HIPAA
Health Insurance Portability and Accountability Act

TRAINING
FOR ALL MEDICAL SERVICE PROVIDERS
What part do "U" play in implementing HIPAA?

How does this law affect your role?
HIPAA regulations were designed to:

1) Protect individuals’ rights to privacy and confidentiality
2) Assure the security of electronic transfer of personal information

Protecting privacy and confidentiality rights, is the subject of this instructional program.
Health information can be used by multiple agents in the course of treatment for a health problem. Below are just a few of the agencies and individuals who may handle health information.

- Admitting clerks
- Caregivers from the ER all the way to the morgue
- Physical therapists
- Nutritionists
- Lab personnel
- Receptionists in MD offices
- Transport techs
- Respiratory therapists
- Billing clerks
- Insurance agents/clerks
- School teachers/nurses
- Home health personnel
- Medical records clerks
- Website managers
HIPAA applies to all healthcare workers in all settings.

That means “U”.
Objectives

After completing this program you will be able to:

* Discuss the general concepts of HIPAA guidelines
* Adapt HIPAA guidelines for the various settings in which you might practice as a healthcare provider
* Discuss the seven patient/client rights regarding his/her health information
* Differentiate individuals who have a ‘need to know’ from those who don’t. This determines those with whom you can discuss protected health information
* Discuss application of HIPAA to the student role
* List legal, professional, and academic consequences of violating HIPAA rules
Why HIPAA??

Genetic advancements - as more is known about our genetic predisposition to diseases, HIPAA will ensure that, for example, an individual is not denied insurance because the company knows that she may eventually develop MS.

Marketing - as information is more easily captured concerning, for example, the prescriptions we purchase, HIPAA is designed to prevent marketing of unsolicited products or services based on harvested marketing data.

Technology - as information is quickly and sometimes loosely moved around networks, HIPAA standards will hold violators accountable for accidental or intentional ‘interception’ of protected health information (PHI).
An Atlanta truck driver lost his job in early 1998 after his employer learned from his insurance company that he had sought treatment for a drinking problem.

The late tennis star Arthur Ashe’s positive HIV status was disclosed by a healthcare worker and published by a newspaper without his permission.

Tammy Wynette’s medical records were sold to National Enquirer by a hospital employee for $2,610.
When and How Often do I need to be Certified?

* The law requires that we comply with the regulations and adhere to agency guidelines.

* The training you will receive upon the completion of the EpilepsyU HIPAA Training program will be sufficient until new or updated policies are developed by the Department of Health and Human Services.

* Be aware that individual agencies may have unique HIPAA policies, and it is your responsibility to know and implement those policies.
What Objectives do the Privacy Regulations Accomplish for Patients?

• Give patients more control over their health information.

• Set boundaries on the use and disclosure of health records.

• Establish appropriate safeguards for all people who participate in or are associated with the provision of healthcare to ensure that they honor patients’ rights to privacy of their PHI.

• Hold violators accountable through civil and criminal penalties.

• Strike a balance when public responsibility requires disclosure of some forms of data— for example, to protect public health.
HIPAA TERMS AND ACRONYMS

* **Protected Health Information (PHI) or Protected Medical Information (PMI)** This is any data about the patient that would tend to identify the individual: name, hospital #, SSN, diagnosis, lab results, past or current photos, etc.

* **Privacy Officer (PO)** Each facility will have an employee who is responsible for implementing and enforcing this law. Some organizations may have one over a multi-facility network, others will have one at each site.

* **Covered Entity (CE)** This includes any health plan, healthcare provider, agency that processes claims, and any company that subcontracts with them are covered by this law.
More Terms

• **Release/Disclosure**  These are terms used in describing the release of PHI to other CEs for TPO, treatment, payment, or health care operations.

• **Accounting of Disclosure** (AOD) The patient has the right to have an AODs for his PHI or PMI.

• **Directory**  This is CE’s census or list of patients used by volunteers and operators to direct visitors.

Different agencies may have other terms they use to communicate HIPAA policies. You will need to keep alert to these instances to comply with the spirit of the law.
Basic Principles

• The seven rights in the HIPAA privacy guidelines
• Using equipment--computers, printers, fax, and similar machines to transmit patient data
• Identifying patients/clients PHI
• Discarding or destroying papers containing patient PHI
• Communicating privacy questions/concerns in the agency
• Describing the consequences of violating HIPAA guidelines
The Seven Patient Rights Regarding Privacy of PHI (Protected Health Information)

- Individuals have the right to:

  1. **Receive notice** of an agency’s privacy practices.
  2. **Know that an agency will use** its PHI ONLY for treatment, payment, operations (TPO), certain other permitted uses and uses as required by law.
  3. **Consent to and control** the use and disclosure of their PHI.
4. **Access** their protected health information (PHI), except for psychotherapy notes. Patients may be charged for copies if agency permits.

