a procedure for Triad HealthCare Network's (THN) disclosure of the data it receives from various sources.

#### II. Definitions.

**Business associates:** Vendors, contractors, consultants, agents, and other persons (other than members of THN's workforce) who create, receive, maintain, or transmit PHI to carry out or perform certain functions or activities involving the use or disclosure of PHI on behalf of THN. Administrative functions performed by a business associate would include, but not be limited to, claims processing or administration, data analysis, utilization review, quality assurance, patient safety activities, billing, benefit management, practice management, repricing, legal, actuarial, accounting, consulting, accreditation, or financial services.

Beneficiaries: An individual enrolled in Medicare and aligned to THN's Realizing Equity Access and Community Health (REACH) ACO.

**Business associate agreement (BAA):** A contract between a HIPAA-covered entity or a sub-covered entity (such as THN) and a HIPAA Business Associate. The contract protects PHI in accordance with HIPAA requirements.

Health Care Operations: Certain administrative, financial, legal, and quality improvement activities of a covered entity necessary to run its business and support the core functions of treatment and payment. These activities, which are limited to the activities listed in the definition of "health care operations" at 45 CFR 164.501, include:



- Conducting quality assessment and improvement activities, populationbased activities relating to improving health or reducing health care costs, and case management and care coordination;
- Reviewing the competence or qualifications of healthcare professionals, evaluating provider and health plan performance, training health care and nonhealth care professionals, accreditation, certification, licensing, or credentialing activities:
- Underwriting and other activities relating to the creation, renewal, or replacement of a contract of health insurance or health benefits, and ceding, securing, or placing a contract for reinsurance of risk relating to health care claims;
- Conducting or arranging for medical review, legal, and auditing services, including fraud and abuse detection and compliance programs;
- Business planning and development, such as conducing cost-management and planning analyses related to managing and operating the entity; and
- O Business management and general administrative activities, including those related to implementing and complying with the Privacy Rule and other HIPAA Administrative Simplification Rules, customer service, resolution of internal grievances, sale, or transfer of assets, creating de-identified health information or a limited data set, and fundraising for the benefit of the covered entity.

**HIPAA Privacy Standards:** The established guidelines set forth in the HIPAA Privacy Rule to protect individuals' medical records and other personal health information.

Individually identifiable health information (IIHI): Information that is a subset of health information, including demographic information collected from an individual, and is created or received by THN which relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision of health care services to an individual (a) that identifies the individual, or (b) with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

# **REACH ACO Participant:** An individual or entity that:

- a. Is a Medicare-enrolled provider or supplier (as defined at 42 CFR § 400.202);
- Is identified on the THN Participant List that is submitted to The Centers for Medicare & Medicaid Services;
- c. Bills for items and services it furnishes to Beneficiaries under a Medicare billing number assigned to a TIN in accordance with applicable Medicare regulations;
- d. Is not a Preferred Provider:
- e. Is not a Prohibited Participant; and



f. Pursuant to a written agreement with THN, has agreed to participate in the REACH ACO, to report quality data through THN, and to comply with care improvement objectives and the REACH ACO model quality performance standards.

**Participant Workforce Members:** Individuals who are employed or contracted to perform services on behalf of a Participant.

**Payment:** Various activities of health care providers to obtain payment or be reimbursed for their services and of a health plan to obtain payment or be reimbursed for their services and of a health plan to obtain premiums, to fulfill their coverage responsibilities and provide benefits under the plan, and to obtain or provide reimbursement for the provision of health care. Common payment activities include, but are not limited to:

- Determining eligibility or coverage under a plan and adjudicating claims;
- Risk adjustments;
- Billing and collection activities;
- Reviewing health care services for medical necessity, coverage, justification of charges, and the like;
- Utilization review activities; and
- Disclosures to consumer reporting agencies (limited to specified identifying information about the individual, his or her payment history, and identifying information about the covered entity).

## **Preferred Provider:** An individual or entity that:

- a. Is a Medicare-enrolled provider or supplier (as defined at 42 CFR § 400.202);
- b. Is identified on the THN Preferred Provider List that is submitted to The Centers for Medicare & Medicaid Services;
- c. Bills for items and services it furnishes to Beneficiaries under a Medicare billing number assigned to a TIN in accordance with applicable Medicare regulations;
- d. Is not a REACH ACO Participant;
- e. Is not a Prohibited Participant; and
- f. Has agreed to participate in the REACH Model pursuant to a written agreement with THN.

**Protected health information (PHI):** Information that is IIHI and is transmitted by electronic media or transmitted or maintained in any other form or medium held by THN.

**THN Data:** All data received by THN (or generated internally by THN), used by THN or disclosed by THN in furtherance of THN's Purpose. THN Data may include, but is not necessarily limited to, IIHI and PHI.



**THN Purpose:** Activities that directly benefit the THN organization or THN's aligned Beneficiaries, which may include, but are not limited to data aggregation, population health, care coordination and other treatment, payment, and operation related initiatives.

