1. **POLICY STATEMENT:**

   Via Christi Health ("VCH") accesses Electronic Protected Health Information ("EPHI") from the Kansas Health Information Exchange ("Exchange") in compliance with the Health Insurance Portability and Accountability Act ("HIPAA"), the Health Information Technology for Economic and Clinical Health ("HITECH") Act, and Kansas state law. If an individual has officially opted out of the Exchange, VCH only accesses that person's EPHI if an authorization is obtained, or for reporting of certain abuse or neglect of children and for reporting of abuse, neglect, or exploitation of certain adults.

2. **PURPOSE:**

   This policy describes the legal requirements and procedures for accessing EPHI from the Exchange when an individual has formally opted out.

3. **SCOPE:**

   This policy applies to all Via Christi Health ministries in the state of Kansas, including Via Christi Health, Inc., its wholly owned or controlled subsidiaries and managed entities.

4. **DEFINITIONS:**

   a. **Security Override ("Break the glass")** - a quick means for a person to gain access to protected or private electronic information when required in certain situations.

   b. **Electronic Protected Health Information (EPHI)** - any electronic individually-identifiable health information that is collected, maintained, transmitted, or stored.

   c. **Kansas Health Information Exchange** - an organization that provides services to enable the electronic sharing of health-related information among Kansas health care providers.
d. **Opt-out** - an individual’s right per Kansas law to restrict access to one’s EPHI through the Exchange. This is accomplished by completing a form available from the Exchange at [http://www.khie.org/for-consumers/opt-out](http://www.khie.org/for-consumers/opt-out).

5. **PROCEDURE:**

   a. If an individual has officially opted out of the Exchange, providers are prohibited from accessing that person’s EPHI through the Exchange unless one of the following exceptions apply:

      (1) The patient/resident or patient's/resident’s representative provides written authorization. Attachment A is the authorization form.

      (2) The provider is reporting certain abuse or neglect of children as required by K.S.A. 38-2223 or the provider is reporting abuse, neglect, or exploitation of certain adults as required by K.S.A. 39-1431.

   b. A ministry designates and trains users that have permission to perform security override (“break the glass”) and access EPHI for an individual who has opted out of the Exchange.

6. **ATTACHMENTS**

   a. Authorization Form

   Responsible Executive - Signature

   Board Committee Chairperson - Signature (if Required)  Title