

<b>Title:</b>	3.3.10, Confidentiality and Privileged Communication		
<b>Subject:</b>	Consumer Treatment, Training, and Living		
<b>Section:</b>	Clinical		
<b>Policy:</b> X <b>Procedure:</b> <input type="checkbox"/>	<b>Issued by:</b> Quality, Customer Service, Recipient Rights Director	<b>Effective Date:</b> 4/12/84	<b>Applies to:</b> X All CMHA-CEI staff X Contract Providers
<b>Page:</b> 1 of 2	<b>Approved by:</b> Recipient Rights Committee and Board of Directors	<b>Review Date:</b> 1/27/17	<input type="checkbox"/> <b>Other:</b>

I. **Purpose:** To establish guidelines regarding the protection and disclosure of confidential information and privileged communications.

II. **Policy:**

- A. Information in the clinical record of a recipient, and other information acquired in the course of providing mental health and substance abuse services to a recipient shall be kept confidential and shall not be open to public inspection.
- B. Disclosure of confidential information shall comply with requirements of law, rules, this policy, and established procedure. Any other disclosure of confidential information is prohibited.
- C. Employees, volunteers, and agents of the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties (CMHA-CEI) and providers with a need to know clinical information in order to provide services to a recipient may access the clinical information.
- D. CMHA-CEI and providers shall maintain a system for keeping clinical records which is consistent with a high standard for confidentiality.
- E. The recipient's plan of service shall not contain privileged information or communication.
- F. The records, data, and knowledge collected for or by individuals or committees assigned a peer review function are confidential, shall be used only for the purposes of peer review, are not public records, and are not subject to court subpoena. This information shall not be contained in recipient records. Please refer to the Peer Review Procedure 3.2.08D, for more information on peer review.
- G. CMHA-CEI and providers may charge a reasonable fee for copies of clinical records. Consumers may receive a copy of their clinical record at no cost.
- H. For protected health information of a deceased recipient, an executor, administrator, or other person with court ordered authority to act on behalf of the deceased recipient or the deceased recipient's estate shall be considered the personal representative, and shall be treated as if he or she was the recipient.
- I. Violations of the confidentiality provisions contained in this policy will be subject to firm and fair administrative action, up to and including termination from employment, or termination of service contracts. Unauthorized disclosure of consumer information relating to substance abuse is considered a federal criminal offense. A person who violates the confidentiality of a consumer with a serious communicable disease including HIV, AIDS, or ARC is guilty of a misdemeanor.

**III. Responsibilities:**

- A. All staff (employees, volunteers, and agents) of CMHA-CEI and providers are responsible for protecting the confidentiality of information pertaining to recipients of mental health services.
- B. The Director of Quality, Customer Service, and Recipient Rights is responsible for ensuring that policies and procedures to implement the intent of this policy are developed, reviewed, and revised as necessary by providers as appropriate.

**V. Monitoring and Review:**

This policy is reviewed annually by the Director of Quality, Customer Service, and Recipient Rights. It is monitored by accrediting bodies and regulatory agencies as applicable.

**VI. References:**

42 CFR Part 2  
Michigan Mental Health Code  
MCL 333.5131 (5)(b)  
CMH-CEI Peer Review Procedure, 3.2.08D

**VII. Review Log**

Review Date	Reviewed By	Changes (if any)
8/29/01, 5/24/05, 2/1/07, 12//07, 5/20/10, 2/6/12, 3/10/13	---	---
1/27/17	QI Specialist, QCSRR Director	Update to New Format, include reference to Peer review procedure