THN Workforce Members: Individuals employed or contracted to perform services on behalf of THN.

**Treatment:** The provision, coordination, or management of health care and related services among health care providers or by a health care provider with a third party, consultation between health care providers regarding a patient, or the referral of a patient from one health care provider to another.

### **POLICY:**

THN will disclose THN Data in accordance with applicable law and the procedure set forth in this policy.

### PROCEDURE:

- 1. THN Workforce Member for a THN Purpose:
  - a. THN Workforce Members are granted authorized access to THN's Data for work on behalf of THN in furtherance of a THN Purpose.
- 2. **THN Workforce Members for a Non-THN Purpose:** THN Workforce Members who request access to THN Data for non-THN Purposes must obtain approval by:
  - a. Submitting an **Authorized Access Request Form** to the THN Privacy Specialist in the department to which the request is made.
  - b. The department's THN Privacy Specialist will review the request for its intended purpose and compliance with HIPAA Privacy Standards.
  - c. The department's THN Privacy Specialist may approve the request, with or without conditions, or escalate the request to the THN Compliance and Privacy Officer for review and approval.
  - d. The THN Workforce Member requesting access will be notified in writing whether their request is approved or denied. If denied, an explanation will be provided.
  - e. A copy of the approved or disapproved Authorized Access Request Form will be provided to THN's Compliance and Integrity Officer for maintenance on the THN Share Point site for no less than 10 years.
- 3. THN Participant (including Participant Workforce Members) for THN Purpose: A THN Participant (including Participant Workforce Members) who request access to THN Data for a THN Purpose must obtain approval by:
  - a. Submitting an **Authorized Access Request Form** to the THN Privacy Specialist in the department to which the request is made.



- b. The department's THN Privacy Specialist will review the request for its intended purpose, relationship to THN and compliance with HIPAA Privacy Standards.
- c. The department's THN Privacy Specialist may approve the request, with or without conditions, or escalate the request to the THN Compliance and Privacy Officer for review and approval.
- d. The THN Participant requesting access will be notified in writing whether their request is approved or denied. If denied, an explanation will be provided.
- e. A copy of the approved or disapproved Authorized Access Request Form will be provided to THN's Compliance and Integrity Officer for maintenance on the THN Share Point site for no less than 10 years.
- **4. THN Participant (including Participant Workforce Members) for Non-THN Purpose:** THN Participants (including Participant Workforce Members) who request access to THN Data for non-THN Purposes must obtain approval by:
  - a. Submitting an **Authorized Access Request Form** to the THN Privacy Specialist in the department to which the request is made.
  - The department's THN Privacy Specialist will review the request for its intended purpose, relationship to THN and compliance with HIPAA Privacy Standards.
  - c. The department's THN Privacy Specialist may approve the request, with or without conditions, or escalate the request to the THN Compliance and Privacy Officer for review and approval.
  - d. The THN Participant requesting access will be notified in writing whether their request is approved or denied. If denied, an explanation will be provided.
  - e. A copy of the approved or disapproved Authorized Access Request Form will be provided to THN's Compliance and Integrity Officer for maintenance on the THN Share Point site for no less than 10 years.

#### 5. THN Preferred Providers.

a. THN Preferred Providers are permitted access to THN Data for THN Purposes only.

# 6. Authorize Access to THN Data pursuant to a contractual arrangement between THN and a third party:

a. All third parties will enter a written contract to establish the permitted uses and disclosures of THN Data. The underlying contractual arrangement should also include a Business Associate Agreement (BAA) or Data Use Agreement (DUA), whichever is appropriate. The underlying contractual arrangement, BAA and/or DUA must outline specific need to know for the use and disclosure of the THN



Data, with assurances that the third party will appropriately safeguard the information. All other use and disclosure of THN Data by the third party is prohibited.

- b. All contracts, BAAs and/or Data Use Agreements will be drafted by the Contracts Manager and reviewed by the Cone Health Office of General Counsel. Once executed, the Contracts Manager will upload the agreements into MediTract contract management system.
- c. Upon completion of steps #1 and #2 above, THN may disclose THN Data to a third party and may allow the third party to create, receive, maintain, or transmit THN Data on THN's behalf for reasons specified in the underlying agreements. See Policy SEC-103 Use and Disclosure for Business Associates for further guidance.

Other Permitted Uses and Disclosures of THN Data: Any other uses and disclosures not defined above will be determined on a case-by-case basis by the THN Compliance and Privacy Officer.

#### REFERENCES/DOCUMENTS:

- CONE HEALTH POLICY OP-ACD-2016-221
- HIPAA Privacy Regulations, 45 C.F.R. §§ 164.502(e) and 164.504(e)
- Authorized Access Request Form

| Date        | Reviewed | Revised | Notes              |
|-------------|----------|---------|--------------------|
| August 2022 |          | X       | Updated to DCE     |
| May 2023    |          | X       | Converted to REACH |
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