



Area: Confidentiality	Applicable Standards: Las Vegas Rescue Mission, Federal and State regulations, NAC 458.163	Pages 1 of 5
Title: HIPAA and Confidentiality	Issued: 7/5/19	Revised: 1/20/2026
Approved by CEO Heather Engle (Signature): <i>Heather Engle</i>		
Dates and Initials When reviewed (Annually): <i>HE</i> 2/17/2026		

Health Insurance Portability and Accountability Act of 1996 and Confidentiality Laws Policy

PURPOSE:

The purpose of this policy is to establish and ensure privacy of persons served in prevention services and treatment services. This includes their care information including any payment for care, protected by two federal laws; the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 C.F.R. Parts 160, 162 and 164 and Confidentiality Law, 42 C.F.R. Part 2.

POLICY:

It is the policy of the Las Vegas Rescue Mission that all employees are trained, understand and follow HIPPA Privacy Standards. While shelter services do not fall under clinical care, it is the policy of the LVRM that staff will make best efforts protect their privacy as well.

DESIGNATION

The Las Vegas Rescue Mission shall designate a Privacy Officer and a Security Officer to support compliance with HIPAA and 42 C.F.R. Part 2.

The Privacy Officer shall oversee privacy and confidentiality practices, address privacy related concerns, and support compliance with applicable state and federal laws.

The Security Officer shall oversee security policies and procedures and support compliance with administrative, physical, and technical safeguard requirements of the HIPAA security rule.

BREACH NOTIFICATION AND RESPONSE

If a breach or suspected breach of confidential client information occurs, the Las Vegas Rescue Mission will follow federal breach notification requirements.



The designated Privacy Officer shall ensure that affected clients, the Office for Civil Rights (Health and Human Services) and any applicable certification or accreditation entities are notified in accordance with federal requirements and that all breaches are documented and reviewed.

DEFINITION:

NAC 458.163 Operators: Responsibilities concerning confidentiality and recordkeeping. ([NRS 458.025](#), [458.055](#)) An operator shall ensure that:

1. The program complies with all applicable confidentiality and recordkeeping provisions set forth in 42 C.F.R. Part 2, 45 C.F.R. Parts 160, 162 and 164, [NRS 458.055](#) and any other applicable confidentiality laws pertaining to the services provided by the program. In the event of a conflict in the confidentiality requirements set forth in 42 C.F.R. Part 2, 45 C.F.R. Parts 160, 162 and 164, [NRS 458.055](#) and any other applicable confidentiality laws, the more restrictive law will apply.

2. A client or participant provides separate and explicit consent to allow the operator or a designee thereof to release information which identifies the client or participant and his or her human immunodeficiency virus seropositive status.

3. The program allows a consultant to have access to confidential information concerning clients or participants only if the confidentiality agreements required by 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164 are satisfied. Such agreements must be maintained in the personnel file of the consultant.

(Added to NAC by Bd. of Health by R120-04, eff. 10-5-2004)

RESPONSIBILITY:

It is the responsibility for the CEO, COO and Senior Management to implement, train, and maintain HIPAA and confidentiality laws and regulations.

It is the responsibility of supervisors and staff to enforce and continue to follow HIPAA and confidentiality laws and regulations.

PROCEDURES:

LVRM will utilize HIPAA Privacy Standards Notice form and Policy in all programs. This may be found posted inside the programs, in program handbooks (if applicable), or reviewed during orientation meetings.

Shelter Guests, Prevention participants or treatment residents will always be given an opportunity to ask questions and review the document, prior to being requested to sign the document. A copy of the document signed will be provided to the signor.

Privacy flyers will be posted at the front gate. This is to provide written notice to any person looking for a loved one. It will provide information on 42 CFR Part 2 as well as how to contact the Metropolitan Police Department for missing persons.

- While information cannot be provided LVRM staff may take down their name, contact information and the information of the person they are looking for. If they are in the



Homeless Management Information System, staff can create a public alert with information.

Releasing Information

A written consent must be completed prior to the release of any SUD treatment information. The following needs to be found on the release:

1. The name(s) of the individual(s) or the name(s) of the entity(-ies) to which a disclosure is to be made.
 - a. The recent Part 2 Amendments that became effective in August 2020 now permit a SUD patient to consent to disclosure of the patient's Part 2 treatment records to any entity, even if it does not have a treating provider relationship with the patient (e.g., the Social Security Administration), without naming a specific person as the recipient for the disclosure. 42 CFR § 2.31(a).
 2. The purpose of the release (eg. Attendance, discharge, drug test results).
 - a. Must be initialed by each item being released
 3. Termination date
 4. Signed by patient and staff
- Releases may be revoked by the patient at any time.

