



KootenaiCareNetwork

HIPAA Privacy 2018

HIPAA

Health Insurance Portability and Accountability Act-
Why is this training important?

It's important because.....

- It protects our patients
- It protects Kootenai Care Network
- It protects you as a participant of Kootenai Care Network



HIPAA

Since this is so important, who needs to know about HIPAA?

- a. Direct Patient Care providers
- b. Indirect Patient Care Providers
- c. Every participant in the Kootenai Care Network



HIPAA



What info must be protected?

Information about patients is confidential and we should access, use or disclose patient information only if it is part of our job related duties and Kootenai Care Network policies and procedures.

Protected Health Information (PHI)

What type of information must be protected?

Name

Social Security
Number

Medical Record
Number

Age

Phone Number

Gender

Full face photos

Name of pet

Vehicle Identifier

IP Address

Vehicle Serial
Number

Address

PHI

All of these things, except “Name of Pet”, are information that identifies or could be used to identify someone.

Name

Social Security
Number

Medical Record
Number

Age

Phone Number

Gender

Full face photos

Name of pet

Vehicle Identifier

IP Address

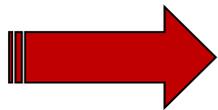
Vehicle Serial
Number

Address

PHI

This information is known as **Individually Identifiable Health Information** when it relates to the past, present, or future physical or mental health or condition of a person, the type of health care they received, or payment for providing their health care.

This is also known as **Protected Health Information** or (**PHI**)



**Individually Identifiable Health Information
must be protected!**

HIPAA



We should make every effort to protect patient health information in all circumstances.

This includes when discussing or disclosing patient care:

- ✓ In Person
- ✓ In a voice mail
- ✓ In a fax
- ✓ Over the phone
- ✓ On paper
- ✓ In images

Minimum Necessary Rule

We can disclose patient health information necessary to facilitate treatment, payment, or health care operations, if required bylaw and if requested by the individual in a valid authorization.

When handling patient health information , we make reasonable efforts to limit the information requested, used, or disclosed to the minimum necessary to accomplish the intended purpose.

This is known as the **Minimum Necessary Rule**.

- Read through the scenarios on the next pages to check your knowledge.

Guideline Choices- Minimum Necessary

Let's see what you would do in this situation

Lunch Break

Jean, Scott, and Sue are working in the same unit. On a lunch break, they decide to eat in the cafeteria. While eating, they start discussing details of a particular difficult patient they've all been helping over the last week.

Is this a potential problem in regards to the protection of Patient Health Information?

Minimum Necessary

Choose the correct answer

- a. No. It's unlikely anyone would hear them in the cafeteria. It shouldn't be a problem.

- b. Yes. They are in a public place discussing a patient. The information they say could be overheard and the patient's information could be at risk depending on the conversation.

Minimum Necessary

If you choose a

a. No. It's unlikely anyone would hear them in the cafeteria. It shouldn't be a problem.

Can you be sure that no one could overhear their conversation? Any time you are in a public setting, you should not be discussing patient health information where it could potentially be overheard. Kootenai Care Network participants should follow the minimum necessary rule and keep all discussions of patient information confidential and private.

Minimum Necessary

If you choose b

b. Yes. They are in a public place discussing a patient. The information they say could be overheard and the patient's information could be at risk depending on the conversation.

You're right! This is absolutely a risk and should not occur. Patient information must be protected at all times, even when off-the-clock or away from your unit. It's common to want to discuss patients with co-workers. But remember to follow the minimum necessary rule and keep necessary discussions confidential and private.

General HIPAA Guidelines

When can patient information be disclosed?

- ✓ We can disclose patient information necessary to facilitate treatment, payment, or health care operations, required by law and if requested by the individual.
- ✓ Laws related to access, use, and disclosure of health information can be puzzling.

Let's review a few principles.

General HIPAA Guidelines

- ✓ You may disclose to a family member, friend, or any other person identified by the individual, protected health information (PHI) directly relevant to such person's involvement with the individual's health care or payment related to the individual's health care.
- ✓ Do not take pictures of patients unless its part of your job duties and performed within your practice's policies and procedures.
- ✓ Be mindful when posting on Social Media. Remember that even posting de-identified information can still be a privacy violation if enough descriptive information about the patient is used. When in doubt, always err on the side of caution and do not post information referencing a certain experience with a patient.

General HIPAA Guidelines

- ✓ In general, texting direct patient identifiers through your phone's standard texting application is not allowed due to lack of encryption. KCN will be implementing a secure texting solution to allow providers to text each other for treatment reasons.
- ✓ Voice mail- Best practice is to only leave your name, phone number and identify yourself as an employee when leaving voicemail. Some patients request that you leave them a detailed message on their voicemail which is at your practice's discretion.
- ✓ Do not take patient information off site for work related purposes unless approved by your manager.

What happens if there is a breach in patient information?

What happens if there is a breach in patient information?

The Breach Notification Rule requires that healthcare entities notify each individual whose unsecured patient information has been or is reasonably believed to have been accessed, acquired, used, or disclosed as a result of a breach except when the healthcare entity demonstrates there is a low probability that the patient information has been compromised.

For more information on breach notification requirements, please see the Health and Human Services Office of Civil Rights (OCR) website:

<https://www.hhs.gov/hipaa/for-professionals/breach-notification/index.html>

Substance Use Disorder

Substance Use Disorder, CFR 42 Part 2

Generally, federally subsidized substance use disorder programs may not tell anyone outside the program that a patient attends the program, or disclose any information identifying a patient as a substance use patient.