5. **Request amendment** or addendum to their PHI (not always granted)

6. **Receive accountings** of disclosures

7. **File privacy complaints** to agency officer
• Personal information cannot be released to individuals or companies interested in marketing ventures, without the patient’s written permission. For example:

– Names of patients on antihypertensive drugs cannot be released to a company marketing nutritional products to lower blood pressure.

– Names and addresses of pregnant women cannot be provided to infant formula companies.

– Contact information of previous patients cannot be used to raise money for a hospital building campaign.
How do we assure patients’ rights to privacy and confidentiality?
Who has Access to PHI?
The ‘Need-to-Know’ Principle

- PHI should be shared with as few individuals as needed to ensure patient care and then only to the extent demanded by the individual’s role.
- For example, a doctor’s nurse or assistant only ‘needs to know’ the facts concerning the patient’s current admission.
- As an employee, you will discuss PHI only as it applies to your job or your patient’s care.
Protecting your patient’s PHI

[*] Take all reasonable steps to make sure that individuals without the ‘need to know’ do not overhear conversations about PHI.

[*] DO NOT conduct discussion about PHI in elevators, cafeterias, hallways or any place where you may be overheard.

[*] Do not let others see your computer screen while you are working. Be sure to log out when done with any computer file.
Protecting your patient’s PHI

As an employee of an agency you must use the agencies’ security procedures to transmit PHI.
Destroying PHI/PMI

- DO NOT put PHI/PMI in the trash or recycling.
- A paper shredder is the best place to dispose of PHI/PMI.
Potential Consequences of HIPAA Violations

Professional consequences:
- Disciplinary action
- Dismissal

Legal consequences:
- Civil or criminal penalties
- Fines plus imprisonment
Test Your Knowledge
Johnny, an active 4 year old, breaks his arm after falling from a climbing form at his daycare. As the nurse caring for him after the casting, you know that he is HIV positive. Your daughter attends the same daycare. You alert some of the other moms at that center.

What’s wrong with this scenario?

Who in this setting has a ‘need to know’ the HIV status of this child?
Sharing this information with the other parents is a violation of the HIPAA statute—ensuring the child’s/family’s right to privacy and confidentiality.

The other parents did not ‘need to know’ this information. Really, nobody has the ‘need to know.’

A good action on your part as a health care provider would be to look into the day care’s first aid policies and help them develop policies that observe universal precautions in the care of all children and staff. This should be done even if you didn’t know that one of the children were HIV positive.
You work at the neurological unit at the public hospital. You were able to convince your best friend to move to the unit and work with you. In the cafeteria, she begins telling you about this handsome guy that was just admitted after a bad car wreck. She continues to tell you some of the gory details including ‘driving while intoxicated’ (DWI). What should you do?

A. Remind her of HIPAA and tell her that you shouldn’t discuss this type of information.
B. Ask her how old he is.
   • Tell her to get his phone number from the chart.
   • Call the agencies/networks privacy official.
   • Report her to her head nurse
The correct answer is A. Help her recall her responsibilities to the patient’s right to confidentiality and privacy.
Consulting Physician Calls

You are the case manager caring for Mr. Sanchez. His physician has called in several consultants to assist with his care. One of the physicians, Dr Han, a neurologist, calls to get some information about Mr. Sanchez. Can you release information to her?

A. No, she is going to have to come in to be identified.
B. Her request would need to be forwarded to the unit manager.
C. No, she should be instructed to contact Mr. Sanchez’ primary physician.
D. After obtaining sufficient info to know that it is Dr. Han, you can share the requested information
“D” is the correct response. It is not a violation of HIPAA if you institute reasonable assurances to protect the security of the patient information and then disclose to another person who has a ‘need to know.’ PHI can be shared with other caregivers for TPO (treatment, payment, & agency operation) without getting additional approval from the patient.
Patient’s Spouse Wants to Read the Chart

Your patient, Ms. Johnson, has confided in you that she and her husband have been having marital problems. One day while she is at x-ray, her husband asks to see the chart. You think that she might not want him to see it, but you’re not exactly sure how to handle the situation. What should you do?

A. Let him see it.
B. Refer the request to your manager.
C. Tell him no, that the chart belongs to his wife and that you must have direct permission from her to let him see it.
D. Delay him, saying that there is nothing in her chart of interest.
“C” is correct. You must not let him see the chart until you have a chance to ask Ms. Johnson.
A FINAL REVIEW

Answer the following three questions.
1. Do patients have a right to see their chart?
Yes. Patients are allowed to see their charts and medical records upon request.
2. Is all PHI in the patient’s chart?
No! PHI can come in many forms, including a casual conversation with the patient to disclosed financial information.
3. Should personal digital assistants (PDAs) and Smart phones, clipboards, floppy disks, zip drives, and CD-ROMs used for storing PMI, care-plans, process recordings, or patient assessments forms must be protected as we protect the patient’s chart?
Yes! All of these data storage mediums may contain PHI.
Complying with HIPAA guidelines is an important part of a healthcare provider’s role. As a health care worker/provider, failure to comply can result in professional, civil, or criminal consequences.

Thank you for viewing this HIPAA Training.
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