

RESPONSIBLE DEPARTMENT: Corporate Compliance	SUBJECT: RHIO Break the Glass
NUMBER OF PAGES: 2	REPLACES POLICY: 02/2019
EFFECTIVE DATE: APRIL 2024	POLICY ID. ADM-CC

SCOPE:

This policy applies to all employees at Community Memorial Hospital (CMH), Family Health Centers (FHC), and Specialty Clinics.

PURPOSE:

The purpose of this policy is to comply with all requirements regarding the use of information from *HealtheConnections*, which is the Regional Health Information Organization (RHIO) for Central New York

POLICY STATEMENT:

It is the policy of Community Memorial Hospital to comply with all requirements regarding the use of information from *HealtheConnections*, which is the Regional Health Information Organization (RHIO) for Central New York. Patients must provide written consent in order for providers to access their health information in the RHIO. Consent is entity-based, meaning that when a patient signs a HealtheConnections Consent Form, they are allowing all providers and staff members that are authorized users in that organization to access their information. Only in emergencies can providers access the patient’s information on the RHIO without consent. However, if a patient declines access to their data as indicated on the consent form, their information cannot be accessed even in an emergency situation. Emergency situations: Information can be accessed without a consent form as long as:

- In the provider’s best judgment, an emergency condition exists and the patient is in immediate need of medical attention and attempting to secure consent would result in the delay of treatment and;
- Consent cannot be obtained due to patient’s condition (e.g., unconscious) and a personal representative is unavailable or,
- No denial of consent to access the patient’s information is currently in effect and,
- The patient’s PHI is no longer accessed once the emergency treatment has ended.

PROCEDURE:

1. When patient information is accessed in the RHIO for an emergency situation, it is known as “Break the Glass” (BTG). The RHIO sends BTG accounts to the Compliance department to review and determine if the access was appropriate. The Chief Medical Officer, Department Chief, and/or Practice Administrator may be consulted as necessary.
2. When it has been determined that an end user inappropriately accessed an account using the “Break the Glass” function, a corrective action form will be sent to the end user indicating the account(s) that were accessed and why the access was not appropriate. The end user and manager will be responsible to complete the corrective action and return the form to the Corporate Compliance department.
3. In the event a second occurrence is confirmed, a letter will be sent to the end user advising that subsequent violations will result in revocation of the end users access in accordance with RHIO policies and state law. Information regarding the first and second BTG occurrences will also be sent to the Senior Leadership team for review.
4. In the event a third occurrence is confirmed within the calendar year, a letter will be sent to the end user advising that the end user’s RHIO credentials have been deactivated by the RHIO Administrator due to the multiple occurrences of improper use.
5. Reinstatement of RHIO credentials will require end users to complete training and sign an acknowledgement of training and compliance.

Joint Commission: IM.02.02.07

CMS: 482.24

DOH: 405.10

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6. Any future incident will result in potential termination of the pend user's RHIO access.

DOCUMENTATION: Applies to Hospital-wide

DEFINITIONS:

- **Regional Health Information Organization (RHIO)** - a group of organizations within a specific area that share healthcare-related information electronically according to accepted healthcare information technology (HIT) standards.

REFERENCES:

- "Training Materials." HealtheConnections, www.healtheconnections.org/what-we-do/hie-services/trainingmaterials/

Approved by:



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