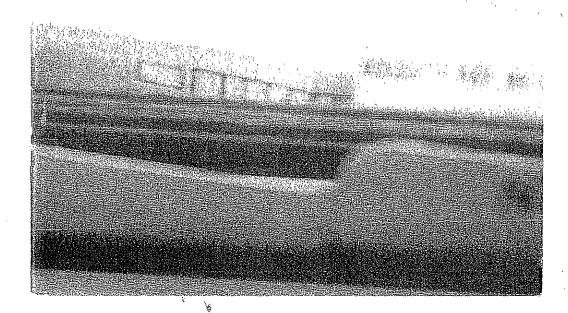


HIPAA: PRIVACY COMPLIANCE



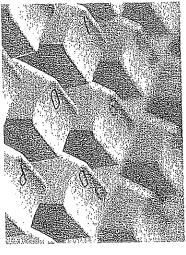
TIDAA: PRIVACY COMPLIANCE

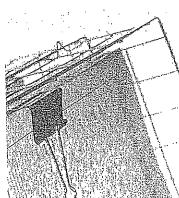
The HIPAA Privacy Rule — finalized on August 14, 2002 — ensures that personal medical information you share with doctors, hospitals and others who provide and pay for healthcare is protected. It is the first-ever comprehensive federal protection guideline for the privacy of health information.

Basically, the Privacy Rule does the following:

- Imposes new restrictions on the use and disclosure of personal health information
- · Gives patients greater access to their medical records, and
- · Gives patients greater protection of their medical records.

You can make sure you protect personal patient data by learning the basics of the final HIPAA Privacy Rule outlined in this handbook.





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RIOS COCERED BY THE HIPAA

You're covered by the HIPAA Privacy Rule — and termed a covered entity — if you are a:

- Healthcare provider
- Health plan
- Healthcare clearinghouse
- Business associate who has access to patient records.





You are required to release PHI for use and disclosure:

- · When requested or authorized by the individual although some
- exceptions apply

 When required by the Department of Health and Human Services —

 HHS for compliance or investigation.

RETURNING TO REPORT OF THE PROPERTY OF THE PRO

The final ruling makes consent for routine healthcare optional. But you are required to get a signed authorization from the patient if you use or disclose his or her Protected Health Information for purposes other than:

- Treatment
- · Payment
- Healthcare operations.

Generally, authorization is required to use PHI;

- For use or disclosure of psychotherapy notes (except for treatment, payment or healthcare operations)
- For use and disclosure to third parties for marketing activities such as selling lists of patients and enrollees.

However, covered entities can communicate freely with patients about treatment options and health-related information.

Each authorization form only covers the use/disclosure outlined in that form. The form must contain:

- A description of the PHI to be used/disclosed, in clear language
- · Who will use/disclose PHI, and for what purpose
- · Whether or not it will result in financial gain for the covered entity
- The patient's right to revoke the authorization
- A signature of the patient whose records are used/disclosed, and a date of signing
- An expiration date.



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VENT IS THE DRIVACY MOTICE?

Patients have the right to adequate notice concerning the use/disclosure of their PHI on the first date of service delivery, or as soon as possible after an emergency. And new notices must be issued when your facility's privacy practices change.

The Privacy Notice must:

- · Contain patient's rights and the covered entities' legal duties
- · Be made available to patients in print
- · Be displayed at the site of service, or posted on a web site

if possible

Once a patient has received notice of his or her rights, covered entities must make an effort to get written acknowledgement of receipt of notice from the patient, or document reasons why it was not obtained. And copies must be kept of all notices and



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The Privacy Rule grants patients new rights over their PHI. It's your job to make sure they can exercise their rights, including the following:

- Receive Privacy Notice at time of first delivery of service
- Restrict use and disclosure, although the covered entity is not required to agree
- Have PHI communicated to them by alternate means and at alternate locations to protect confidentiality
- Inspect, correct and amend PHI and obtain copies, with some exceptions
- Request a history of non-routine disclosures for six years prior to the request, and
- Contact designated persons regarding any privacy concern or breach of privacy within the facility or at HHS.



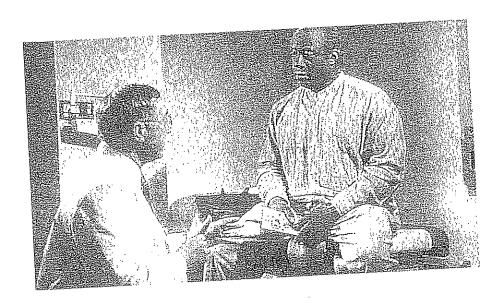
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WHAT CAN YOU DO TO PROTECT PATIENTS' PRIVACY AND CONFIDENTIALITY?

HIPAA protects our fundamental right to privacy and confidentiality. And that means HIPAA's Privacy Rule is everyone's business — from the CEO to the healthcare professional to the maintenance staff. To do your part:

- Make sure you fully understand your facility's privacy practices.
- Protect your patients' personal health information.
- Encourage others to do the same.



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HIPAA 101 COMPETENCY QUIZ

TRUE	OR F	ALSE
	1.	The compliance date for HIPAA Privacy Regulations for April 14 2003.
	2.	The HIPAA Privacy Regulations apply to electronic information only.
	3.	Business Associates are not required to ensure the privacy of PHI.
	4.	I must apply the minimum necessary standard when sharing information with other clinicians.
*************************************	5.	A social worker must obtain a written authorization before discussing treatment options with a patient since this could be construed as a marketing activity.
	6.	If I accidentally leave some of my paperwork at McDonald's it is just an incidental disclosure.
WW	7.	As long as a covered entity posts the Notice of Privacy Practices on their website, they do not have to give a copy to every patient.
	8.	I may always share information with members of the patient's family.
	9.	Once the privacy regulation is in effect, I can no longer leave any messages on patients answering machine.
h	10.	If a patient wants to amend their medical record, field staff should explain to the patient those medical records cannot be changed so they should not bother to make the request.
	11.	Only the patient has the right to a copy of the Notice of Privacy Practices.
	12.	Any electronic device that I possess that contains PHI should at a minimum be password protected.
	13.	PHI must be protected when in my home.
	14.	A patient who files a privacy complaint can be discharged as non-compliant.
	15.	I must give the patient the lab's Notice of Privacy Practices before I can draw their blood or take a specimen.
NAME	<u>.</u> .	Print Name
SIGNATURE:		
DATE		