POLICY TITLE:	HIPAA Security	POLICY #	REVIEW DATES	
Topic Area:	**INFORMATION MANAGEMENT**	**ISSUED BY:** Chief Information Officer	8/21/14	10/30/17
Applies to:	LRE Staff and Operations, Member CMHSP, LRE Provider Network		9/1/20	12/30/25
Developed and Maintained by:	CEO and Designee	**APPROVED BY:** Chief Executive Officer		
Supersedes	N/A	**Effective Date:** JANUARY 1, 2014	**Revised Date:** 8/10/26	

I. PURPOSE

To protect individually identifiable protected health information and the information systems on which data resides, per the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the HITECH act, the Center for Medicaid and Medicare Services security regulations implementing HIPAA, other federal and state laws protecting confidentiality of protected health information, professional ethics and accreditation requirements.

II. POLICY

Lakeshore Regional Entity (LRE), LRE member Community Mental Health Service Programs (CMHSPs), and the LRE Provider Network will provide for the protection of individually identifiable protected health information. LRE has implemented policies, procedures and plans to safeguard individually identifiable protected health information. The accompanying procedures detail these safeguards.

If any standards specified in the accompanying procedures are violated, immediate sanctions according to the Sanction Procedures will occur.

The HIPAA Security Policy is a result of a thorough Security Risk Assessment (a copy of Risk Assessment will be held by the Security Officer). A Risk Assessment will be conducted as new assets are acquired that may pose additional risk. The Executive Operations Team will review any Risk Assessment completed on new assets, to ensure HIPAA Security and Privacy compliance.

III. APPLICABILITY AND RESPONSIBILITY

The policy applies to LRE staff, Member CMHSPs, and the entire LRE Provider Network.

IV. MONITORING AND REVIEW

The CEO and designee will review the policy on an annual basis.

V. DEFINITIONS

HIPAA: Health Insurance Portability and Accountability Act
HITECH: Health Information Technology for Economic and Clinical Health
PHI: Protected Health Information

VI. RELATED POLICIES AND PROCEDURES

LRE Information Management Policies and Procedures
LRE Compliance Policies and Procedures
LRE Compliance Plan

VII. REFERENCES/LEGAL AUTHORITY

Balanced Budget Act 1997
HIPAA Act 1996
HITECH Act 2009
MDHHS Medicaid Specialty Supports and Services Contract

VIII. CHANGE LOG

Date of Change	Description of Change	Responsible Party
12/16/21	Reviewed	CEO and Designee
12/19/24	Revised to include description of NOPP standards	CEO and Designee
12/30/25	Annual Review. Revised to include standards addressing disclosures of PHI	CEO and Designee
8/10/26	Renamed. Revised to separate HIPAA security and privacy policies.	CEO and Designee