

RoundTable Strategic Solutions

HIPAA Training - 2021



Welcome to our Vaccination Clinic Team

- Some reminders about Patient Confidentiality and Trust
- We are proud to have you join our team to support the COVID-19 Vaccination Clinics
- You are working in the world of patients and their very personal medical information
- Be respectful



The Federal Health Insurance Portability & Accountability Act of 1996/2003



- HIPAA rules were signed into law in 1996 & invented to...
 - Create a balance by improving the flow of information while protecting the privacy of patients.
- The patient has the right to...
 - Request access to health info.
 - Request to amend their health info.
 - Request restrictions to information sharing.
 - Request accountability of disclosures.

Definition of HIPAA Breach

- A breach is, generally, an impermissible use or disclosure under the Privacy Rule that compromises the security or privacy of **Protected Health Information**.

Definition of HIPAA Breach – Continued

- An impermissible use or disclosure of protected health information is presumed to be a breach unless the covered entity or business associate, as applicable, demonstrates that there is a low probability that the protected health information has been compromised based on a risk assessment of at least one of the following factors:
 - The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
 - The unauthorized person who used the protected health information or to whom the disclosure was made;
 - Whether the protected health information was actually acquired or viewed; and
 - The extent to which the risk to the protected health information has been mitigated.

Exceptions to the definition of “Breach”

- There are three exceptions to the definition of “breach.” The first exception applies to the unintentional acquisition, access, or use of protected health information by a workforce member or person acting under the authority of a covered entity or business associate, if such acquisition, access, or use was made in good faith and within the scope of authority.
- The second exception applies to the inadvertent disclosure of protected health information by a person authorized to access protected health information at a covered entity or business associate to another person authorized to access protected health information at the covered entity or business associate, or organized health care arrangement in which the covered entity participates. In both cases, the information cannot be further used or disclosed in a manner not permitted by the Privacy Rule.
- The final exception applies if the covered entity or business associate has a good faith belief that the unauthorized person to whom the impermissible disclosure was made, would not have been able to retain the information.

HIPAA Rules require us to...

- Treat everything we learn about patients as confidential - *We can't tell anyone else*
- To provide patients more control over their personal health information
- Punish those who misuse patient information by imposing criminal & civil penalties

The purpose of the HIPAA Privacy Rule is to...

- Prevent abuse of information in health insurance and healthcare industries
- Better manage protected health information

HIPAA Rules say.....

- You can't talk about patients outside of the office with anyone
- Clinicians should only access the medical information that is needed for their job/clinical experience
- We need patients to give us permission before we can share information to others on their behalf
- Keep medical records in a secure place-both paper & electronic



Who must follow the HIPAA Privacy Rule?

- Health plans, Health providers, and Business Associates all must adhere to the HIPAA Privacy Rule.
- What this means to you? At all times you must be diligent about maintaining privacy of all confidential information. No sharing of information with unauthorized parties or disclosing information about patients you may have interacted with during the clinic.



If you are using electronic medical records

- You should have a unique **password-don't share** with others
- Do not access information on yourself, your family, your friends, staff or any other person.
- You have a **duty to report** any breach in confidentiality to your supervisor.
- Remember most computer systems can track all access to records.
- Inappropriate access is punishable by federal and state law.

What is PHI?

- **PHI** is considered any identifiable health information that is used, maintained, stored, or transmitted by covered entities and business associates.
- As mentioned above, **PHI** is health information in any form, including physical records, electronic records, or spoken information.

What is a Privacy Breach

You may find more information online

- Find the entire HIPAA privacy summary - <https://www.hhs.gov/hipaa/for-professionals/privacy/index.html>
- See examples of privacy agreements and training materials:
www.insidehopkinsmedicine.org/hipaa
www.privacyrights.org

Example 1 Privacy and Confidentiality

- You saw your teacher in the waiting room at the Clinic
- You are not allowed to tell anyone else that you saw your teacher



Example 2

- You really worked a lot with one patient and got to know them well at the Clinic or in the office setting
- You must not e-mail or “befriend” them on Facebook or other social networking sites.

Example 3

- You are walking with a co-worker to the elevator to lunch
- You are not allowed to talk about the patients you have seen at the Clinic in a public space where other(s) may hear the conversation

We welcome you to the team!

- Together we can do more to care for our communities by providing this service at the COVID-19 Vaccination Clinics.
- Please complete the attached assessment.