



DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY
2480 LLEWELLYN AVENUE
FORT GEORGE G. MEADE, MARYLAND 20755-5800

REPLY TO
ATTENTION OF

30 July 2004

POLICY STATEMENT NO. 15

CONFIDENTIALITY OF PATIENT INFORMATION

1. **References.**

- a. AR 25-2, Information Assurance, 14 November 2003.
- b. AR 40-66, Medical Record Administration and Health Care Documentation, 10 March 2003.
- c. DoD 6025.18-R, DoD Health Information Privacy Regulation, 24 January 2003.

2. **Policy.** Department of the Army (DA) policy states that medical confidentiality for all patients will be protected as fully as possible. Within DA, medical information will be used in the diagnosis, treatment, and prevention of medical and dental conditions. It will also be used in connection with the health of a command to monitor the delivery of health care services, medical research, medical education, and other official purposes. Unauthorized disclosure of medical information is grounds for administrative or disciplinary action against the informant.

3. **Staff guidelines.** This policy applies to all staff members assigned or attached to Kimbrough Ambulatory Care Clinic (KACC) or any of its outlying clinics.

a. **Confidentiality of patient information.**

(1) Generally, medical treatment facility (MTF) medical information includes all information that pertains to evaluations, findings, diagnosis, or treatment of a patient. The terms also include any other information given to Army Medical Department health personnel in the course of treatment or evaluation. (Paramedical documents, such as immunization registers and dosimetry records, are not considered medical information even though they are kept in the same file with medical records.)

(2) Medical information is confidential and private. Personnel not involved in a patient's care or medical research are generally not entitled access to a patient's records. Exceptions to this restriction are allowed when access is required by law, regulation, or judicial proceeding; when access is needed for accreditation; or when access is authorized by a patient.

(3) Medical information is seen by clerical and administrative personnel. This access is necessary to a facility to process medical records properly; however, it does not give those persons any inherent right of access. Each of these persons have a professional and ethical obligation to keep medical information confidential.

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(4) Disclosure and/or release of medical information within a medical record is governed by AR 40-66, chapter 2. All requests for release of medical information will be handled by the patient administrator. At KACC, the Chief, Patient Administration Division (PAD), is the releasing authority.

(5) Confidentiality also applies to information concerning employees in KACC and its outlying clinics that a staff member learns of during the course of his or her employment. This information will be treated with the same confidentiality as patient medical information.

(6) Army medical records are the property of the Government and will remain in the custody of military MTFs at all times, except when being transferred from one military MTF to another. Medical records are the Government's record of the medical care that it has rendered to its patients. Positive control of these records is essential for good medical care, quality assurance, and risk management.

b. Confidentiality of non-medical information. Personnel, payroll, billing, insurance, and demographic information, including homes addresses or individuals' dates of birth, are also considered confidential and are covered by this policy.

c. Confidentiality of patient related discussions.

(1) A patient's medical confidentiality needs to be maintained when orally discussing a patient's medical condition. Such discussions should only take place where they cannot be overheard.

(2) It is never appropriate to discuss patient medical information outside of the MTF, and never with family or friends.

d. Disclosure and/or release of medical information. Disclosure and/or release of medical information within a medical record is governed by AR 40-66, chapter 2. All requests for medical information will be handled by the patient administrator. At KACC, the Chief, PAD, is the releasing authority.

e. Computer security. Users logged into computers and terminals will not leave them unattended without exiting the system or involving password-protected security features, nor will users allow others to access or edit information under the users' passwords. If at any time a staff member suspects that his or her password is known by other personnel, he or she must change the password. Information Management Division will assist if the user requires assistance. All users are automatically prompted to change, and must change, their passwords periodically. (Composite Health Care System users are required to change their passwords every 90 days, and local area network users are required to do so every 150 days.)

f. **Facsimile transmissions.** Facsimile transmission (that is, faxing) of confidential patient information is authorized, provided the following statement appears prominently on the cover sheet:

“ This facsimile transmission cover sheet and all documents which may accompany it (the message) contain information intended for the exclusive use of the addressee. This message may contain information that is privileged, patient-confidential or otherwise exempt from disclosure under applicable law. If you are not the addressee, you should refrain from examining this message. Any disclosure, dissemination, distribution, copying or other use of this message or its substance is prohibited. If you have received this message erroneously, please notify us immediately by telephone (see the phone number above) and return it to us by mail. Thank you.

FAX LEGAL”

g. **E-mail transmissions.** Transmission of confidential patient information by e-mail is authorized provided the e-mail transmission is encrypted.

h. **Penalty for unauthorized release of information.** Unauthorized disclosure of medical information is grounds for administrative or disciplinary action against the informant.

i. **Penalty for unauthorized retrieval of information.** Unauthorized retrieval of medical information is grounds for administrative or disciplinary action against the informant. Access to patient information may be made only on a need-to-know basis.

4. MEDDAC Form Letter (FL) 200-R, Patient Confidentiality Acknowledgment Statement.

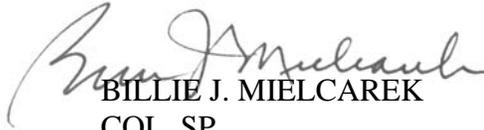
a. Upon assignment to a work area (initial assignments and reassignments), a copy of this policy will be issued to the employee (soldier, DA civilian and contract employee) by the supervisor (officer, NCO or civilian) of the work area. The employee will be required to read and sign MEDDAC FL 200-R (enclosure 1) upon initial assignment to the work area and annually thereafter (in January) while employed within the work area. The same copy of the form will be used for initial and annual update purposes. The supervisor will retain the form in the work area for three years following the end of the year (for example, 31 Dec 02) that the employee ceases to be employed there.

b. The Quality Management Coordinator will inspect the MEDDAC FLs 200-R maintained in all work areas annually. Inspections at the outlying clinics will be conducted during scheduled assistance visits.

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c. Additional copies of MEDDAC FL 200-R may be obtained by reproducing them from this policy.

Encl
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BILLIE J. MIELCAREK
COL, SP
Commanding

DISTRIBUTION:
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PATIENT CONFIDENTIALITY ACKNOWLEDGMENT STATEMENT

(For use of this form, see MEDDAC (Fort Meade) Policy Statement No. 15.)

I, _____, acknowledge that I have received a copy of MEDDAC (Fort Meade) Policy Statement No. 15, subject: Confidentiality of Patient Information. I have read the policy statement and understand its contents and how it applies to my position. I understand that breach of this policy may lead to disciplinary action, up to and including dismissal. I also understand that I am to ask my supervisor if at any time I have questions concerning patient confidentiality.

Employee's signature: _____ Date signed: _____

Annual renewal of acknowledgment:
(In January of each year.)

Employee's signature

Date signed

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