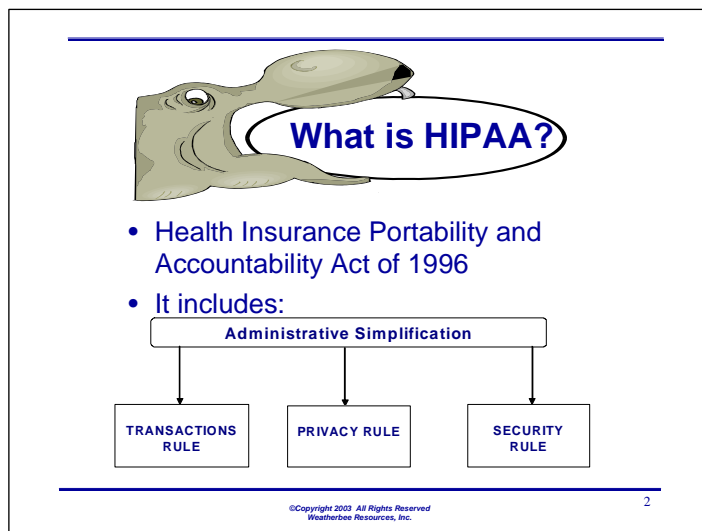


- The requirements of the HIPAA Privacy Rule inform our privacy practices and our commitment to protecting the privacy of the health information of our patients.
- The purpose of this in-service is to help you understand our privacy practices.
- It is also important that you understand your responsibility to help our agency ensure that we are doing everything possible to protect patient health information from unauthorized uses and disclosures.




- The Health Insurance Portability and Accountability Act was signed into law in 1996.
- At that time, most attention was paid to the provisions of HIPAA that deal with allowing us to keep our health insurance if we lose or change our jobs.
- The Administrative Simplification provisions of HIPAA are the ones we are concerned about here and they are the ones that have a significant impact on all health care providers.
- The three major components of Administrative Simplification: the Transactions, Privacy and Security Rules, are discussed in the next slides.

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## ***THE TRANSACTIONS RULE***

- Standardizes (and simplifies) how specific electronic transactions involving health information are transmitted
- The Transactions Rule made the Privacy and Security Rules necessary




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- The goal of the Transactions Rule is to simplify and standardize how certain electronic transactions are conducted.
- By doing this, the health care industry is more efficient, uses technology more effectively and hopefully reduces costs.
- With so much more health information being transmitted electronically, it is more vulnerable to wrongful use or disclosure. Therefore there is a need for additional regulations to keep health information private and secure.

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## ***THE SECURITY RULE***

- Protects health information in electronic form from alteration, loss or destruction and from unauthorized access
- Security and privacy go hand in hand – you can't have one without the other




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- The Security Rule includes many requirements to ensure that health information is protected from accidental or intentional alteration, loss or destruction.
- The Security Rule's requirements also prevent health information from being available to persons who should not have access to it.
- The requirements of the Security Rule apply to electronic health information, for example, on desktop and laptop computers, networks, CD-ROMS, and email transmitted over the Internet.
- The security requirements facilitate the protection of the privacy of health information.

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## ***THE PRIVACY RULE***

- Protects health information from unauthorized uses and disclosures
- Provides, for the first time, nationwide minimum standards for the protection of the privacy of health information
- Provides health care consumers with more control over the uses and disclosures of their health information

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- The purpose of the Privacy Rule is to protect health information from being used or disclosed inappropriately.
- Before the Privacy Rule, it was up to individual States to protect a patient's privacy – some States did a good job, others did not.
- With the Privacy Rule, all health care consumers throughout the United States have a similar level of privacy protection.
- With the privacy rights required by the Privacy Rule, health care consumers have more control over how their health information is used and disclosed.

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## ***THE PRIVACY RULE AND US***

- Most health care providers (including us) are considered *covered entities* and are required to comply with the Privacy Rule
- Compliance with the regulations involves significant effort on everyone's part to protect every patient's health information

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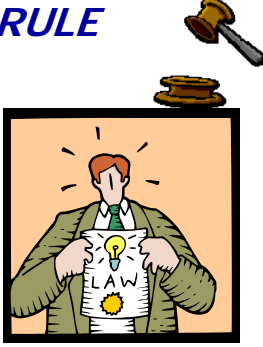
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- Like other health care providers, we are what the Privacy Rule defines as "covered entities."
- A covered entity is any health care provider, health plan or health care clearinghouse that transmits health information electronically (for instance, submitting claims to Medicare).
- All covered entities are required to comply with the requirements of the Privacy Rule.
- In order to meet the requirements of the Privacy Rule, everyone in the agency must understand his or her responsibilities with respect to patient health information.