Law Enforcement

Part 2 permits the disclosure of Substance Use Disorder (SUD) treatment records to law enforcement without written consent in the following limited circumstances:

- 1. Reporting crimes or threats on program premises or against program personnel**
 - a. Part 2 permits Part 2 programs to make limited disclosures to law enforcement to report a crime or threat of a crime committed on the program premises or against program personnel. The disclosure must be limited to the circumstances of the event, the patient's name, address and last known whereabouts. 42 CFR §§ 2.12(c)(5). Any follow up information may only be disclosed with patient consent or a court order
- 2. For disclosures to investigate or prosecute patients**
 - a. Warrants and subpoenas are not sufficient to compel disclosure of Part 2 protected records. The Coe-PHI has created a resource for providers who are asked to disclose records in response to an arrest warrant.
 - b. A disclosure may only be made with a valid court order that meets the criteria in 42 CFR § 2.65 for an "extremely serious crime," such as one which causes or directly threatens loss of life or serious bodily injury (including homicide, rape, kidnapping, armed robbery, assault with a deadly weapon, and child abuse and neglect).
- 3. For disclosures to investigate or prosecute a Part 2 program**
 - a. 42 CFR § 2.66 permits the issuance of court orders authorizing disclosure of patient records to investigate or prosecute a Part 2 program (or its employees/agents), if certain conditions are met.

Court Documentations



A subpoena alone is insufficient to release protected SUD records. A general court order is also not enough to override Part 2. Part 2 Specific Court Orders are required for disclosure without patient consent.

ICE

1. A sign will be hung at the security guard post for LVRM's front entry designating the Las Vegas Rescue Mission as a "Non-Public Area."
 - a. Non-public areas include all residential spaces, dormitories, offices, counseling rooms, medical spaces, storage areas, and any area not open to the general public.
2. ICE may only be given entry to LVRM grounds if they present with a judicial warrant.
 - a. A judicial warrant can be either a search warrant or an arrest warrant. A federal judicial warrant required prompt compliance. To be valid, a judicial warrant must include the following:
 - i. Signed by a judicial officer (a judge or a magistrate)
 - ii. Specify the place to be searched and the persons or items to be seized
 - iii. Have the correct date and have been issued within the past 14 days.
 - b. If the warrant is missing one or more of these requirements, **it is invalid**. Anything with an incorrect date, wrong address, or signed by an ICE agent is not valid.
 - c. A search warrant is a type of judicial warrant that allowed police to enter the address listed on the warrant, but officers can only search the areas and for items listed in the warrant.
 - i. The search warrant must state specifically the place to be searched and the items to be seized.
 - ii. Staff should tell the officers they are only allowed to search the areas identified in the warrant and point out those areas.
 - iii. If officers search areas that are not included in the warrant, staff should tell the officers that they are searching in an area that is outside of the warrant area and out of bounds.
 - iv. If the officers ask to search areas not identified in the warrant, staff should say, "No. You are not authorized to search that area and it is our policy to not allowed searches without warrants."
 - d. An arrest warrant allows police to detain a person for a particular crime. If a warrant is properly executed, staff should only provide agents with access to areas specified in the warrant.
 - i. Staff should say, "I'm sorry, but this is private property, and we do not consent to your searching our facility," if officers request to access parts of the facility not identified in the warrant.
 - e. An ICE administrative warrant is signed by an immigration officer, not a judge or magistrate. ICE administrative warrants are far more limited than judicial warrants.
 - i. An ICE administrative warrant allows ICE officers to arrest non-citizens suspected of committing immigration violations.
 - ii. It does not give ICE officer the right to enter or search the non-public areas of a service provider's facility unless the facility consents to the search.



3. Staff should take the following protocols when working with law enforcement or ICE officers:
 - a. Respect – treat all law enforcement officers with respect. Never attempt to physically touch or interfere with an officer’s movement.
 - b. Notify Supervisors – in the event of any law enforcement action, immediately notify a supervisor.
 - c. Request to see a warrant – law enforcement officers generally may not enter private areas of the facility without a warrant signed by a judge or an invitation by a facility supervisor, staff, or administrator. Exceptions for police officers may include circumstances such as in the event of an emergency. Police can search without a warrant if they believe that evidence may be destroyed, or someone may be in danger if they wait to get a warrant. For example, if police are in “hot pursuit” of a criminal, they can enter a private residence without a warrant. ICE agents, however, are not police, and the hot pursuit exception only applies to them if they are pursuing “an individual who poses a public safety threat” or a person who the agent “personally observed border -crossing.” Moreover, ICE agents sometimes wear uniforms that say “Police,” even though they are not police officers. As staff gathers the officer’s name and badge number, they should also ask if they are Police or ICE agents. Make copies of all documents that the officer provides.
 - d. **No warrant = no access and no information** – do not answer questions, provide information, or allow access to non-public areas of the facility without a warrant signed by a judge. All law enforcement officers should be immediately informed of the facility’s policy:

“Law enforcement officers do not have consent or permission to enter the non-public areas of the facility or to access our records or information without a valid warrant signed by a judge.”
4. Do not physically interfere with enforcement – staff should not interfere with law enforcement officers, even if they are exceeding their authority. However, requesting to see a warrant, asking for identification, informing officers of facility policies, and denying access to non-public, private spaces if not interfering with law enforcement. Do not fear refusing to give officers consent to search the facility or asking to see a judicial warrant. Verbally refusing to allow a search without a warrant or asking to see a warrant is not illegal harboring or an obstruction of justice. Do not lie to immigration officers. Staff can instead decline to answer an officer’s questions of remain silent.
5. Contact legal counsel and document everything – all enforcement actions by law enforcement must be documented immediately. Request and record names and badge numbers of each officers. Facility supervisors should contact legal counsel as soon as possible.