

**CORE 4-REGULATORY COMPLIANCE
AND
CORE 16 CONFIDENTIALITY OF INDIVIDUALLY-IDENTIFIED HEALTH
INFORMATION**

Requirements:

Core 4: Regulatory Compliance

According to URAC Core Quality Standard 4, SecureCare must demonstrate the appropriate implementation of measures and processes to assure ongoing compliance with state and federal laws/regulations. SecureCare must have processes in place to address those laws that relate to state requirements for conducting credentialing activities and for protecting the confidentiality of protected health information according to the federal requirements as outlined in the Health Insurance Portability and Accountability Act of 1996 (HIPAA) which defines Protected Health Information (PHI).

Core 16: Confidentiality of Individually Identifiable Health Information

According to URAC Core Quality Standard 16, SecureCare must assure that individually-identifiable health information collected and used by SecureCare is protected from unlawful use or disclosure.

SecureCare has formal written operating procedures that outline the following:

- a. how PHI is received, used, maintained and destroyed
- b. how staff and credentialed providers are trained regarding the use and disclosure of PHI
- c. how staff and credentialed providers attest to the confidentiality and security of PHI

SecureCare employed and contracted providers must follow the below listed general requirements related to the receipt, handling and disclosure of PHI:

- a. PHI will be used solely for the purpose of conducting credentialing activities for SecureCare to include quality management activities and other committee activities
- b. PHI will not be disclosed to any entity outside the scope of the SecureCare program service requirements
- c. PHI used for credentialing activities will be limited to the minimum necessary to conduct credentialing activities
- d. PHI includes all forms of individually-identifiable health information whether oral, written or electronic
- e. HIPAA requirements apply to PHI as it relates to conducting credentialing activities as well as activities related to committee participation
- f. Suspected and actual breaches of the HIPAA requirements must be reported immediately to the SecureCare HIPAA Privacy Officer
- g. Formal confidentiality and privacy statements must be signed by all SecureCare staff and contracted providers

I, _____, have read the above information and directives related to the protection of PHI. I understand my responsibility to comply with the SecureCare and URAC standards related to the confidentiality and privacy of PHI.

I understand that my contract may be terminated as a result of failing to protect the confidentiality and privacy of PHI.

My signature attests to my agreement to preserve the confidentiality and security of protected health information and individually-identifiable health information.

Provider Signature

Date