***WHY WE COMPLY WITH THE  
PRIVACY RULE***

- It is the law – and therefore not an option (It is also the right thing to do)



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- The Privacy Rule is a Federal law.
- It is not an option to disobey the law.
- Protecting patient privacy and ensuring that a patient's health information is safeguarded is the right thing to do.
- As health care consumers ourselves, it is reassuring that all health care entities are required by the government to protect our health information.

***WHY ELSE WE COMPLY WITH  
THE PRIVACY RULE***

- There are significant civil and criminal penalties if we do not comply





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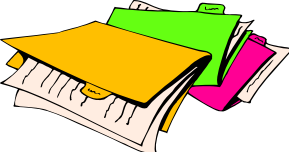
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- Apart from it not being an option and being the right thing to do, if we do not comply with the requirements of the Privacy Rule, we risk having to face significant civil or criminal penalties – in the worse case scenario, even jail.
- We require that all members of our workforce comply with our privacy practices. Failure to do so results in disciplinary action, even possibly losing your job.

***PROTECTED HEALTH INFORMATION (PHI)***

- Is any information, in electronic, written or oral form, that relates to an individual's past, present or future health condition



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- The information that is protected by the Privacy Rule is called protected health information (PHI).
- The specific information that is protected is any information related to a patient's health condition that could identify the patient.
- This is information that could identify the patient that is maintained in medical records, in computers, in conversations we have with each other, in reports, in billing records – everywhere throughout the agency.
- It is our job to protect our patient's health information from being used or disclosed in ways that are not allowed and that violate their privacy.

***THE ESSENCE OF THE PRIVACY RULE***

- We are only allowed to use or disclose PHI in ways permitted or required by the Privacy Rule
- We are allowed to use and disclose PHI for treatment, payment and health care operations
- For all other purposes, the patient must sign an authorization form allowing us to use or disclose his or her health information

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- The Privacy Rule explains ways that a patient's health information is allowed or required to be used or disclosed.
- To ensure that the requirements of the Privacy Rule do not hamper the provision of health care, a patient's health information is allowed to be used or disclosed for treatment, payment and health care operations.
- We must obtain a signed authorization form from the patient when their health information is used or disclosed for purposes other than treatment, payment or health care operations.

## ***TREATMENT AND PAYMENT***

- Treatment – anything that has to do with providing care to the patient
- Payment – anything that has to do with obtaining reimbursement for services provided



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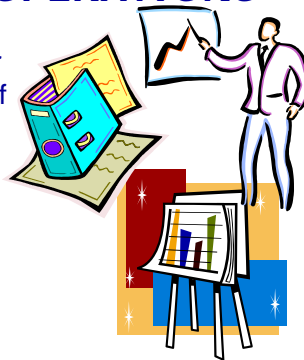
11

- Treatment has to do with case management, care coordination, consultation with other health care providers, referrals and all that pertains to the provision of health care to the patient.
- Payment has to do with all matters related to obtaining or providing reimbursement for health care services provided to the patient.

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## ***HEALTH CARE OPERATIONS***

- PHI may also be used or disclosed for purposes of health care operations
- Healthcare operations includes many management functions that are required to run the agency effectively



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- Health care operations includes many of the day to day activities needed to run the agency.
- For example, PHI is allowed to be used or disclosed for such things as performance improvement activities, risk management, fundraising, training, auditing, and strategic planning.

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## ***HOW WE COMPLY WITH THE PRIVACY RULE***

- We have a Notice of Privacy Practices
- We have a Privacy Official
- We have policies and procedures that describe our privacy practices
- We honor patient privacy rights
- We use, disclose and request only the minimum amount of health information needed
- We provide safeguards for written, electronic and oral protected health information

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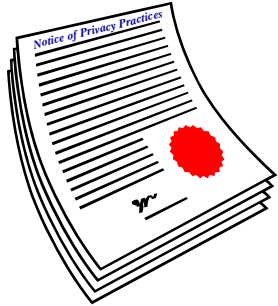
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- There are many things we do to comply with the requirements of the Privacy Rule.
- This is a list of some of them that will be explained in more detail in the next slides.

