#### The Voice of HIPAA

The foundation of its rules are a voice of reason.

Presented by: Lee Elston, BSN, MHL 2013

## **Objectives**

- Describe the role of HIPAA in your office.
- Define the various components of your policy as it supports the rules of HIPAA.
- Define the role of assessment of compliance in your office.
- Define both a breach and your responsibility if one occurs in your setting.

### Just a piece of paper?

- Our medical relationships start with this basic right: you can give me information (PHI) and I will protect it with the best of my abilities.
- I will only share it with others who need to know.
- I will use it to care for you and do not harm.
- This is the beginning of a contractual relationship.

### The community trusts us.

- We must prove to them that we are responsible.
- Do they believe that we are doing our best to protect their privacy: Does it show?

#### **Chart maintenance**

- "We are the custodians of our patients' records and patients potentially ask us to protect them" – sharing the most helps the most with diagnosis and care.
- How is this done in your office? Is everyone part of this or is it delegated to only a few?
- Share information with a role-based minimum necessary.

### **HIPAA** origins

#### It was seen as a way to:

- USE and DISCLOSE information (PHI)
- Support an Individual's rights
- Create an administrative responsibility

## Now I have it; now what....

#### **TPO**

- Treatment
- Payment
- Operations

## I asked for PHI from another practitioner.

- You must be able to demonstrate that you use PHI to help you provide a continuum of care.
- Transfer of care: Do you have an established relationship?
- The patient does not need to sign, but it is best to have had a conversation with the patient about that transfer.

#### This is a variation of consent

- Permission to do something
- Is the patient involved with the sharing of information?
- Transfer of the chart to others or faxing: Do we all do it the same under our policy?
- List of disclosures
- Can the patient always have their chart?

## What is the patient's involvement with your policy?

- When do we need a signature?
- Are there times when I can share with others without a signature?
- Does your policy include who can get information about the patient and is it updated?

## Why do I need to know...

- Curiosity or
- Need to know to do my job today?

## Looking at your chart

- Your own...
- Your spouse...
- Your family...
- Co-workers without PowerChart privileges...
- Are the rules the same through all healthcare systems?

## What happens if you get caught?

- Office of Civil Rights (OCR) oversees HIPAA
- Intentional vs. non-intentional
- It is a right of the patient to have privacy maintained
- Right: lawfully and morally owed to you
- The privileges of PowerChart matter!

## Your policy: What is a breach?

- How do you know if you have had a breach?
- What really constitutes a breach?
- Handling a breach is a serious issue for all parties involved!

## What is the value of reporting?

- Trends
- Need of change
- Conflict resolution
- Accountability to an organization and patient for reporting an infraction of a right

### **OCR's Final Rules of 2012**

- Security
- Enforcement
- Breach notification rules

## Privacy culture within the layout of your office.....

- Accommodation: it the best we can do sometimes...is that good enough?
- Patient satisfaction scores: Do they reflect any issues with your setting?
- Customer service and losing customers.
- Disciplinary sanctions.
- Security safeguards both technical and physical.

# Assessing areas of risk in your office?

- Equipment with or without encryption?
- Internet portal safety
- Shredding
- File storage
- Business associates
- Where does PHI (protected health information) "live" in your office?

Questions?	