

NeuroDiagnostic Institute and Advanced Treatment Center

**Acknowledgement of Receipt
Of Assigned Levels of Access
To Protected Health Information**

The following levels of access to protected health information have been assigned to:

Employee (Printed Name)

Department/Division

Position

C _____ D _____ F _____

My signature acknowledges:

1. I have received information about "levels of access" to protected health information.
2. I have received my assigned "levels of access" to protected health information.
3. I understand my assigned "levels of access" to protected health information.
4. I understand that violation of my assigned level of access may result in Progressive Discipline, up to and including termination.
5. I agree to abide by the levels assigned, except in those circumstances authorized by my supervisor.

Employee Signature

Date of Signature

Printed Name of Supervisor

Signature of Supervisor

Date of Supervisor Signature

Levels of Access to Protected Health Information

Each member of the workforce at The NDI will be assigned levels of access to protected health information. Assignment of levels is determined by what information is needed to carry out your work duties.

“Workforce member” includes employees, contract workers, volunteers, students, and all other persons whose conduct, in the performance of work for Larue Carter Hospital, is under the direct control of our hospital, whether or not they are paid by the hospital.

“Protected health information” includes any patient-identifiable information, *whether oral or recorded in any form or medium*, that is *created or received* by the hospital. This would include conversations, paper records, faxed information, e-mail messages, and computer stored information.

Violation of the assigned levels of access may result in disciplinary action, up to and including termination.

Types of Patient Information

C=Clinical

- Relates to the physical or mental health/condition of an individual, as well as to the provision of health care to an individual.

D=Demographic

- Includes name, addresses, names of relatives/employers, birth dates, telephone numbers, fax numbers, e-mail addresses, social security numbers, medical record numbers, account numbers, certificate/license numbers, vehicle serial numbers, web URLs, Internet Protocol (IP) addresses, finger or voice prints, photographic images.

F=Financial

- Relates to the payment for provision of health care to an individual, or any other financial information.

Level of Access:

0=No Access

- No access to protected health information; however, workers may recognize individuals as patients.

1=Limited Access

- Limited access to protected health information for a specific purpose.

2=Full Access

- Complete access to protected health information as needed in order to perform job duties assigned.