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## ***THE NOTICE OF PRIVACY PRACTICES***

- Tells patients how we are allowed and required to use and disclose their health information
- Informs patients of their privacy rights
- Describes the process for complaining about privacy violations



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- Our Notice of Privacy Practices is the foundation of our privacy practices.
- It provides examples of how we use and disclose PHI for treatment, payment and healthcare operations and when we are required to disclose PHI to the government and law enforcement officials.
- It also informs patients of their privacy rights and what they must do to exercise them.
- The process for lodging a complaint regarding privacy violations is also described.

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## ***MORE ABOUT THE NOTICE OF PRIVACY PRACTICES***

- It is given to all patients before we provide care to them and to anyone else who requests it
- We must obtain written acknowledgement from every patient that they have received a copy of our Notice
- When we can't obtain that written acknowledgement, we have to document reasons why not




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- We provide a copy of the Notice of Privacy Practices to all patients before we provide care to them.
- We are required to obtain a written acknowledgement from every patient that they have received a copy of our Notice of Privacy Practices.
- If we are unable to obtain the patient's written acknowledgement, we must document our efforts to do so and explain why we were not able to obtain it.

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## ***PRIVACY OFFICIAL***

- Responsible for all matters related to our privacy practices
- Oversees compliance with the Privacy Rule
- Develops and implements required forms, policies and procedures and documentation
- Receives complaints about privacy violations




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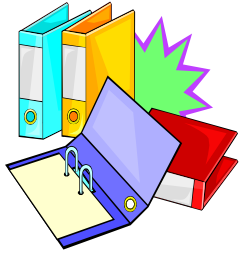
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- The Privacy Official is responsible for all matters related to privacy in the agency.
- The Privacy Official is responsible for ensuring that policies and procedures related to our privacy practices are followed.
- The Privacy Official receives and follows up on any complaints related to privacy violations.
- If you have questions or concerns about patient privacy or any violations that you witness, please contact the Privacy Official immediately.

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## ***POLICIES AND PROCEDURES***



- We have policies and procedures that describe our privacy practices and how we comply with the Privacy Rule
- The privacy policies and procedures are available in the Policy and Procedure Manual or from the Privacy Official

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- All of the privacy practices that are detailed in our Notice of Privacy Practices are further explained in our privacy policies and procedures.
- The privacy policies and procedures are available for reference whenever you have a question or want more information about any of our privacy practices.

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## ***PRIVACY RIGHTS***

- Their purpose is to give individuals more control over how their health information is used and disclosed
- Patients are informed of their rights and how to exercise them in our Notice of Privacy Practices

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- The Privacy Rule provides patients with specific rights with regard to their health information.
- While patients have had some of these rights before (under State laws), now all health care consumers throughout the country have the same level of privacy protections.
- We need to be aware of the patient privacy rights and what a patient needs to do to exercise them.
- If a patient asks you a question about their rights and you are not sure of the answer, contact your supervisor or the Privacy Official to get the correct answers.

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## ***PATIENT PRIVACY RIGHTS***

- Right to receive a copy of the Notice of Privacy Practices
- Right to lodge a complaint
- Right to request restrictions on uses and disclosures of PHI
- Right to request communication in an alternative manner
- Right to request access to PHI
- Right to request amendment of PHI
- Right to request an accounting of disclosures of PHI

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- This is a list of the patient privacy rights as explained in the Notice of Privacy Practices.
- Each of these rights will be described in the next slides.

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## ***Right to Receive a Copy of the Notice of Privacy Practices***

- All patients have a right to be informed about how we use and disclose their health information
- The Notice of Privacy Practices describes our privacy practices
- Our admitting staff must make a good faith effort to obtain written acknowledgement that the Notice of Privacy Practices has been received by the patient or his/her representative

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- All patients have the right to be informed about how their health information is used and disclosed.
- The Notice of Privacy Practices provides this information and all patients have a right to receive a copy of it.
- To ensure that all patients are given a copy of it, the Privacy Rule requires that the patient acknowledge in writing that he or she has received it.

***THE RIGHT TO LODGE A COMPLAINT***

- The process for lodging complaints about our privacy practices is described in our Notice of Privacy Practices
- Staff members who are aware of any privacy violations must inform the Privacy Official




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- Patients or their representatives have the right to lodge complaints about our privacy practices. The process for lodging complaints is outlined in our Notice of Privacy Practices.
- The Privacy Official will follow-up on all complaints received.
- Staff and volunteers may also make complaints to the Privacy Official if they become aware of any potential privacy violations.
- It is everyone's responsibility to protect patient privacy and make sure we are meeting the requirements of the law.

