Why HIPAA?

Privacy rules were written to help make it easier for those who need information to get it and to make it harder for people with no need to know patient information to find it.

Privacy is Essential to Health Care

When we tell a doctor or other health care worker information about ourselves, we often think that it is private. Many times, though, others look for or find private health information and do not keep it private.

The Privacy Regulations apply to "covered entities". You are taking this course because Texas Children's is a covered entity. All covered entities must:

1. Let people know how their health information will be used or disclosed,
2. Provide patients access to their own information, and
3. Put up safety blocks to protect patient information and keep it confidential.

HIPAA Basics

Covered entities are defined by HIPAA as:

- Health plans (such as insurance, group health care plans)
- Health care clearinghouses (such as billing companies)
- Health care providers (hospitals, doctors, clinics, etc.)

The Privacy Regulations protect all medical and billing records and other patient data in any form, whether electronic, on paper, or spoken out loud.

Protected Health Information

Lots of information is included in medical and billing records. Names, addresses, numbers of all types (Social Security Number, phone, etc.), dates, and images can all be in a record. All of these tell us something about a person that they may want to keep private.

Protected Health Information (PHI) is personal health information of any kind (computer, film, paper and even discussing it out loud) that:
• Gives enough information to identify the individual or offers a reasonable basis for identification;
• Is created or received by a covered entity; and
• Relates to past, present, or future treatment or payment.

Use and Disclosure

Use means sharing PHI within Texas Children's. Disclosure means sharing PHI with someone outside of Texas Children's, like a lab or insurance company. The rule says that covered entities can use and disclose PHI for treatment, payment, and health care operations without patient authorization.

Using or disclosing PHI for any other reason requires patient authorization

Treatment, Payment, and Health Care Operations

The rule says PHI can be used and disclosed for treatment, payment, and health care operations (TPO).

• Treatment - medical care
• Payment - insurance, billing, claims processing
• Health care operations - activities that Texas Children's does to support treatment and payment

HIPAA says that by going to a doctor (or hospital or clinic) for treatment, a patient is agreeing to let his or her health information be used and disclosed.

Minimum Necessary

Minimum necessary limits the amount of PHI to that needed to be used or disclosed to perform a specific task.

For example, if blood tests were needed to verify a condition, it would be inappropriate to send an entire medical file.

Privacy and Confidentiality

Privacy is about keeping what you know to yourself. Like other personal information, medical information is not something we want everyone else to know.

Confidentiality is about access to information. When only some people get to see PHI, the information is kept confidential.
**PHI Summary**

The important things to remember about the privacy of Protected Health Information (PHI) are:

- PHI is any information that can be connected to a patient.
- PHI includes information in any form - paper, computer, spoken, etc.
- You do not need permission to use or disclose PHI for treatment, payment, or health care operations.
- You should only have access to PHI that is needed to do your job.

**Patient Rights**

The privacy rule gives patients the following rights:

- To receive a written **notice** of privacy practices
- To see their information and receive a copy of it
- To ask to **correct** their information if they think there is something missing or something wrong
- To ask for **restrictions** on the use and disclosure of their PHI
- To ask for an **accounting** of with whom their information was shared

Remember these the next time you are a patient.

**Breaks in Confidentiality**

*Why people break confidentiality rules*

- **Carelessness** - when someone doesn't think about how information should be properly protected.

  **Examples:** Someone discusses patient information in a public area; **OR** leaves information in a public area; **OR** leaves a computer unattended so that people walking by can read things they should not.

- **Curiosity or Concern (not for Personal Gain)** - when someone looks at or shares information because they are interested or because they want to help.

  **Examples:** Someone looks up birth dates, address of friends or relatives; **OR** looks at a well known or famous person's information.

- **Personal Gain or Malice** - when someone accesses, reviews or talks about patient information for personal gain or to cause harm in some way by leaking information.

  **Examples:** Someone reviews a patient record to disclose information to the media; **OR** to make a mailing list to sell.

**Sanctions**
A privacy breach happens when something is shared with people who have no need or right to know it. Sanctions are what happens to people who break privacy rules.

HIPAA requires covered entities to take action when privacy rules are broken. It may start with talking to the employee and then go further. Here are examples of how Texas Children's might treat a privacy breach.

- **Discussing it with you (verbal counseling)** – manager or supervisor speaking with the person, usually as a warning
- **Written warning** – a formal document placed in your personnel file
- **Suspended from work** – not allowed to come to work for a period of time, with or without pay
- **Termination** – being fired

**Breaches**

There are 2 types of breaches of privacy.

An **unintentional violation** occurs when someone tells another person something private without thinking about it.

A **wrongful disclosure** happens when someone shares private information on purpose.

Both of these are violations of HIPAA and can result in fines and/or jail time.

**Administrative Requirements**

Administrative requirements help make sure that everyone follows privacy practices.

HIPAA says "covered entities" must do 3 things:

- **Have a process for handling complaints** about privacy policies and practices.
- **Have a Privacy Officer** who manages all of the things that HIPAA requires.
- **Train everyone!**

**Complaints**

Texas Children's must provide a way for someone to complain about our privacy practices.

Texas Children's has established the Privacy Office to receive these complaints. The Privacy Office can be contacted at 832-824-2091.

**Retaliation or Intimidating Acts**

HIPAA says that organizations cannot act against people who file a complaint. The person who complains has a responsibility, too. They have to honestly believe that the practice is wrong - this is called a "good faith" belief.
Privacy Officer

The Privacy rules require all covered entities to have a Privacy Officer. The Privacy Officer's job is to handle the entire HIPAA privacy compliance program.

Texas Children's Privacy Officer is David Finn.

Training Requirement

All members of the TCH IDS workforce must be trained!

This includes all employees, physicians, volunteers, interns, and students. The regulation requires training for:

- The entire workforce by 4/14/03
- New workforce members
- People whose jobs are affected when policies or practices change.

Patient Privacy

At Texas Children's, our slogan for Patient Privacy is "their right, our duty". It is not only the patient's right to have their information protected; it is also our duty and the right thing to do.
Patient Privacy Training Exam

Instructions: Fill in your name in the blank below. Choose the best answer for each question and place an X in the blank next to your answer.

Name: ______________________________________________  Date: ___________________
Department: _________________________________________________________________________

1. HIPAA allows using and disclosing PHI for treatment, payment or health care operations without patient authorization.
   __________ True  __________ False

2. The minimum necessary standard means that when PHI is used or disclosed, it must be limited to only the information needed to accomplish the specific purpose.
   __________ True  __________ False

3. The Privacy Regulations protect medical records, billing records and other information that identifies a patient in any form.
   __________ True  __________ False

4. One of the rights the HIPAA Privacy regulation gives patients is to receive a written notice of privacy practices.
   __________ True  __________ False

5. There are sanctions for those who break privacy rules.
   __________ True  __________ False

6. The law prohibits organizations from taking action against those who file complaints concerning HIPAA Privacy violations.
   __________ True  __________ False

7. Texas Children’s Patient Privacy slogan is “their right, our duty”.
   __________ True  __________ False

8. One of the administrative requirements of the privacy rule is that a covered entity must designate a Privacy Officer.
   __________ True  __________ False

9. Texas Children’s has established the Privacy Office to handle complaints about patient privacy.
   __________ True  __________ False

10. All members of the TCH IDS workforce must receive training on the privacy regulations.
    __________ True  __________ False