

**PRODUCTS**

- 1. OHDS Form/ Statement
- 2. Privacy Statement Language

HIPAA Organized Health Care Delivery System		
State	Regional	Local
<ul style="list-style-type: none"> <li>• CPS</li> <li>• ADA</li> <li>• Hospitals</li> <li>• Providers</li> </ul>	<ul style="list-style-type: none"> <li>• SLHC</li> <li>• Providers</li> <li>• Hospitals</li> </ul>	<ul style="list-style-type: none"> <li>• Groups of providers</li> </ul>

**Level One**

- 1. Business Associates Language/Contract
- 2. Claims Third Party Payor Language
- 3. Clinical Access

Institutional Review Board (Optional)
<ul style="list-style-type: none"> <li>• Protects for publishing</li> <li>• Additional confidentiality expertise</li> </ul>

Contractual Relationships
<ul style="list-style-type: none"> <li>• Business Associates Agreements as Part of Contract</li> <li>• Claims (837/834 Transactions)</li> </ul>

**Level Two**

- 1. Community Release Form
- 2. BA Agreements, additional partners with no contracts

Local Community
<ul style="list-style-type: none"> <li>• OHDS (Optional)</li> <li>• BA Agreements</li> <li>• Community Releases (Targeted Sharing)</li> </ul>

**Level Three**

- 1. Consent to Treatment form
- 2. Individual Release Forms
- 3. Staff ethics statements

Individual Consumer(s)
<ul style="list-style-type: none"> <li>• Consent to Treatment Release of Information (phone and onsite verification)</li> </ul>

Individual Staff
<ul style="list-style-type: none"> <li>• Need to know rules</li> <li>• Professional Ethics</li> <li>• Organizational Ethics</li> </ul>

**Level Four**