***The Right to Request Restrictions on the Uses and Disclosures of PHI***

- Patients may request a specific limit on how we use or disclose their health information
- All requests for restrictions must be submitted to the Privacy Official for approval
- Any restrictions that are approved must be followed



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- The Notice of Privacy Practices details all the permitted and required uses and disclosures of a patient's health information.
- The patient may request restrictions on how their PHI is used or disclosed even though it is allowed by the Privacy Rule.
- The agency may or may not agree to the patient's request, but, if we do, we must make sure that the agreed to restriction is followed.
- There is a formal process for requesting restrictions that must be followed and it is described in our policies and procedures.

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### ***The Right to Request Confidential Communications***

- Patients may request that they receive communications from us in a manner or at a location that they designate
- For example - a patient may prefer that their health information is discussed only when no one else is present
- If a patient requests confidential communications, all staff who provide direct care must be aware of the request and honor it




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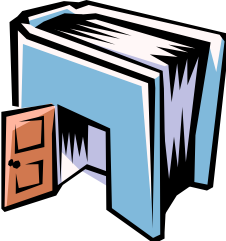
23

- A patient may request that he or she be communicated with in a manner or at a location that may be different from how or where we would normally communicate with them.
- Whenever possible, we try to accommodate all reasonable requests.
- When a patient has requested confidential communications, all staff that provide care to the patient must be aware of the changes in communication with the patient.

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### ***The Right to Request Access to Health Information***

- Patients may request access to their health information in order to inspect or obtain a copy of it
- Requests are reviewed on a case-by-case basis within required time frames specified by the Privacy Rule
- All staff must be aware that their documentation in the patient's clinical record may be reviewed by the patient




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- A patient may request access to his or her health information in order to inspect or copy it.
- There are very specific procedures that must be followed to review and grant or deny requests for access.
- If your job involves entering information in the patient's clinical record, remember that your documentation may be read by the patient. As always, it is important to ensure clear, concise and accurate documentation.

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### ***The Right to Request Amendment of Health Information***

- Patients may request to amend their health information
- They may not alter their medical records but if they believe there are any mistakes, notations may be made in the record if the request for amendment is approved




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- A patient may believe his or her medical records contain errors. If so, he or she may request to have the information corrected.
- There is a very specific procedure that must be followed to review and grant or deny requests for amendment.
- All requests for amendment are reviewed on a case-by-case basis according to policies and procedures.

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### ***Right to Request an Accounting of Disclosures***

- Patients have the right to request an accounting of disclosures of their health information
- This accounting does not include disclosures made for purposes of treatment, payment or health care operations or those that the patient authorized




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- Patients may request an accounting of the disclosures of their health information.
- The accounting does not have to include disclosures made for treatment, payment or health care operations.
- It also does not need to include disclosures that the patient has authorized.
- It is likely that accountings will mostly include disclosures made for public health purposes.
- Again, there are very specific procedures that must be followed that are detailed in our policies and procedures.

**THE MINIMUM NECESSARY STANDARD**

- We do not use, disclose or request more PHI than is absolutely necessary
- We do not use, disclose or request entire medical records unless specifically authorized to do so in our policies and procedures



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- We limit the amount of PHI used by a staff member to the minimum amount necessary to perform his or her job effectively.  
*You must be aware of the amount of PHI to which you are entitled access in order to perform your job.*
- We only disclose to others the minimum amount of PHI needed to achieve the purpose of the disclosure and we only request from others the minimum amount of PHI needed to achieve the purpose of the request.
- Our policies and procedures detail the determinations we have made regarding the minimum amount of PHI necessary in each of these instances.
- We have also determined those circumstances when use, disclosure or request a patient's entire medical record is necessary.

**SAFEGUARDING PHI**

- All staff must ensure that PHI is safeguarded from unauthorized uses and disclosures, loss or destruction
- Safeguards must be applied to written, electronic and oral PHI



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- PHI is one of our most valuable assets – without it we could not function or provide care to our patients. We must do everything we can to protect it from loss or destruction.
- If we use or disclose PHI in ways that are not allowed by the Privacy Rule, we not only violate a patient's privacy but we are also subject to fines and penalties.
- It is everyone's responsibility to ensure that written, electronic and oral PHI is safeguarded.

