

HIPAA Training for Parent and Family Partners

– What You Need to Know –

Instructions: Use Enter or Down Arrow keys to advance and Backspace or Up Arrow keys to go back

Course Objectives

1. The requirements of the federal HIPAA/HITECH regulations and procedures that protect the privacy and security of confidential data
2. How these affect you and your role
3. What information must be protected
4. How you can protect confidential and sensitive information
5. How to report privacy breaches and security incidents

What is HIPAA?



The Health Insurance Portability and Accountability Act (HIPAA) is a federal law with provisions that:

- Protect the privacy of patient information
- Provide for electronic and physical security of patient health information
- Require “**minimum necessary**” use and disclosure
- Specify patient rights to approve the access and use of their medical information

HITECH Act Updated HIPAA in 2009

As part of the American Recovery and Reinvestment Act of 2009, the Health Information Technology for Economic and Clinical Health (HITECH) Act updated federal HIPAA privacy and security standards.

The updates included:

- Breach notification requirements
- Fine and penalty increases for privacy violations
- Right to request copies of the electronic health care record in electronic format
- Mandates that Business Associates are civilly and criminally liable for privacy and security violations

Fines and Penalties for Violations

HIPAA Criminal Penalties:

- \$50,000 - \$1,500,000 fines
- Imprisonment up to 10 years

HIPAA Civil Penalties:

- \$100 - \$25,000 / year fines
- More fines if multiple year violations



What Information Must Be Protected?



PHI (Protected Health Information)

- Is information related to a patient's past, present or future physical and/or mental health or condition
- Can be in any form: written, spoken, or electronic (including video, photographs, and x-rays)
- Includes at least one of the 18 personal identifiers (listed on next page) in association with health information

18 PHI Identifiers Defined by HIPAA

- Name
- Postal address
- All elements of dates except year
- Telephone number
- Fax number
- Email address
- URL address
- IP address
- Social security number
- Account numbers
- License numbers
- Medical record number
- Health plan beneficiary #
- Device identifiers and their serial numbers
- Vehicle identifiers and serial number
- Biometric identifiers (finger and voice prints)
- Full face photos and other comparable images
- Any other unique identifying number, code, or characteristic

When Must PHI Be Protected?

- These rules apply to you when you view, use, and share PHI.
- You must protect an individual's PHI which is collected or created as a consequence of a health care provision.



Use or Disclosure of PHI

In order for covered entities* (CE) to use or disclose PHI they must provide patient with a **Notice of Privacy**

Practices:

- At least once and again when updated w/ major changes
- Describes how the CE may use and disclose the patient's PHI
- Advises the patient of his/her privacy rights

Exception: emergency situations. If a signature is not obtained, must document the reason why it was not.

*Covered Entity: Covered entities are (1) health plans, (2) health care clearinghouses, and (3) health care providers who electronically transmit any health information in connection with transactions for which Health and Human Services (HHS) has adopted standards. Generally, these transactions concern billing and payment for services or insurance coverage. For example, hospitals, academic medical centers, physicians, and other health care providers who electronically transmit claims transaction information directly or through an intermediary to a health plan are covered entities. Covered entities can be institutions, organizations, or persons.

Patient Authorization

Notice of Privacy Practices allows PHI to be used and disclosed for purposes of:

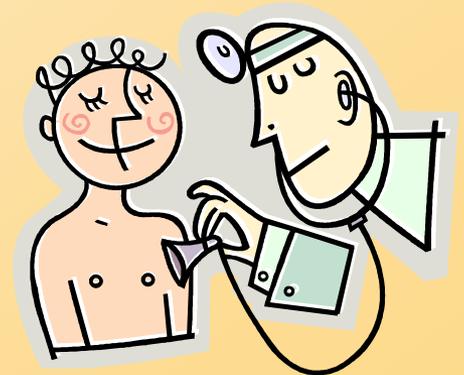
- Treatment (T)
- Payment (P)
- Operations (O)



TPO Defined - Treatment

Treatment means the provision, coordination, or management of health care by one or more health care providers, including:

- consultation between health care providers; or
- patient referrals



Scenario 1

You are meeting with other parents in a support group setting from the Medical Home. One of the parent's asks you about resources for housing and financial assistance and tells you that she is getting a divorce and needs information as soon as possible.

- Q: Is it OK to share this information with the Medical Home Care Coordinator?
- A: Yes, the parent is looking for resources but it is always a good idea to let the parent know in any environment that you will seek the information from others in the Medical Home.

Scenario 2

You have contacted a parent in the practice that has given permission for you to call her. After talking with her you realize that the family needs a lot of support, resources and assistance. You contact one of the other Medical Home Family Partners to get some advice.

- Q: Is it OK to share the family's information with another Family Partner?
- A: Yes as long as you are asking about what is available for the situation and keep the identifiable information confidential unless the parent has given permission for you to ask other family partners and or advocates.

