# STATE OF IOWA DEPARTMENT OF Health and Human Services

## **Confidentiality Policy**

POLICY #COMP23-011

#### **PURPOSE**

This policy outlines requirements for Iowa HHS staff regarding the access, use, and disclosure of information, records, or data classified as Confidential or Restricted.

#### SCOPE AND COORDINATION

This policy and procedure applies to all HHS employees, contracted employees, consultants, temporary staff, and other workers.

### ROLES AND RESPONSIBILITIES

- I. Iowa HHS Staff
  - a. Maintain the confidentiality of all Confidential and Restricted Data in compliance with state and federal laws and regulations and this policy.
  - b. Complete confidentiality training and attestation form upon hire and annually.
  - c. Ask questions and seek assistance as needed to ensure proper access, use, and disclosure of Confidential and Restricted Data.
- 2. Data Sharing, Privacy and Open Records Bureau:
  - a. Provide technical assistance and answer questions regarding relevant state and federal laws and regulations for data confidentiality and release.
  - b. Review and update this policy.

#### DEFINITIONS

- 1. Confidential Data: Data and information for which access to and re-disclosure is governed by lowa HHS policy and procedure and applicable state and federal laws and regulations. Penalties for unauthorized access and disclosure as stated in state and federal laws and regulations, and agency policy apply. This also includes data previously classified as "Implied Confidential" by the legacy lowa Department of Public Health. Examples of confidential data include, but are not limited to, reportable disease information (lowa Code § 139A.3, 641 IAC chapter 1), medical records (lowa Code § 22.7(2)), immunization information (641 IAC 7.11), vital records information (lowa Code § 144, 641 IAC 95), service recipient information (lowa Code § 217.30), and substance use treatment information (lowa Code § 125.37 and 42 CFR P art 2).
- 2. Restricted Data: Data and Information that must receive the highest level of safeguarding within the agency. These data types include:
  - Protected Health Information (PHI) governed by the HIPAA Privacy and Security Rules.
  - Data received from the Internal Revenue Service (IRS), Social Security Administration (SSA), Office of Child Support Services (OCSS) National Directory of New Hires

(NDNH) and Federal Parent Locator Service (FPLS), and the Federal Bureau of Investigation (FBI). In these instances, the federal agency maintains ownership of the data provided to Iowa HHS. Additional safeguards apply as required by the source of the data. Access to and re-disclosure of this information is governed by federal laws and regulations. Applicable penalties for unauthorized access and disclosure as stated in federal laws and regulations apply.

- For more information on safeguarding PHI and data received from IRS, SSA, OCSS and the FBI, see the Safeguarding Restricted Data Types Policy.
- Data and records involving HIV/AIDS, Domestic Abuse Death Review Team, Child Death Review Team, Maternal Mortality Review Committee, and social security numbers maintained within vital records.

#### POLICY

- 1. Iowa HHS staff shall comply with all state and federal laws and regulations and Iowa HHS policies and procedures when accessing, using, and disclosing records, data, and information held, maintained, or processed by Iowa HHS. Iowa HHS staff shall not disclose, release, sell, Ioan, or otherwise grant access to any Confidential or Restricted Data unless specifically authorized.
- 2. Iowa HHS staff shall use appropriate administrative, technical, and physical safeguards to protect the confidentiality, integrity, and availability of Confidential and Restricted Data.
- 3. Iowa HHS staff shall immediately report all suspected or known misuse or mishandling of Confidential or Restricted Data, including, but not limited to, unauthorized access or disclosure.
- 4. Iowa HHS staff shall cooperate fully and provide any assistance necessary to investigate and mitigate any incident involving the mishandling of Confidential or Restricted Data, or known or suspected violations of this policy.
- 5. Iowa HHS staff shall take approved confidentiality trainings, including Health Insurance Portability and Accountability Act (HIPAA) training for applicable staff, and sign a confidentiality attestation form upon hire and on an annual basis. See Security and Privacy Training Policy for additional training requirements based on specific job duties.
- 6. Iowa HHS staff shall not:
  - a. Access information about anyone receiving Iowa HHS services or otherwise listed in Iowa HHS data unless such access is required as part of job duties. Staff shall not access information about people out of curiosity or concern, including people they know personally, including family members.
  - b. Disclose Confidential or Restricted Data other than to persons and in manners allowed for the purpose of performing assigned job duties.
  - c. Share user IDs and passwords for any computer system or database to which they have access, including their supervisor. Any actions taken under an individual's account is their responsibility.
  - d. Allow others to view computer monitor when Confidential or Restricted Data are

displayed unless it is necessary to perform their job duties and they are authorized to see the information.

- e. Release Confidential or Restricted Data outside of the program (as defined by function and legal authority) for which the data were collected unless authorized by state and federal law and regulations and approved and documented via appropriate agency policies and procedures.
- 7. All provisions of this policy shall remain in effect throughout and after the term of employment with Iowa HHS.

#### PROCEDURE

- 1. Iowa HHS staff with questions on state and federal laws and regulations related to confidentiality, data release, or any provision of this policy should contact their supervisor and/or the Bureau of Data Sharing, Privacy, and Open Records.
- 2. To report an incident of suspected or known misuse or mishandling of Confidential or Restricted data, staff must contact their supervisor and submit an incident report form <u>dhsincidents@dhs.state.ia.us</u>. For more information, see Incident Response Policy and Incident Response Procedures.
- 3. Iowa HHS staff with access to Confidential or Restricted Data that they do not need for their job duties must report this immediately to their supervisor.
- 4. To share Confidential or Restricted Data for a legally authorized purpose, including through contracts, subpoenas, court orders, and data sharing agreements, refer to Data Sharing Policy, COMP23-010.
- 5. Iowa HHS staff must follow all <u>Iowa HHS policies</u> that serve the purpose of protecting the confidentiality of Confidential and Restricted Data.

#### MANAGEMENT COMMITMENT

This policy has been approved by the Director of Iowa HHS. Iowa HHS supervisors are responsible for ensuring staff are aware of and understand this policy and procedure.

#### COMPLIANCE WITH THIS POLICY AND PROCEDURE

- 1. Compliance measurement: The Compliance Division may verify compliance with this policy through various methods, including but not limited to, internal audits and information received by the Compliance Division, HHS Division Directors or Human Resources.
- 2. Exceptions: Any exception to the policy shall be approved by the Compliance Division Director in advance.
- 3. Noncompliance: Violations of this policy are grounds for disciplinary action, up to and including termination.
- 4. Iowa HHS staff may be held <u>civilly or criminally liable</u> for improper use or disclosure of confidential Information. Link to penalties language on website.

Date	Action	Summary of Changes	Reviewers
9.6.2023	Approved	New HHS Policy	Executive Team

#### **REVIEW AND CHANGE LOG**

#### SIGNATURE

This policy and procedure have been reviewed and approved by Sarah Reisetter, HHS Deputy Director and Chief of Compliance.

HHS Deputy Director/Chief of Compliance

Date