

EXAMPLES OF HIPPA COMPLIANCE

Case 1: Covered Health Information

Researcher requests full copies of medical records on patients diagnosed with lung cancer so that they can be contacted to be informed about a chance to participate in a research study.

Question

- *Should medical records give the researcher patients' PHI?*

Answer

- *Yes, the information may be shared IF the researcher provides a document of approval by the Institutional Review Board (IRB) from the Research Office.*
- *This is allowed by The Notice of Privacy Practices that must be given to every patient close to the start of treatment.*
- *Privacy Notice is given WHEREVER registration takes place. May be given, e-mailed, mailed—whatever it takes.*
- *Allows us to use past, present, and future health information for treatment, payment, and health care operations.*
- *Patient MAY request restrictions, so all points of registration must have the Right to Request Restrictions form.*
- *If PHI is released, it must be recorded.*

Case 2: Patient's Rights

Woman calls requesting to pick up a copy of 16-year-old stepdaughter's medical record.

Question

- *Who is allowed to get copies of a patient's health information?*

Answer

- *Information may not be released about a minor except:*
 - *Birth parent*
 - *Emancipated minor*
 - *Custodians or guardians with appropriate paperwork*
 - *Best approach would be NOT to provide any information without a signed authorization form from a birth parent.*

Question

- *What procedures do patients and others have to follow to get copies of health information?*

Answer

- *Explain why you cannot provide the records without release by a birth parent.*
- *Offer to fax a form she can have completed by a birth parent or tell her what a "homemade" release must contain.*

Case 3: Electronic Transmission PHI

Patient requests that PHI be sent to him by an electronic means. (i.e. fax or e-mail).

Question

- *May PHI be shared by electronic means?*

Answer

- *PHI may be shared electronically—by fax, e-mail, on a PDA or laptop.*

Question

- *What should be in place to protect personal health information when it is shared?*

Answer

- *PHI may be shared electronically—by fax, email, on a PDA or laptop.*
 - *Outgoing fax*

- Use PHS cover sheet.
- File coversheet/note if cover not possible.
- Check & recheck #
- Fax in secure, non-public area.
- Incoming Fax
 - Fax: Check to be sure correct
 - Return/destroy if not
 - Check correct # pages received
 - Route to secure place/file with cover sheet immediately
 - Fax in secure, non-public area
- E-mail:
 - Should be password protected.
 - Pads, laptops: Keep physically secure, password protected & encrypted.
 - Receiver is responsible for protecting it just like paper information.
 - Watch it, cover it, lock it, password protect it, encrypt it.
 - Report if lost, stolen, sent to an incorrect place & not retrieved/destroyed on an incident report.
- Receiver is responsible for protecting it just like paper information.
 - Watch it, cover it, lock it, password protect it, encrypt it.
 - Report if lost, stolen, sent to an incorrect place & not retrieved/destroyed on an incident report.

Case 4: Wrongful Disclosure

An employee asks another employee to disclose PHI about a pediatric patient, the son of her ex husband's new wife, because she is worried that her son may have been exposed to something during a weekend visit with his father.

Question

- Who may be given information about a patient and by whom?

Answer

- Employees, volunteers, physicians, and students may access PHI ONLY for the purposes of treatment, payment, or health care operations.
- Every member of the workforce is to access only the information listed on the minimum necessary chart for his or her position—that is what is needed to do the job.
- For all other purposes the employee, volunteer, physician, or student is just like any other patient, friend/family member, or member of the public.
 - No special access is provided and all access policies must be followed.
 - That is, no checking of the CDR; no checking of the medical record; no asking colleagues for information about self, friends, or family.

Case 5: Misplaced or Lost PHI

An instructor creates a list of patients that on a nursing unit, which students have cared for. The instructor is afraid that she may have lost the list. It is labeled cancer patients and includes names and diagnosis.

Question

- What are the responsibilities of every employee, volunteer, student, and physician when it comes to PHI?

Answer

- Protect any PHI that comes to you & dispose of properly. If patient information must leave the hospital, it MUST be de-identified.

Question

- What should a member of the workforce do if PHI is accidentally disclosed or lost?

Answer

- Report IMMEDIATELY to the department director, or privacy officer.
- Make every attempt to recover the list.

- *Subject to internal discipline for violations and jail/fines if complaint goes to government.*

Case 6: Public Discussions

A visitor, waiting in the hall, overhears a group of residents and supervising physicians discussing a patient in the hallway.

