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North Sound Behavioral Health Administrative Services Organization, LLC

Section 2500 – Privacy: Designated Record Set

Authorizing Source: 45 CFR 164.514 (HIPAA); 42 CFR Part 2 (Part 2); RCW 70.02

Approved by: Executive Director Date: 2/25/2025 Signature:

POLICY # 2504.00

SUBJECT: DESIGNATED RECORD SET

PURPOSE

In compliance with HIPAA, Part 2, State Law, and any applicable Business Associate Agreements (BAAs) and Qualified Service Organization Agreements (QSOAs) with Upstream Covered Entities, this policy sets out the elements of the Designated Record Set and the creation and maintenance of data sources that contain Protected Health Information (PHI).

Capitalized terms have special meanings. Definitions under this policy include Authorized Representative, Designated Record Set, Individual, Payment, Protected Health Information (PHI), Pre-Transition PHI, Required by Law, Upstream Covered Entity and Workforce. See Policy 2502.00: Definitions for Policies Governing PHI.

POLICY

North Sound Behavioral Health Administrative Services Organization (North Sound BH-ASO) will identify categories of records maintained, collected, Used or Disclosed by North Sound BH-ASO that contain PHI and are used to make decisions about Individuals, including enrollment, Payment, claims adjudication and case or medical management records maintained by or for North Sound BH-ASO.

PROCEDURES

1. Designated Record Set.

- 1.1 **Scope.** North Sound BH-ASO may maintain its own Designated Record Set with respect to Pre-Transition PHI. North Sound BH-ASO also may maintain a Designated Record Set on behalf of an Upstream Covered Entity. The Designated Record Set is: (a) the medical and billing records about Individuals maintained by or for a covered Health Care Provider; (b) the enrollment, Payment, claims adjudication and case or medical management record systems maintained by or for a covered Health Plan; and (c) used, in whole or in part, by or for the Covered Entity to make decisions about Individuals. Note: the third category includes records that are used to make decisions about Individuals whether or not the records actually have been used to make a decision about the particular Individual requesting access or amendment. The term “record” means any item, collection or grouping of information that includes PHI and is maintained, collected, Used or Disclosed by or for North Sound BH-ASO (or an Upstream Covered Entity). North Sound BH-ASO, through its Information Systems/Information Technology (IS/IT) Administrator, has created and will maintain a database that identifies specific internal Designated Record Set components, the basic content, the location of the documentation, the contact person and whether stored in electronic or paper form.

- 1.2 **Database of Designated Record Sets.** All original components of the Designated Record Set will be maintained and stored at North Sound BH-ASO's main office under the supervision of IS/IT Administrator and assisted by the HIPAA Security Officer. The IS/IT Administrator (or designee) will verify, as components are received, that the components are entered into the database.
- 1.3 **Database Search/Response.** Requests by Individuals or Upstream Covered Entities to have access to or amend PHI will trigger a search of the database and will be noted in the database. Note: North Sound BH-ASO may be maintaining PHI in a Designated Record Set that is duplicative of the PHI being maintained by an Upstream Covered Entity. In that situation, North Sound BH-ASO may not have any obligation to provide the duplicative Designated Record Set to the Upstream Covered Entity. The applicable BAA should be consulted.
- 1.4 **Complete Database.**
 - 1.4.1 If a Workforce member is uncertain whether a certain document or piece of information belongs in the Designated Record Set, then the Workforce member should contact the appropriate supervisor or the IS/IT Administrator for advice.
 - 1.4.2 If a Workforce member believes there are documents in a Designated Record Set that do not belong, then the Workforce member should contact the appropriate supervisor or the IS/IT Administrator.

2. **Determination Process.** The documentation maintained by North Sound BH-ASO will be evaluated to determine those groups of records that should be categorized as Designated Record Sets. The defined process should provide that the following information is gathered about the evaluated records:

- 2.1 **Documentation type;**
- 2.2 **Basic content;**
- 2.3 **Location of the documentation;**
- 2.4 **Contact person;**
- 2.5 **Paper/electronic documentation;**
- 2.6 **Whether the documentation contains PHI; and**
- 2.7 **Whether the documentation is used to make decisions about Individuals.**

3. **Inclusion within Designated Record Set.** North Sound BH-ASO will maintain the following items in a Designated Record Set:

- 3.1 **Correspondence.** Any records generated by, or correspondence between, North Sound BH-ASO Workforce and the Individual or others involved in the Individual's care or Payment for Health Care services;
- 3.2 **Authorizations.** Authorizations for Medicaid Personal Care (MPC) funding;
- 3.3 **Applications.** Applications for Children's Long-Term Inpatient Program (CLIP) services, other services or other written acknowledgements of the Individual's eligibility for services;
- 3.4 **Reconciliations.** Inpatient reconciliation of encounters;
- 3.5 **Encounter Records.** Records including dates, services rendered, name(s) of provider(s), coding, clinical documentation of Individual service contacts, including authorizations or denials, and other information used to determine services provided, funding allocation and reconciliation.

- 3.6 **For Decisions.** Any other records or PHI used, in whole or in part, to make decisions about Individuals and case or medical management records maintained by or for North Sound BH-ASO.
 - 3.7 **Payment.** Documents related to enrollment, Payment, claims adjudication and case or medical management records.
 - 4. **Exclusion from Designated Record Set.** The Designated Record Set will not include:
 - 4.1 **Education records** governed by the Family Educational Rights Privacy Act (FERPA) and exempt from HIPAA;
 - 4.2 Information involved in **civil, criminal or administrative actions** or records assembled in anticipation of a legal action;
 - 4.3 Health information that is **not used to make decisions** about Individuals;
 - 4.4 **Quality improvement records;**
 - 4.5 **Risk management records** including incident reports;
 - 4.6 **Employment records** held by North Sound BH-ASO in its role as employer; and
 - 4.7 Information created as part of a **Research** study to which the Individual has temporarily waived right to access. See Policy 2513.00: Research.
 - 5. **Multiple Repositories.** PHI is kept in many forms throughout North Sound BH-ASO. Each of the existing repositories of PHI have been and will continue to be, identified, documented and approved for usage. Any new need for creation of an additional repository of PHI must follow the same established process under the direction and approval of the Privacy Officer and the IS/IT Administrator.
 - 6. **Exemption for Routine Requests.** This policy does not apply to routine requests that do not involve clinical information, such as an Individual at registration requesting the updating of contact information. A Workforce member may handle routine requests informally by appropriately updating the information.
 - 7. **Documentation.** Documentation relating to Designated Record Sets shall be retained at least six (6) years from the date of its creation or the date when it was last in effect, whichever is later, and shall include the following:
 - 7.1 **All relevant policies and procedures.**
 - 7.2 **Relevant databases.**
 - 7.3 **All requests by Individuals for access to or amendment of a Designated Record Set.**
- This six (6)-year period does not apply to the retention of any medical record, which has a longer retention period.
- 8. **Related Policies.** Other policies and procedures to review that are related to this policy:
 - 8.1 **Policy 2501.00: Privacy and Confidentiality.**
 - 8.2 **Policy 2502.00: Definitions for Policies Governing PHI.**
 - 8.3 **Policy 2506.00: Documentation.**
 - 8.4 **Policy 2513.00: Research.**
 - 8.5 **Policy 2514.00: Right to Access PHI.**
 - 8.6 **Policy 2515.00: Right to Amend PHI.**
 - 8.7 **Policy 2516.00: Right to Accounting of Disclosures.**

8.8 Policy 2522.00: Uses and Disclosures of PHI.

ATTACHMENTS

None