Patient Privacy Rights

These rights and how patients can exercise them are spelled out in the **Notice of Privacy Practices** that should be posted on your practice's website and be available at the front desk for patients to take a copy with them.

- ✓ Please learn how patients can exercise these rights so that you can assist patients if and when you are asked.

Patient Rights

In summary, patients have a right to:

- ✓ Review and received a copy of their medical record
- ✓ Obtain an accounting of disclosures of their health information
- ✓ Request a correction or addition to their health information
- ✓ Request their information be sent by alternative means or to an alternate address
- ✓ Request a restriction to the use or disclosure of their health information

Privacy with Business Associates

Privacy with Business Associates

Hospitals do not carry out all their health care functions by themselves. Instead they often use the services of a variety of other persons or businesses, also known as Business Associates.

Business Associates are also responsible for patient privacy.



Business Associates

- HIPAA extends to the Business Associates (BA) when the BA performs services involving PHI.
- The HIPAA Privacy Rule requires contracts or agreements between a Covered Entity (CE) and its BA that spell out the required privacy and security provisions.
- A CE must have a current Business Associates Agreement (BAA) with a vendor who creates, receives, maintains, shares or transmits health information about patients.

Sanctions, Penalties, and Fines

Always follow HIPAA policies and procedures and ask questions of your supervisor or the Compliance Officer when you are unsure how to handle a patient health information matter.

What happens if there is a violation?

- ❖ There are sanctions (actions) for violations of patient privacy and/or security. Sanctions are the greatest when the violation is to cause malicious harm or for personal gain.
- ❖ HIPAA imposes civil and criminal penalties on anyone who knowingly and without authorization uses or discloses patient information. These fines can range from \$100 - \$250,000 and up to 10 years in prison.

What can you do?

To protect the privacy of patient information if or when you believe there has been a breach incident or violation of privacy or security policy or procedure you must:

- ✓ Notify your practice leader
- ✓ Notify Kootenai Care Network
- ✓ Notify the Compliance Officer 208-625-4016
- ✓ Make an anonymous report to the Compliance Hotline
 - 844-678-6269 or
 - www.kootenaicarenetwork.ethicspoint.com

HIPAA Quiz

1. As an employee, it is okay to access your family member's medical record.

True or False

HIPAA Quiz

- The answer is False
- Workforce members must only access, use, or disclose patient information when needed to perform their jobs and in accordance with Kootenai Care Network policies and procedures. You may not use your work-related privileges for personal reasons.

HIPAA Quiz

2. Who should you report a potential HIPAA violation to?

- a. Practice Leader
- b. Engineering
- c. Compliance Officer
- d. A or C
- e. All of the above

HIPAA Quiz

- The answer is d
- You would notify your Practice Leader and/or Compliance Officer

HIPAA Quiz

3. The minimum necessary standard refers to charging only cost based fees for making paper or electronic copies of the patient's medical or business record.

True or False

HIPAA Quiz

- The answer is False
- The minimum Necessary Standard requires that when handling patient health information, we make reasonable efforts to limit the information requested, used, or disclosed to the minimum necessary to accomplish the intended purpose.

HIPAA Quiz

4. In which circumstances may we disclose patient information?
- a. We may give information about a patient's mobility limitations to a friend driving the patient home from the hospital.
 - b. If the care team deems it would be in the best interest of the patient.
 - c. We may discuss a patient's payment options with their adult child(ren).
 - d. All of the above
 - e. B and C

HIPAA Quiz

- Answer is d
- HIPAA allows disclosure to a family member, friend or any other person identified by the individual, protected health information (PHI) directly relevant to such person's involvement with the individual's health care or payment related to the individual's health care.

HIPAA Quiz

5. The Notice of Privacy Practices explains to patients how they can exercise their rights.

True or False

HIPAA Quiz

- The answer is true
- The notice describes how medical information about you may be used and disclosed and how you can get access to this information.

HIPAA Quiz

6. You can be held personally liable for criminal penalties for a breach of protected health information.

True or False

HIPAA Quiz

- The answer is True
- You could be personally liable for your actions of violating HIPAA.

HIPAA Quiz

7. Is a hospital permitted to contact another hospital or health care facility, such as a nursing home, to which a patient will be transferred for continued care, without the patient's authorization?

True or False

HIPAA Quiz

- The answer is True
- The HIPAA Privacy Rule permits a health care provider to disclose protected health information about an individual, without the individual's authorization, to another health care provider for that provider's treatment or payment purposes, as well as to another covered entity for certain health care operations of that entity.

HIPAA Quiz

8. You received a call from Larry at the local Tire Shop and he states he received a fax with patient health information. What steps do you take next?
- a. Ask him to return the documents or shred them.
 - b. Report this to your practice leader, or the compliance officer.
 - c. Tell him thank you and do nothing
 - d. All of the above
 - e. A & B

HIPAA Quiz

- The answer is e
- Nicely done!

HIPAA Quiz

9. What format of patient information must be protected?
 - a. Voice messages
 - b. Electronic
 - c. Images
 - d. Faxes
 - e. All of the above

HIPAA Quiz

- The answer is e
- That's right!

HIPAA Quiz

10. What does HIPAA stand for?
 - a. Hard Igloos Preserve Against Avalanches
 - b. Hippos Identify Passing Alligators Accurately
 - c. Health Insurance Portability and Accountability Act
 - d. None of the above

HIPAA Quiz

- The answer is c
- Health Insurance Portability and Accountability Act