Question

- *Was the patient's privacy violated or is incidental exposure a fact of being in a busy health care setting?*

Answer

- *The patient's right to privacy and confidential communications was definitely violated.*
- *Incidental disclosure applies only to things that cannot be helped.*

Question

- *What practices are expected of health care providers to protect patients' personal health information?*

Answer

- *NEVER discuss a patient in a public area (e.g. on rounds, on phone near other patients or visitors, on elevator).*
- *Use private places and/or wait until a private time.*
- *Privacy Precautions:*
 - *Ask patient in advance who he/she wants involved in care.*
 - *If you do not know who patient wants involved in care, excuse others and let the patient know you are going to discuss PHI. Ask who the patient wants to hear the PHI. May even ask roommate's family to leave.*
 - *Keep conversations close & quiet to avoid being overheard.*

Case 7: Public Displays of PHI

A couple signs-in for an appointment at a fertility clinic. The woman notices that a couple who are friends of theirs signed in on the registration log earlier in the day. Excited to learn that the other couple is also trying to have a baby, they make plans to call the other couple.

Question

- *How may people sign-in at registration for health care services?*

Answer

- *Open areas for registration and check in may only use an individual sign-in sheet that is covered or removed immediately.*
- *May call out a patient's first and last name in a waiting room, just no other information.*
- *Verify demographic and insurance information by showing and asking to verify.*
- *Collect demographic and insurance information by taking to a private setting.*

Question

- *What are the guidelines for using patient information in a presentation or meeting (student conference)?*

Answer

- *Agenda and Minutes of Meetings that may be seen by many should have PHI de-identified (no name, initials, or ID numbers that could link that data to the patient). Remove all information that could lead a person to the identify of the patient.*
- *Presenters may receive identifiable information in a confidential envelope and a single set of minutes with identifiable information may be securely kept.*
- *Keep PHI discussions closed to everyone but people who need to be there e.g. put guests on agenda 1st and dismiss, close doors.*
- *Collect all case presentation materials & destroy confidentially.*

Case 8: Patient Information

A Pediatric Critical Care Nurse receives the following calls about a patient.

- 1) Patient's Neighbor calling for information.
- 2) Patient's Aunt calling for information.
- 3) Patient's Father calling from out of town- unable to reach his wife.

Question

- *Who of these callers can receive patient information?*
- *Where is this information found?*
- *How much information can be given to each of these callers?*

Answers

- **Neighbor**
 - *Consult the Facility Directory (in the computer) for the privacy status of the patient (never use any other census list to respond to inquiries).*
 - *Privacy Patient- Give no information but the customer service thing to do would be to suggest the neighbor check with the mother.*
 - *Not a Privacy Patient- And asked for the patient by name: Give the room #, phone #, location and condition (only the clinical unit/department may give the condition).*
- **Aunt**
 - *Consult the Facility Directory for the privacy status of the patient (never use any other census list to respond to inquiries).*
 - *Privacy Patient- Give no information but the customer service thing to do would be to suggest the aunt check with the mother.*
 - *Not a Privacy Patient- If patient is asked for by name: Give the room #, phone #, location and condition (only the clinical unit/department may give the condition).*
 - *More information may be shared if you have the mother, father, or legal guardian's permission or if the aunt is involved in providing care to the child or family.*
 - *In this case, the best answer would be to get in touch with the mother to learn her wishes or put aunt through to mother.*
- **Father**
 - *Father has right to information about minor child unless court order against or suspect abuse and information would place the patient at risk.*
 - *Verify identify of father using department specific verification process.*
 - *Use your best clinical judgment.*

Answer: Special Situation

- *Do not give any one other than parents information about Psychiatric Treatment Program, HIV test results or Drug or Alcohol Treatment Program without specific written consent.*
- *By the way, photographs, x-rays, sonograms, cardiac catheterization recordings, or any image taken by the hospital are for treatment, if put into the medical record.*
- *Clergy: Refer to the clergy database; pastoral care office can help—will list by religion if state religious preference; will notify church if list church.*
- *Media: Refer to PR or Administrative Supervisor who will notify Security if expect lots of inquiries/visitors.*
- *Emergency/Incapacitated: Make a decision for the patient.*

Case 9: Injured Student

Fellow student is injured on the way to the hospital and is in the ICU.

- 1) Student working on another unit and a friend of the injured student wants information about the student's condition.
- 2) Has looked in the CDR and not found current information.

Question

- *What are the privacy issues here?*

Answer

- *The friend does not need the student's information for care and so should NOT have access to it. The friend should also NOT have looked in the CDR for it— Only what is needed for care should be accessed.*

Question

- *Is this a legitimate request?*

Answer

- *This is NOT a legitimate request for medical information and so the only information given should be the location and condition of the patient if she is not a privacy patient.*

Question

- *What staff can legally have access to the employee's medical information?*

Answer

- *Members of the workforce and their affiliates directly involved in care may access information to:*
 - *Provide care*
 - *Secure payment*
 - *Carryout operations*
- *Members of the workforce do not have access to their own medical record through the CDR. Written authorization processed through medical records must occur.*

**These HIPAA Guidelines have been presented courtesy of ProMedica Health System.*