

North Country EMS / Yacolt Fire Department HIPAA Privacy and Security Training

North Country EMS
Volcano Rescue Team
Clark County Fire District 13
HIPAA Privacy & Security
Training



Overview

- About HIPAA
- What you need to know about the Privacy Rule
- What you need to know about the Security Rule
- Policies and procedures

What is HIPAA?

- "Health Insurance Portability and Accountability Act"
- Federal law
- Passed in 1996

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HIPAA Issues in EMS

- *Protecting* patient privacy
- *Safeguarding* patient information
- *Granting* certain patient rights

Does HIPAA Apply?

- “Covered entities”
- Includes any ambulance service that files electronic claims for payment
- NCEMS is a “Covered Entity”

Two Major Parts of HIPAA

- The Privacy Rule
- The Security Rule

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The Privacy Rule

Privacy Rule Overview

- Uses and disclosures of PHI
- Patient rights
- Policies and procedures
- Privacy Officer

PHI

**Protected
Health
Information**

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What is PHI?

- Individually identifiable health information
- Past, present or future health care or payment

What is PHI?

- “Individually identifiable” means information such as:
 - Name
 - Address
 - SSN
 - DOB

What is PHI?

- Created or received by a health care provider
- Oral, written, photographic, facsimile, electronic, digital, etc.

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Some Sources of PHI

- Medical Incident Reports
- Dispatch/call intake records
- Billing and payment information

Some Sources of PHI

- PCS forms
- Records from facilities

The Three Basic Permitted Uses of PHI

1. **T**reatment
2. **P**ayment
3. Health Care **O**perations

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Treatment

- You may freely share PHI with other health care providers who also treat the patient

Treatment

- Ambulance providers and facilities may exchange PHI

Payment

- Your organization may use PHI to file claims with payers and send bills to patients

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Payment

- You may obtain PHI from facilities and other providers for payment purposes

Health Care Operations

- Includes QA/QI and certain management functions

“Minimum Necessary” Rule

- May only use the minimum amount of PHI necessary to accomplish the purpose of the disclosure

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“Minimum Necessary” Rule

- Applies only to Payment and Operations uses and disclosures
- **Not** applicable to treatment-related disclosures

Operational Issues

Dispatch and Response

- Can the dispatch center transmit PHI over the radio?

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Dispatch and Response

- Can you share PHI over the radio with other responding agencies?

Dispatch and Response

- Remember, it's still PHI!

On Scene

- Can you discuss the patient's condition with first responders or other on-scene providers?

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On Scene

- Can you discuss PHI with the patient's family members?

Enroute to the Hospital

- Are you permitted to transmit PHI to the receiving facility?

Enroute to the Hospital

- De-identify the information as much as possible

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Enroute to the Hospital

- Use most secure transmission option

At the Hospital

- Is it ok to give the facility our MIR?

At the Hospital

- Can we give a verbal report to the ER staff?

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At the Hospital

- Can we obtain a face sheet or billing information from the facility?

**Disclosures of PHI
to Law
Enforcement**

**Law Enforcement
Disclosures**

- HIPAA greatly limits the disclosures that EMS personnel can make

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**Law Enforcement
Disclosures**

- EMS personnel are patient care providers, not law enforcement agents

**Permissible Law
Enforcement Disclosures**

- When required by law

**Permissible Law
Enforcement Disclosures**

- Identification and Location
 - Suspect
 - Fugitive
 - Material witness
 - Missing person

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**Permissible Law
Enforcement Disclosures**

- Victims of a crime

**Permissible Law
Enforcement Disclosures**

- Decedents

**Permissible Law
Enforcement Disclosures**

- Crime on premises

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**Permissible Law
Enforcement Disclosures**

- Reporting crime in emergencies

**Permissible Law
Enforcement Disclosures**

- Statements by someone who admits participation in a violent crime

**Permissible Law
Enforcement Disclosures**

- Individual who appears to have escaped from custody

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**Abuse, Neglect or
Domestic Violence**

