



**Connecting
Healthcare[®]**
Engaging Patients[™]

HIPAA Success - Physician Education Series

Privacy Policies and Procedures

Your Faculty:

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- President and Founder, Connecting Healthcare®
- Host and Producer, Medical Update Show
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- Founding Executive Director ePrescribe Florida and President, ePrescribe America
- Founding Chair of the Southern Healthcare Administrative Regional Process (SHARP), a regional collaborative workgroup alliance of private and public health care organizations and HHS, HRSA and CMS
- Founding Co-Chair of the CMS Sponsored Southern Insurance Commissioner Task Force, a regional collaborative workgroup alliance for State-level HIPAA Education
- Founding Security and Privacy Co-Chair for the Workgroup for Electronic Data Interchange (WEDi) Strategic National Implementation Process (SNIP)



Agenda

- Quick review of Privacy rule
- Areas requiring development of Privacy Policies and Procedures
- Getting Started
- Exercise: Developing Policies and Procedures to meet “Minimum necessary” requirements



Who Must Comply?

- Covered Entities defined under law
 - Health Plans
 - Clearinghouses
 - Providers who submit electronic transactions
- Business associates of covered entities
 - Indirectly covered through contracts with covered entities
 - Expected to comply with requirements specified for business associates



What is Protected?

Protected health information (PHI) includes all individually identifiable health information

- Held or transmitted by a covered entity in any form - electronic, paper or oral
- That relates to an individual's
 - Physical or mental health or condition
 - Provision of health care
 - Payment for health care



Use vs. Disclosure

Use is what you do with individually identifiable health information **within** your organization

Disclosure is what happens to individually identifiable health information when it goes **outside** your organization



Consent/Authorization

Consent requires written permission for uses and disclosures to carry out treatment, payment or health care operations

Authorization requires written permission for all uses and disclosures

- Other than treatment, payment, and health care operations
- Not otherwise permitted or required by the Privacy rule



Key Requirements of Privacy Rule

Covered entities must implement requirements related to:

- Use, disclosure, and request of only minimum necessary PHI
- Notice of privacy practices
- Consent form (providers)
- Authorization form
- Individual's right to inspect, copy and request amendment of health information (except clearinghouses)
- Accounting of disclosures to individuals
- Staff training in privacy practices



How to Meet These Requirements?

Develop ***policies and procedures*** that specify

- How your organization will implement the requirements of the Privacy Rule
- How you will monitor compliance on an on-going basis



Step one: Understand the Terminology

- Policy

A general principle or plan that guides the actions taken by an individual or group

- Procedure

A way of performing or accomplishing something; a series of steps or a course of action



Areas Requiring Policies & Procedures

- Minimum necessary
- Uses and disclosures of PHI
- Business associate contracts
- Complaint and grievance process
- Administrative requirements
- Awareness training for staff
- Sanctions and mitigations for violations



More Areas Requiring Policies & Procedures

- Notice of privacy practices
- Consent forms
- Authorization forms
- Revisions necessitated by changes in law
- Research activities
- Documentation creation and maintenance



More Areas Requiring Policies & Procedures

Protection of individual's rights to

- Inspect, copy and request amendment of medical records
- Request restriction on use/disclosure of PHI
- Confidential communication of PHI
- Accounting of disclosures of PHI
- Clearly written explanations of organization's privacy practices



How Do I Get Started?

Read the rule to find out what it requires for each area

- Use the “Find” option in Adobe Acrobat to search the document
- Search on the topic (e.g., minimum necessary), the section number, and the term “Policies and Procedures”
- Search both the rule and the preamble



Get Executive Buy-in

Compliance takes effort and time – must have support at executive level

- Critical that senior executives appreciate importance of compliance with Privacy rule
- Support at executive level will allow assignment of resources necessary to reach goals
- Need commitment of TIME from resources
 - Team leads and managers – development and staff training
 - Staff level - time to attend staff training and resources necessary to achieve compliance



Form a Workgroup

- Job is bigger than one person
- Need to enlist help of each unit's managers and team leads
 - Group will formulate the general, overall Privacy **policy** for organization
 - **Procedures** must come from the unit level – from the people who will live with them



Privacy Awareness Training Session

Start by explaining key concepts of Privacy Rule to entire staff – cannot skip this step!

- Terminology
- Requirements
- Importance to your organization
- Non-compliance penalties
- Include a general “HIPAA 101” and Security rule orientation if this hasn’t been done previously



Policies/Procedures Workshop

Conduct a policy and procedures workshop with managers and team leads

- Provides a knowledge base of requirements for policies and procedures
- Gives managers and team leads a running start on development
- Allows sharing of ideas and enthusiasm
- Provides a model to follow for subsequent work



Review P&P with Team Leads

Review policies & procedures team leads develop to ensure they

- Meet requirements of Privacy rule
- Meet corporate goals and standards
- Are properly documented
- Have HR approval where necessary – add section to employee handbook especially as concerns sanctions for violations



Present P&P to Staff

Team leads and managers present policies and procedures to staff to

- Review Privacy rule requirements and promote high level of Privacy awareness
- Explain importance of compliance
- Explain in detail policies and procedures must follow
- Explain on-going compliance monitoring and sanctions for violations



Policies & Procedures: Minimum Necessary

General requirements of Privacy Rule regarding minimum necessary:

“When using or disclosing protected health information or when requesting protected health information from another covered entity, a covered entity must make reasonable efforts to limit protected health information to the minimum necessary to accomplish the intended purpose of the use, disclosure or request.” §164.502(b)



Exceptions to Minimum Necessary

Situations in which minimum necessary requirement does NOT apply

- Disclosures or requests by a health care provider for treatment purposes
- Uses or disclosures made to the individual or authorized by the individual
- Uses or disclosures required by law - see §164.512(a)
- Uses or disclosures required to comply with the Privacy rule



Goals of Minimum Necessary P&P

Policies and procedures implementing the minimum necessary requirement must

1. Restrict access and use based on specific roles of members of your workforce
2. Establish criteria to limit routine disclosures to the minimum necessary to achieve the purpose of the disclosure
3. Limit requests for information to what is reasonably necessary for the particular use or disclosure



Uses by Your Workforce

We will develop policies and procedures regarding **use** of protected health information (PHI) by our own workforce that

- Identify the persons or group of persons who need access to PHI to carry out their job functions
- Identify type of PHI to which each person or group needs access and conditions under which need access
- Make reasonable efforts to limit access to only the information appropriate to their job requirements





Have Questions?

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