

SYSTEMWIDE POLICY Medical Record Access Policy

This Policy is Applicable to the following Corewell Health sites:

SYSTEMWIDE

Beaumont Pharmacy Solutions, Beaumont Post Acute Care, Continuing Care (CHW), Corewell Health Beaumont Grosse Pointe Hospital, Corewell Health Beaumont Troy Hospital, Corewell Health Big Rapids Hospital, Corewell Health Dearborn Hospital, Corewell Health Farmington Hills Hospital, Corewell Health Gerber Hospital, Corewell Health Grand Rapids Hospitals (Blodgett Hospital, Butterworth Hospital, Helen DeVos Children's Hospital), Corewell Health Greenville Hospital, Corewell Health Ludington Hospital, Corewell Health Medical Group East, Corewell Health Medical Group West, Corewell Health Pennock Hospital, Corewell Health Reed City Hospital, Corewell Health South (Niles, St. Joseph, and Watervliet Hospitals.; Corewell Health Medical Group South; Applicable Corewell Health South Regional Sites), Corewell Health Taylor Hospital, Corewell Health Trenton Hospital, Corewell Health Wayne Hospital, Corewell Health William Beaumont University Hospital, Corewell Health Zeeland Hospital, Corporate (Legacy Beaumont Health), Corporate (Legacy Spectrum Health System), Lakeshore Area Radiation Oncology Center (LAROC), North Flight Aero Med (NFAM), Outpatient/Physician Practices (CHW), Priority Health

Applicability Limited to: N/A

Reference #: 29681

Version#: 1

Effective Date: 07/01/2024

Functional Area: Compliance

Department Area: Privacy

1. Purpose

The purpose of this policy is to protect the privacy and confidentiality of patients' medical records, which contain protected health information (PHI), and to ensure compliance with Corewell Health's Code of Excellence and organizational policies and procedures as well as applicable federal and state laws and regulations.

2. Definitions

Treatment means the provision, coordination or management of a patient's healthcare and related services, including but not limited to consultations, care coordination, and/or referrals.

Payment means all activities undertaken by a healthcare professional or entity to obtain payment or to be reimbursed for their services.

Healthcare Operations mean the numerous administrative, financial, legal, and quality improvement activities required for managing and delivering health and medical services. These include both business-focused and clinically focused functions.

Research means a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge.

Entities will reference associated Documentation contained within this document as applicable Printouts of this document may be out of date and should be considered uncontrolled.



Do Not Provision Access means the status for individuals who have had their access to Corewell Health's EHR terminated as a result of a violation of Corewell Health's privacy policy/ies and/or procedure(s) and will therefore not be re-granted access to the EHR for at least six months following such termination.

Except as specifically defined herein, the following capitalized terms used in this document will have the definitions found in the <u>Digital Services Glossary of Terms Used in Policies and Procedures</u>. Compliance with the Digital Services (DS) definition of a term is assumed and enforceable within the context of this policy, procedure, or standard document.

- Medical Record
- Electronic Health Record (EHR)
- Protected Health Information (PHI)
- Covered Entity
- User
- Team Member

3. Responsibilities

This policy applies to all Corewell Health Team Members and Users, who have access to Corewell Health medical records, which contain protected health information (PHI).

4. Compliance

Team Members and Users, including Community Connect and Epic Care Link Users, who violate this policy may be subject to performance correction up to and including separation from employment and/or loss of access to Corewell Health systems, including but not limited to the EHR. Refer to the Do Not Provision Access Policy. When a Team Member is covered by a collective bargaining agreement (CBA), performance correction for the Team Member will follow the CBA.

5. Policy

- A. A Team Member's or User's access to any patient's medical record in Corewell Health's EHR (i.e. Epic) shall **only** be for Treatment, Payment, or Healthcare Operations (TPO) purpose(s) or for another HIPAA permissible purpose, such as Research.
 - 1. A Team Member or User is prohibited from accessing their **own** medical record for any purpose.
 - Team Members and Users may access their medical records through MyChart or by completing a records request with Health Information Management using <u>Release of</u> <u>Medical Information</u>.
 - 2. A Team Member or User is prohibited from accessing a patient's medical record, including the record of a family member or friend, for personal purposes.
 - a.) Personal purposes include, but are not limited to, patient request, curiosity, and out of personal concern or interest in the patient's wellbeing.
 - b.) With proper permission, Team Members and Users may access family members' and friends' medical records, through proxy MyChart access or via a records request submitted to Health Information Management by the patient or the patient's personal representative using Release of Medical Information.
 - c.) A Team Member or User may access a family member's or friend's medical record for a permissible **TPO** purpose, if directly related to the Team Member's or User's job responsibilities; however, the Team Member or User should notify their leader prior to such access.
- B. Any access to a patient's medical record permitted under this policy must be limited to the minimum necessary to perform the required job responsibilities. Refer to Minimum Necessary Requirements for Uses and Disclosures of Protected Health Information (PHI) Policy.

Entities will reference associated Documentation contained within this document as applicable Printouts of this document may be out of date and should be considered uncontrolled.



6. Revisions

Corewell Health reserves the right to alter, amend, modify or eliminate this document at any time without prior written notice.

7. References

- HIPAA Privacy and Security Regulations 45 CFR §164.304, 45 CFR § 164.306, 45 CFR §164.530, 45 CFR §164.502, 45 CFR §164.501, §164.508, §164.512(i) (See also 45 CFR §164.514(e), §164.528, §164.532)
- Corewell Health Acceptable Use Policy
- Corewell Health System Privacy Program
- Using and Disclosing Protected Health Information (PHI)
- Minimum Necessary Requirements for Uses and Disclosures of Protected Health Information (PHI) Policy
- Do Not Provision Access Policy

8. Policy Development and Approval

Document Owner:

Rhoda Mattson (Mgr, Privacy)

Writer(s):

Jennifer Fisher (Compliance Partner)

Reviewer(s):

Cortney Schaffer (Dir, Info Gov/Risk/Compl/Priv), Susan Tylutki (Dir, HIM Operations)

Approver:

Leah Voigt (SVP, Chief Compliance Officer)

9. Keywords:

hipaa, ehr, emr, medical record, access, notice of privacy practices, joint notice, uses and disclosures of phi, protected health information, phi, ephi, electronic protected health information, hipaa, TPO, covered entity, joint notice of privacy practices, privacy, security, privacy practices