



What is HIPAA?

The **Health Insurance Portability and Accountability Act** was created by Congress in 1996 to help patients be sure that their medical information would be available when moving between locations; and maintain control of how the information is used and shared.

How does HIPAA affect health care?

This law sets a new standard for the privacy and handling of health information, which can be in **paper, electronic or verbal form**

Who does HIPAA apply to?

HIPAA applies to all health care organizations, organizations that bill or pay for healthcare services, and vendors of these organizations. All employees of these organizations are also required to comply with the law.

What are the components of HIPAA?

- guarantee that workers can keep their insurance even if they change jobs
- more efficient and less costly methods of communication between providers, payors and others
- safety of Protected Health Information (PHI) from unauthorized disclosure
- security of PHI in electronic formats
- new rights for patients to manage their PHI
- new penalties for violating confidentiality

What is PHI?

PHI is any information about the physical or mental health of a patient, which is created by a health care organization, which identifies a patient or can be used to identify a patient.

What are the patient's rights under HIPAA?

- to have access to look at their medical record;
- to request a change in what is written in the record
(however, the health care organization is not required to make this change)
- to put suggested changes into the record if the organization will not do so;
to complain if they think their privacy has been violated;
- to authorize the release of their PHI (with some exceptions)
- to be informed about how an organization is going to use their PHI
(found in the provider's Notice of Privacy Practices).

What are my responsibilities as a healthcare worker regarding PHI?

Verbal Communication

1. Limit verbal communication about patient information when in a public place or an area where the other patients may have access.
2. Keep your voice down or try to find a quiet place to continue the discussion.
3. If you are authorized to have information, only discuss a patient's PHI with someone who has a right to know (the patient, patient's providers; health insurers; designated family, significant others or legal representatives, etc.).
4. DO NOT speak about patient information even with your closest friends/family.

5. Do not mention a patient by name in a public place unless necessary. If you must call for a patient in a waiting area, be discreet and call by name only.
6. DO NOT mention diagnoses or tests to be done.
7. Keep the discussion during registration as quiet and private as possible, including insurance information, advance directives, etc.
8. If you overhear any inappropriate public conversations, encourage the speakers to move out of earshot of others.
9. DO NOT disclose any PHI that you may inadvertently overhear.
10. DO NOT assume that because friends or family are at the bedside, the patient wants them to hear their PHI.
11. Ask the patient about this before beginning the discussion of diagnosis, treatment plans, test results, prognosis, etc. Remember that the patient is in control of his or her PHI. If the patient wishes to have you disclose this information to any third party, you should document the request and, when appropriate, ask the patient to sign an authorization to release the information, which should be placed in the medical record.

Telephone Use

- When speaking on the telephone, always ask the identity of the caller. DO NOT give out any patient information unless you are certain that the person on the line is authorized to receive it.
- When leaving voice messages for patients, provide only the minimum information necessary for the call, i.e. who you are, appointment time and place, and a return number for the patient to call if necessary.
- Keep your voice down when on the phone in an open area within hearing distance of others. If possible, have your phone conversations behind closed doors.
- If discussing PHI with a patient or other authorized individual, ask others in the room to leave unless the patient consents to having them present.

Medical Records

Access to PHI, whether on paper or electronic, is based on your job responsibilities.

The password you receive is yours alone.

- DO NOT share or lend your password to anyone else.
- DO NOT use your access privileges to view patient records you have no business purpose to see.
- Even the act of looking a patient's name up in the system without a valid reason
- is a violation of the patient's right to privacy; curiosity is not an excuse.
- Random, unannounced audits of access to patient records will be conducted.

If you see any paper form of PHI (medical record, lab report, or schedule with patient names on it) in an open area, give it to someone who is working in the area who can put it in the proper place. Where possible, fax machines should be placed in an area where information cannot be seen by patients or unauthorized people passing by. If patient information is sent via fax to another person in your area, deliver it and **DO NOT** read it. **DO NOT** discuss any information you learn in the work environment with other employees, family or friends. **MAINTAIN PATIENT CONFIDENTIALITY.**

DO NOT leave printed PHI anywhere but in its proper place.
DO NOT remove charts, medical records, or electronic PHI from the premises.

**When a request to release PHI is received for any reason,
release only the MINIMUM NECESSARY to fulfill the request.**