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Thomas	0.	Forslund,	Director
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Governor Matthew H. Mead

Policy Title:	Administrative, Technical, and Physical Safeguards	
Policy Number:	AS-005	
Effective Date:	July 1, 2013	
Approval:	Thomas O. Forslund, Director G/17/17 Date	

Purpose:

This policy establishes criteria for safeguarding protected health information (PHI) to minimize the risk of unauthorized access, use, and disclosure.

Scope

This policy applies to all Wyoming Department of Health (WDH) workforce.

Policy:

1. General

WDH shall take reasonable steps to safeguard PHI in any medium, including paper, verbal, visual, and electronic, from any intentional or unintentional use or disclosure in violation of state or federal law or WDH policy.

2. Paper practices

- a. Each WDH division/program/facility shall store files and documents containing PHI in locked rooms or storage systems.
 - i. In business areas where lockable storage is not available, WDH workforce shall establish a reasonable alternative for safeguarding PHI.
- b. Each WDH division/program/facility shall ensure that document disposal bins containing PHI are appropriately labeled, are emptied on a regular basis, and are shielded from easy access.
 - i. Each WDH division/program/facility shall routinely shred files and documents containing PHI, consistent with WDH Policy S-020; Documentation and Retention.

3. Verbal practices

- a. WDH workforce members shall ensure that verbal discussions involving PHI are discreet and confidential.
 - i. Each WDH division/facility/program shall use enclosed offices or interview rooms for the verbal exchange of PHI.
 - ii. Verbal disclosures of PHI that are incidental to otherwise permitted disclosures are not considered violations of the Privacy Rule or WDH policy. For example, several WDH workforce members work in cubicles. These workforce members often have telephone discussions with clients regarding PHI. If one workforce member happens to overhear portions of another workforce member's telephone conversation with a client, such would be considered an incidental disclosure.

4. Visual practices

a. WDH workforce members shall ensure that computer screens and paper documents containing PHI are adequately shielded from unauthorized viewing.

5. Electronic practices

- a. Electronic PHI (e.g. databases, e-mail, facsimile) shall be protected through the use and implementation of IT-related controls.
- b. Workforce members shall be assigned to job function categories to ensure access to only the minimum necessary amount of information to perform their job duties. Implementation of rolebased access control shall be in accordance with WDH Policy AS-004; Minimum Necessary Information.
- c. WDH shall conduct internal reviews periodically to evaluate the effectiveness of electronic safeguards.
- d. WDH managers and supervisors shall use available tools and forms to conduct annual (at a minimum) reviews to evaluate and improve the effectiveness of the current electronic safeguards.
- e. WDH shall develop and implement departmental security policies as necessary to enhance electronic safeguards.

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Policies:

AS-004; Minimum Necessary Information S-020; Documentation and Retention

References:

45 CFR § 164.530(c) 45 CFR §§ 164.308-312

Training: