



## Compliance Program Agreement & Attestation Form

As a condition of employment and/or affiliation with Virginia Garcia Memorial Health Center (VG), the undersigned individual agrees to all of the following:

### Protected Health Information (PHI) in the workspace

PHI includes health information combined with any of the 18 patient identifiers (e.g., name, date of birth, physical/email address, account & phone numbers, social security number, medical record number, etc.).

1. To ensure that all PHI is put away at the end of the day or if no longer needed, placed in the secure shredding bin and not in the standard recycle bin.
2. To ensure that patient information is not visible to others, when leaving hardcopies at your desk during the work day

### Appropriate Access and Disclosure of Protected Health Information (PHI)

3. To have a job-related need to know when accessing PHI.
4. To ensure the person with whom PHI is shared has a need and/or right to know.
5. To respect the "Minimum Necessary Rule" which means accessing and disclosing the minimum amount of information to get the job done right.

### Inappropriate Access and Disclosure

The Health Insurance Portability and Accountability Act (HIPAA) provides data privacy and security rules for protecting medical information.

6. To not violate patient privacy by acknowledging them in public in a way that would identify them as a patient or telling anyone outside of work that the patient was seen at the clinic.
7. To never access PHI for reasons of curiosity or any reason other than a job-related need to know.
8. To never share patient information, stories, or images on social media unless authorized by VG to do so.
9. To never disclose PHI to anyone not involved in the patient's treatment unless legally permitted.
10. To not access my own, my friends or family member's health records using VG systems or VG credentials.

### Patient Rights to Privacy & Safety

11. To not make patients a source of gossip or slander.
12. To not search for additional patient information on the internet. (If you have concerns, tell your manager)
13. To not engage in patient research without proper review and authorization by VG leadership.

### Security

14. To wear your VG issued badge so it can be seen. Changes to the picture or name must be approved by HR.
15. To never share any personal passwords for VG systems.
16. To always log out of or secure workstations before walking away from computer systems containing PHI.
17. To be aware that all actions in the electronic health record (EHR) are tracked and may be randomly audited.
18. To keep EPIC EHR email communication professional.
19. To use capitalized VGSECURE at the beginning of the email subject line to encrypt PHI shared outside of VG (*no other variations are acceptable*)



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### Sharing PHI

20. To ensure PHI is not shared without patient authorization/release of information (ROI) unless any of the following exceptions apply:

All VG workforce members are permitted to share PHI without an ROI for reasons of treatment, payment, or operations (TPO) such as care coordination, referrals, billing, and chart audits. However, an ROI is required for subpoenas, for substance abuse information, psychotherapy notes, HIV/AIDS testing not already in the health record, and genetic testing.

Workforce members may also share PHI without an ROI in the following circumstances:

- In an emergency, you can share info with patient's family/friends
- Abuse reporting (children, elderly, severely mentally ill, developmentally disabled)
- Communicable disease reporting to the health department (Tuberculosis, HIV, etc.)
- If the patient has committed a crime on the premises
- Missing persons/fugitives from justice, Homeland security- terrorism investigations
- If the patient tells you they want to harm themselves or others
- Court orders

21. To only share information with patient companions present during a visit if the patient has not objected.

22. To have an ROI to talk to family/friends/representatives unless there is an emergency or unless it is known that the person is involved in the patient's treatment.

23. To use good judgement and share only the minimum necessary information when sharing PHI with Family/Friends/Representatives of the patient.

24. To not alter parent or guardian information in EPIC unless VG has a court order removing a parent or changing guardianship. Non-custodial parents have the same rights to a child's record as custodial parents.

### Leaving a message

25. To leave minimal information when leaving a message for a patient, (e.g., "Hello. This message is for Luz. This is Maria calling from Virginia Garcia. Please call back as soon you are able at 503-555-5555.").

26. To document all patient request for alternate communications in the EHR (e.g., If the patient asks that you leave a detailed message). Good judgment must still be used when sharing sensitive information.

27. To not leave messages for confidential patients.

### When People You Know Outside of Work Come to the Clinic

28. Whenever an encounter involves a patient that I know well outside of work, to have another co-worker replace me or ask my manager if my involvement in their care is appropriate BEFORE accessing their record or participating in treatment.

29. *For managers:* To speak with the patient and obtain their consent before allowing the familiar employee to access to or participate in patient treatment,

30. If I accidentally access the record of someone I know well outside of work, to immediately exit the record and report it in the Incident Portal so that there is documentation that it was inadvertent.

31. To access EHR records of family members or friends the same way anyone in the community would, even if they have signed an ROI allowing me to receive information.



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### HIPAA Breaches

A HIPAA breach is when someone gives or gets PHI that they shouldn't.

- 32. To report all known or suspected PHI breaches understanding that in most cases I will not know the outcome of any investigation.
- 33. To self-report mistakes to help VG improve processes and prevent future mistakes. Discipline rarely happens unless there is a pattern of carelessness or the employee tries to cover it up or lie about it.
- 34. To understand that disciplinary action is taken when appropriate and is based on intent, how much harm was done, and whether it is a pattern of behavior.

### Workplace Harassment Prevention

All workforce members have the right to work in an environment that is safe and free from discrimination, harassment and bullying.

- 35. To not engage in any behavior or activity that is or could be perceived as discrimination, harassment or bullying is prohibited by law and VG policy. *Any incidents that do occur must be reported and appropriately dealt with.*

### Fraud Waste Abuse

VG has a zero-tolerance policy for any fraud, waste, or abuse. Prompt reporting of any violations is required of all workforce members.

- 36. To not knowingly, willfully or otherwise make or file a false claim, or retaliate against anyone for good faith reporting of a violation.

### Mandatory Reporting of Abuse

Abuse and neglect of children and vulnerable adults is prohibited by law.

- 37. To report any incident of observed, reported, or suspected abandonment, abuse, financial exploitation, neglect or self-neglect of patients, as well as injuries of unknown origin.

### Attestation & Agreement

By signing this agreement, I attest that I have read, understand and agree to comply with all the requirements, and terms set forth on this and every preceding page of this agreement. I will abide by HIPAA, State and Federal Laws, and all of the VG-specific confidentiality policies or rules summarized herein. I understand that I may be required to complete a more thorough HIPAA training as required by VG.

I also understand that any violation of this agreement may result in termination or dismissal from the organization. My signature below indicates that I understand what is expected for me and I agree to abide by these expectations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Job Title/Role