

**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)**

- Protects for publishing
- Additional confidentiality expertise

**Contractual Relationships**

- Business Associates Agreements as Part of Contract
- Claims (837/834 Transactions)

**Level Two**

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

**Local Community**

- OHDS (Optional)
- BA Agreements
- Community Releases (Targeted Sharing)

**Level Three**

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

**Individual Consumer(s)**

- Consent to Treatment Release of Information (phone and onsite verification)

**Individual Staff**

- Need to know rules
- Professional Ethics
- Organizational Ethics

**Level Four**