- Report in accordance with state law
 - May report to agencies authorized to receive reports
 - May include social services agencies

Threats to Health and Safety

- Good faith belief
- Serious and imminent threat
- To a person or to the public

Threats to Health and Safety

- May disclose PHI to a person who is “reasonably able to prevent or lessen” the threat
- Includes the target of the threat

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**Disclosures of PHI
to the Media**

Media Disclosures

- Authorization
- De-identified information

Media Disclosures

- Third party disclosures to the media are not your HIPAA problem

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Notice of Privacy Practices (NPP)

Notice of Privacy Practices

- Furnish to patients
- If unable
 - Leave with family, facility or other
 - Document “why and who”

Patient Signature Requirements

- “Acknowledgement of Receipt” of NPP

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**Acknowledgement of
Receipt**

- Obtain signature or document that the patient was unable to sign

**Acknowledgement of
Receipt**

- Include the reason the patient could not sign

**Acknowledgement of
Receipt**

- No need to attempt to obtain signature if:
 - Patient is under duress
 - Physically/mentally unable to sign
 - “Emergency treatment situation”

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Patient Refusals

- Furnish NPP and obtain signature when possible
- Document “why and who”

**Administrative
Issues**

Patient Access

- Patients have the right to inspect and copy their medical records

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Patient Access

- Access requests should be forwarded to the Privacy Officer or designee
- T.J. Bishop, Clinical Officer
- Fulfill these requests in 30 days

Patient Access

- Originals should not be given to patients
- Can charge reasonable fees for copying (check state law) but not for retrieval

Amending PHI

- Patients have a right to request amendment of their PHI

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Amending PHI

- Requests should be referred to the Privacy Officer

Amending PHI

- Not required if:
 - Complete and accurate
 - Created by another provider

Amending PHI

- Changes to patient care information should be made by the original author
- Changes to routine information can be made by office staff

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Amending PHI

- Better documentation = fewer amendments!

Accounting

- Patients may request accounting of certain PHI disclosures made on or after 4/14/03

Accounting

- Exceptions
 - TPO disclosures
 - Disclosures with patient authorization
- Accounting period = 6 years

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The Security Rule

**Electronic Protected
Health Information
(e-PHI)**

e-PHI

- “Subset” of PHI
- Electronically stored (hard drives, tape storage)
- Electronically sent or received (transmitted to Medicare, transmitted via PDA)

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Ambulance Service Examples of e-PHI

- Field data collection
- CAD software
- NCEMS isn't using these yet
- Billing software
 - It's still *your* e-PHI, even if you use a billing company

Safeguarding e-PHI

- Administrative Safeguards
- Physical Safeguards
- Technical Safeguards

Administrative Safeguards

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**YOU Are the Best
“Safeguard”**

Administrative Safeguards

- “Security management process”
- Policies and procedures to prevent, detect, contain and correct security violations

Administrative Safeguards

- Risk analysis
 - Identify risks/vulnerabilities
- Risk management
 - Reduce them to reasonable levels

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Administrative Safeguards

- Information activity review
 - “Tracking” e-PHI
 - Audit logs and access reports
 - Security incidents

Administrative Safeguards

- “Information Security Officer”
 - Kelly Stamp, Admin Assistant
 - May be same as Privacy Officer, but not here at NCEMS
- Sanction policy
 - Required by both Rules

Administrative Safeguards

- Access and termination procedures
 - Granting, changing or ending access to e-PHI

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Administrative Safeguards

- Security training and awareness
 - Orientation and at least annually
 - Periodic updates and reminders

Administrative Safeguards

- Contingency plans
 - Data backups
 - Disaster recovery
 - Emergency mode operations
 - Periodic testing

Physical Safeguards

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Physical Safeguards

- Access and security
 - Limiting physical access
 - Ensuring properly authorized access

Physical Safeguards

- Use of fixed workstations

- Field data collection and use of portable/remote devices

Physical Safeguards

- Re-use and disposal of electronic media
 - “Wiped Clean” of PHI before disposal or reuse