TPO Defined - Payment

Payment includes activities of:

- Health care providers to obtain payment or be reimbursed for their services
- Health plans to obtain premiums, fulfill coverage responsibilities, or provide reimbursement for the provision of health care



TPO Defined - Operations

Healthcare Operations include:

- Administrative, financial, legal and quality improvement activities
- Necessary to run business and to support core functions of treatment and payment
- Quality assessment and improvement activities
- Training, accreditation, certification, credentialing, licensing, reviewing competence, evaluating performance
- Fraud and abuse detection
- Underwriting, rating, other activities relating to the creation, renewal or replacement of a contract of health insurance or benefits
- Conducting or arranging for medical review, legal services, or auditing
- Business planning and development
- Business management and general administrative activities

Patient Authorization

- For reasons other than TPO, CE must obtain written authorization from the patient to use, disclose, or access patient information.
- Special rules and additional requirements apply to:
 - Fundraising
 - Human Subjects Research



Minimum Necessary Standard

- For patient care and treatment, HIPAA does not impose restrictions on use and disclosure of PHI by health care providers
 - Exceptions: psychotherapy information, HIV test results, and substance abuse information
- For anything else (payment and healthcare operations), HIPAA requires users to access the *minimum* amount of information *necessary* to perform their duties.
 - Example: a billing clerk may need to know what laboratory test was done, but not the results.

When Should You?

- View PHI
- Access PHI
- Share PHI



Only.....

- Use information **when necessary** to perform the duties of your role
- Use the **minimum necessary** to perform the duties of your role

Scenario 3

You have been asked to call a family by the Medical Home team. You want to know as much as possible before you call so that you can provide as much appropriate support and information as possible.

- Q: Is it OK to ask the Medical Home team for information about the child's medical condition and family situation before talking to the family?
- A: Yes, you can have the appropriate information about the family to get the call and the support started. Each individual family is unique and the information required will always be on a "need to know" basis to provide them with the adequate support.

HIPAA Philosophy

The Patient-Consumer:

- Is entitled to notice about how their PHI will be used (exception: in an emergency)
- Must expect that, within a medical care facility, PHI will be shared to facilitate care, payment and healthcare operations
- Is entitled to expect that caregivers will be careful about how PHI is used and disclosed
- Has a right of access to PHI
- Has a right to protest mistakes in PHI and have them corrected/amended
- Is entitled to control the use of PHI in certain circumstances: research, fund-raising, marketing
- Should know that the government can get PHI for law enforcement and healthcare oversight

Scenario 4

You are in the office for a monthly team meeting, you happen to overhear a conversation about one of your neighbor's children that has just been diagnosed with a serious illness.

- Q: Is it OK to contact the neighbor and offer your support?
- A: No, you need to keep it confidential. You can only contact the family about the information if the Medical Home asks you to do so or if the family shares the information directly.

Privacy Breach from Lost, Stolen, or Misdirected Information

- Physically lost or stolen:
 - Paper copies, films, tapes, electronic devices
 - Anytime, anywhere - even while on public transportation, crossing the street, in your home, in your office
- Misdirected to others outside of CE:
 - Verbal messages sent to or left on the wrong voicemail or sent to or left for the wrong person
 - Mislabeled mail, misdirected email
 - Wrong fax number, wrong phone number
 - Placed on intranet, internet, websites, Facebook, Twitter
 - Using unsecure email

Scenario 5

You are working from home locating some information about insurance and genetic counseling resources; you have the information that was given to you by the family directly, written down in your notebook. One of your family members happens to see the information and asks you questions about the family and the child's condition.

- Q: Is it OK to provide general information since the family gave you the information?
- A: No, it isn't ever appropriate to share information about families you are helping in the Medical Home. Information shared with you from a family should be kept confidential.

How to Report Privacy Breaches

- **Ask now**...what your practice's process is for reporting privacy breaches
- **If a breach occurs**...immediately report any known or suspected privacy breaches (such as paper, conversations, suspected unauthorized or inappropriate access or use of PHI)



Remember....

To the patient, **ALL information is private.**

- This includes a patient's:
 - Personal information
 - Financial information
 - Medical information
 - Protected Health Information
 - Information in any format: spoken, written, or electronic



Scenario 6

You are talking to one of your best friends and telling them about Medical Home and what you do as a family partner.

- Q: Is it ever OK to talk about a specific scenario without giving identifiable information about the child and family?
- A: The only time it is ever appropriate to talk about another family's situation is when you are gathering information to help the family. Even though you may not give names when talking about an individual family there are other identifiable demographics that could lead to a violation of the family's privacy.
- BUT you can always share what kinds of information, support and resources you provide to everyone and anyone which helps spread the wealth of information that you have.

Test Your Knowledge

Please click on the link below to take a short quiz:

[HIPAA Quiz for Family Partners](#)