To: Adult Day Care/Adult Day Health Providers, Department of Social Services’ Directors, Department of Social Services’ Adult Services Supervisors, Adult Day Care Coordinators, Adult Day Health Specialists, Area Agency on Aging Directors, Adult Program Representatives

From: Dennis W. Streets

Subject: Submission of Identifying and/or Confidential Information

Date: December 13, 2012

As part of the certification, recertification, violation of standards, and complaint process for adult day care/adult day health services, adult day care/adult day health providers and local monitors submit documentation to the North Carolina Division of Aging and Adult Services (DAAS) staff. This documentation may be for employees and/or participants of programs and may include identifying and/or confidential information. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Pub. L. 104-191, refers to this information as Protected Health Information or PHI. Technical, network and web security groups also refer to this information as Personally Identifiable Information or (PII).

In order to comply with Federal, State and Departmental regulations, directives, and standards regarding the protection and transmission of identifying and/or confidential information, all documentation containing identifying and/or confidential information submitted to DAAS must:

1. Only include information that will be accepted by DAAS and
2. Be submitted in a manner that safeguards the documentation’s contents.

I. Information Submitted to DAAS that Will Be Accepted by DAAS

The North Carolina Adult Day Care and Day Health Services Standards for Certification requires the following for newly hired staff for initial certifications and newly hired staff for recertifications since the last recertification:

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Location: 693 Palmer Drive, Raleigh, NC 27603 • State Courier No. 56-20-02
An Equal Opportunity / Affirmative Action Employer
“Prior to beginning employment, each new employee shall present a written medical statement, completed within the prior 12 months by a physician, nurse practitioner or physician’s assistant, certifying that the employee has no illness or health condition that would pose a health risk to others and that the employee can perform the duties assigned in the job.”

The written medical statement for new employees as outlined above must be documented on the enclosed/attached form. DAAS will no longer accept any other forms.

Use of the enclosed Certified Employee Medical Statement for Employment form is required for any persons hired to an adult day care/adult day health program after January 1, 2013.

This form is enclosed and may be accessed at this web site address: http://www.ncdhhs.gov/aging/adedown.htm

II. Electronic Submission of Documentation to DAAS

DAAS’ email messages, like all state agency email messages, are considered public record and are available for viewing by request and in certain instances, may be released to unintended third parties or to the general public. Because of this, identifying and/or confidential information must never be sent in the body of an email and should only be sent as an attachment to an encrypted email or as an encrypted attachment to an email. Many organizations are not equipped to encrypt emails and/or attachments.

Therefore, prior to submitting documentation to DAAS electronically, the sender must perform an assessment to determine if the documentation contains identifying and/or confidential information. If the documentation to be submitted to DAAS contains any identifying and/or confidential information, it should not be sent within the body of an email message; it should be sent as an attachment to an email message. The attachment containing identifying and/or confidential information or the email with the attachment containing identifying and/or confidential information must be protected by security measures which prevent unauthorized disclosure of its content. Whenever identifying and/or confidential information as listed below is submitted to DAAS electronically (via an attachment to an email), the attached file must be encrypted with a FIPS 140-2 Level 1 certified algorithm of at least a 128-bit strength, AES-256 preferred. The sender must then inform the intended DAAS recipient of the password necessary to open the protected attachment by means of a telephone communication.

Identifying and/or confidential information includes, but is not limited to:

- Individual’s Name
- Individual’s Date of Birth
- Complete Social Security Number or only last four digits of Social Security Number
- Individual’s Address
- Individual’s Phone Number
- Individual’s Medical Statement
- Individual’s Medical diagnoses
- Individual’s Medications
- Individual’s Criminal history.

As an alternative to electronic submission, traditional or courier mail and in an effort to save time and resources, we recommend that all documentation containing identifying and/or confidential
information be faxed to the following number: (919-715-0868) versus being submitted electronically. This is a fax machine located within DAAS and is checked regularly throughout the business day. A fax of this nature should be sent only between the hours of 8:30 AM and 5:00 PM Monday through Friday. The sender of the documentation containing identifying and/or confidential information should contact the recipient to inform him/her that this type of information is being faxed to him/her.

Please help us protect individuals’ identifying and/or confidential information by using the secured fax method described above, encrypted email attachments, traditional or courier mail, thus assuring that any indentifying and/or confidential information is protected from unauthorized access.

For questions regarding this Administrative Letter, you may contact Heather Carter at (919) 855-3416 or Glenda Artis at (919) 855-3412.