## ***WHERE IS WRITTEN PHI?***

- File cabinets
- Medical records
- Reports
- Travel charts
- Desks
- Whiteboards
- Trash/recycle bins
- Near shredders, fax machines, printers and copiers
- In staff mailboxes



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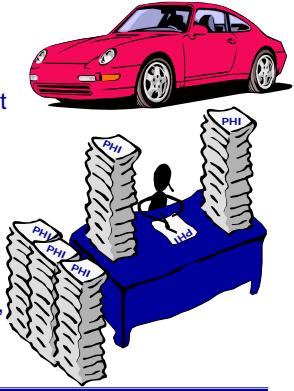
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- Because PHI is so central to everything we do, it is present throughout the agency in written form.
- Can you name areas other than those listed in the slide where written PHI might be found?

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## ***SOME WAYS TO PROTECT WRITTEN PHI***

- Lock travel charts in your trunk when not using them
- Have only the minimum amount of PHI needed in the travel chart
- Promptly shred PHI that is no longer needed
- Don't leave PHI unattended on your desk or in your work area
- Lock file cabinets containing PHI when not in use
- Remove PHI from photocopiers, fax machines and printers



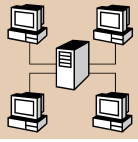

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- Can you think of some other ways that written PHI can be safeguarded?

## ***WHERE IS ELECTRONIC PHI?***

- In desktop computers
- In laptops and PDAs
- Transmitted in faxes
- On CD-ROMS and diskettes
- On computer networks or intranets
- In transmissions over the Internet



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- With all the technology that is available to us today, PHI is not only in written form but also electronic.
- Electronic PHI is particularly vulnerable to misuse, loss, destruction or accidental disclosure.

## ***SOME WAYS TO PROTECT ELECTRONIC PHI***

- Locate fax machines in secure areas
- Always use a fax coversheet that includes a confidentiality statement and instructions for misdirected faxes
- Do not leave computer screens with PHI unattended
- Never share your computer password with others or log on using someone else's password
- Do not include PHI in email transmissions unless authorized to do so
- Make sure that PHI on your laptop or PDA is password protected


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- Can you think of other ways to safeguard PHI that is maintained electronically?

## ***WHERE IS ORAL PHI?***

- In conversations we have about patients
- When we talk on telephones or cell phones
- Phone messages at the office or left on answering machines



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- Providing care to patients is what we do. We cannot care for patients without talking to them and about them.
- We are allowed to use and disclose PHI for treatment, payment and health care operations.
- We are not allowed to violate patient confidentiality.

## ***SOME WAYS TO PROTECT ORAL PHI***

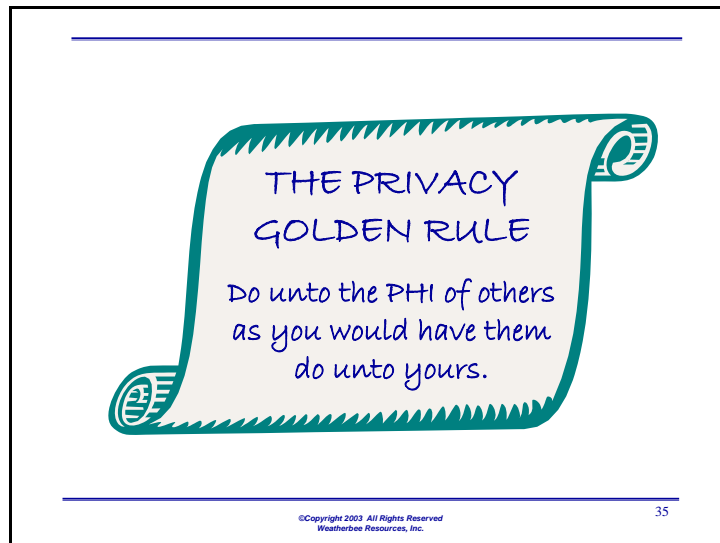
- Do not talk about patients in public places
- Do not talk about patients to anyone not involved in the patient's care
- Do not use phones in patient's homes



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- Can you think of other ways to safeguard oral PHI?



In conclusion, the Privacy Rule not only protects the privacy of the health information of our patients, but it also protects our own health information when we are in the position of needing care.