

## Manager Authorization for Contractors & Outside Organizations

This form must be completed to authorize a contractor or any employee from a non-UW or non-affiliated organization (treated as a contractor) to perform work for Northwest Hospital & Medical Center, either on NWHMC campus or from a remote location. Completed forms should be sent, with attachments, to Security and the Help Desk prior to the start of work for Northwest Hospital.

Legal Name*			Company*	Job Title / Role*
First	Middle	Last		
Assigned Department		Assigned Cost-Center Code*	Email*	Phone*
Start Date*	End Date* <i>(Max one year – may be extended later)</i>		Licenses (RN, MD, etc.) (Attach copies)	
Physical Location*				
On NWH Campus		Remote Only	Both remote and on campus	
NWH Access*				
NHWMC Network			NHWMC Extranet	
Indicate any applications that will be required:				
PulseCheck (ED)		Soarian Clinicals / EDM	View Only (Job Code 8043)	
MAK (Birth Year: )		Horizon Enterprise Fiscal Mgmt	Model after user:	
GE Centricity Web		Horizon Enterprise Materials Mgmt	Model after user:	
Other Application(s):				
Will this person have access to Protected Health Information (PHI)?			Yes	No
If yes, check which types (all that apply):			Treatment	Payment      Operations
<i>I authorize the above named contractor to perform work for Northwest Hospital. I understand that, as manager, I am responsible for submitting a helpdesk ticket to initiate and terminate computer access for this worker. All necessary contracts, business association agreements, and data security agreements have been completed:</i>				
<i>(Authorizing Manager Signature; must be NWH employed)</i>			<i>(Printed Name)</i>	<i>(Date)</i>
Main contact person for provisioning (if other than authorizing manager):				
Name		Job Title	Extension / Phone Number	
All contractors must provide a complete Background Authorization form, Vendor and Contractor Expectations form and a UW Privacy, Confidentiality, and Information Security Agreement to Security prior to performing work for Northwest Hospital:				
Background Authorization Form (attach)		Vendor and Contractor Expectations Form (attach)		UW Privacy, Confidentiality, and Information Security Agreement (attach)

**Completed and e-signed form should be emailed to [ITProvisioning@nwhea.org](mailto:ITProvisioning@nwhea.org) along with completed forms: 1) Vendor and Contractor Expectations, 2) Background Authorization and 3) UW Privacy, Confidentiality, and Information Security Agreement to be processed.**

**HIPAA** requires that we identify the members of our workforce who need access to PHI (any identifiable patient information) to carry out their duties\*. This applies to both electronic and written information, accessed or disclosed for the purpose of one or more of the following.

- Treatment (direct care—see definition below) and/or
- Payment (financial reimbursement-- see definition below) and/or
- Operations (tasks that support delivery of care—see definition below)

\*Please indicate those titles/positions in which the incumbents access patient information in carrying out the **ESSENTIAL FUNCTIONS** of the job (versus incidental or occasional functions or accidental).

**STEP 1**--The first question to consider is-- does a position (title) require that the incumbents have access to PHI (including as little as demographics like patient name and address) to perform the **essential functions** of the job? If the position does not require PHI access as an essential function, or if only incidental, occasional or accidental PHI access is likely, mark "NO".

**STEP 2**--If the answer to #1 is yes, then what are the types of functions that the position's incumbents do that require that PHI access? Mark "YES" and indicate T, P, and/or O, as applicable.

- a) Providing or coordinating direct treatment, diagnosis, or care of the patient?
- b) Performing payment functions like billing, collections, utilization review, checking that the patient has insurance, etc--doing the things that are related to getting paid for services?
- c) Performing operations functions like QA, contracting, business planning, customer service etc.?

## HIPAA DEFINITIONS

**Protected Health Information (PHI):** any individually identifiable health information, including demographic information

**Treatment** means the provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider to another.

**Payment** means the activities undertaken by a covered health care provider or health plan to obtain or provide reimbursement for the provision of health care; including:

- Eligibility verification
- Coordination of benefits
- Determination of cost sharing amounts
- Adjudication of claims
- Billing
- Claims management
- Collection activities
- Payment for re-insurance
- Related healthcare processing
- Review of services for medical necessity
- Review of coverage for services
- Review for appropriateness of care
- Review for justification of charges
- Utilization review activities
- Pre-certification and pre-authorization
- Concurrent and retrospective review
- Disclosure to consumer reporting agencies relating to collection of premiums or reimbursement

**Health care operations** means any of the following activities of the covered entity:

- Quality assessment and improvement activities, including outcomes evaluation and development of clinical guidelines
- Case management and care coordination
- Reviewing the competence or qualifications of health care professionals
- Training programs for students
- Accreditation, certification, licensing, or credentialing activities
- Underwriting, premium rating, and other activities relating to the creation, renewal or replacement of a contract of health insurance or health benefits
- Conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs;
- Business planning and development
- Business management and general administrative activities, including, but not limited to:
  - Customer service
  - Resolution of internal grievances
  - The sale, transfer, merger, or consolidation of all or part of a covered entity with another covered entity
  - Creating de-identified health information and fundraising for the benefit of the covered entity