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Technical Safeguards

Technical Safeguards

- Passwords
 - Unique to your level of access
 - Don't share with others
 - Don't post or write down
 - Don't use "obvious" passwords

Technical Safeguards

- Automatic logoffs
 - After period of inactivity
 - Our workstations lock out after 20 minutes of inactivity
 - Don't leave your computer workstation or remote device unattended

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Technical Safeguards

- Transmission security
 - Protect from intrusion, alteration, modification when sending e-PHI
 - Detecting modifications
 - Encryption

HIPAA Documentation

Documentation

- HIPAA Compliance: Six years
- PHI: Retention requirements vary by state

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**Key Policies and Forms:
Privacy and Security**

Refer to "The Ambulance Service
Guide to HIPAA Compliance –
Third Edition"

Key Policies

Key Policies

- Workforce Sanction Policy
 - Corrective actions for staff who violate privacy and security rules
 - Staff Member Verification

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Key Policies

- “Patient Rights” Policies
 - Request for Access
 - Request for Amendment
 - Request for Restriction

Key Policies

- “Internal Control” Policies
 - Levels of Access, “Minimum Necessary Standard” and Limiting Disclosure and Use

Key Policies

- Contingency Planning and Disaster and Recovery Policy
 - Protect e-PHI from loss or corruption
 - Maintain operations

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Key Policies

- Complaints About Privacy Practices
 - External (public)
 - Internal (staff – no retaliation for good faith reports)

Key Forms

Key Forms

- Notice of Privacy Practices (NPP)
- Acknowledgment of Receipt

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Key Forms

- Privacy and Security Training Record
- Student/Guest/Trainee Confidentiality Agreement

Key Forms

- Accounting Log for Disclosures
–Does not apply to TPO uses

Key Forms

- Patient Authorization to Use and Disclose PHI
–Does not apply to TPO uses

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Key Forms

- Job descriptions
 - Privacy Officer
 - Information Security Officer
 - All personnel

Key Forms

- Access Log to Secure Areas
 - “Sign in” and “sign out”
- Password Authorization
 - Agreement to protect PHI

Key Forms

- Incident Reporting
 - Report improper access, use or disclosure of PHI or e-PHI
 - Computer incidents

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Training Summary

Your Primary Obligations

- Don't share PHI or e-PHI with others who aren't involved in the patient's care! (unless a specific exception applies)

Your Primary Obligations

- Limit PHI disclosures to the "minimum amount necessary" to get the job done
 - Exception: Treatment Disclosures

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Safeguarding *Written* PHI

- PHI should not be left unsecured or unattended in the open
 - MIRs
 - Claims
 - Facility records, etc.
 - There is a brown folder in the Medic Office to store incomplete MIRs
 - Completed MIRs are placed in the locked HIPAA box in the front office

Safeguarding *Written* PHI

- Properly destroy “waste PHI” such as scratch paper, preliminary notes, copies, drafts, etc.
 - Such as first response MIRs, times, call notes
 - There are shredders at NC Station 1 and 2.

Safeguarding *Written* PHI

- Don't post or use MIRs or anything with PHI as “examples” unless identifying information is removed

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Safeguarding *Electronic* PHI

- Implement password protection to computers or networks where PHI is maintained

Safeguarding *Electronic* PHI

- Safeguard your facilities, computers, workstations and portable devices from improper access and use, loss, theft, or damage

Safeguarding *Electronic* PHI

- Fax machines
 - Secure location - both ends?
 - Cover sheet with warnings?
 - Located above fax machine, must use
 - Are you faxing only what you absolutely need to fax?
 - Use PHI Fax Log located above fax!

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Safeguarding Verbal PHI

- Minimize incidental disclosures
- Watch what you say and to whom you say it!
- Use most secure transmission option when possible

Make Privacy and Security a Part of Your Organizational Culture

Treat The Patient's PHI and e-PHI as You Would Want Others to Treat Your Own Information

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The “Golden Rule” of HIPAA

What You *See Here*

What You *Hear Here*

When You *Leave Here*

Let It *Stay Here!*
