INSPIRA HEALTH

Be a HIPAA ACE:
Awareness, Collaborate
and Educate

Speaker Introduction

Dolores “Dee” Baughman, MJ, CHC, CHPC
Compliance Privacy Manager
Inspira Health
Speaker Introduction

Joseph A. Piccolo, MBA, CHC
Vice President, Corporate Compliance
Inspira Health
Today’s Agenda

• **Awareness** begins at the top. Engage your senior leadership through accountability, audits and your annual workplan.

• **Collaborate** with Information Security, Health Information Management, Human Resources, and Legal to develop a strong focused infrastructure to support your efforts.

• **Educate** using varied platforms to meet the needs of your workforce.
Awareness

- HIPAA awareness begins at the top.
- Working with the Board
  Education at each Board Compliance Committee meeting
  - The Board loves “HIPAA Stories”
  - Board members are patients too
  - Investigations
  - Disciplinary Actions
  - What’s in the News
- Establish a Privacy Committee
  - More on this later
  - Include minutes from the meeting in the Board consent agenda
Awareness

• Communicate with Senior Leaders
  • Audit results including
    • Physical walk-throughs of offices & departments
    • Identify the Senior Leader responsible for corrective action
  • Monitoring
    • # of alerts generated
    • Trends identified
  • Investigations
    • Description
    • Outcome
      • Track disciplinary actions

Awareness

• Establish a Privacy Committee
  • Include Information Technology, Human Resources, Health Information Management, and Key Operational Leaders
  • Agenda should include:
    Investigations
      Both Privacy and Security
    Policies
    Education Activities and Audit Results
    Committee education
    OCR/HIPAA Activities
    Be Disciplined
      Commitment of Committee Members
Awareness

• Privacy Committee Responsibilities
  • Liaisons to further advance HIPAA education
  • Input into policy development and approval
    Examples:
    Social Media
    Smart Phones
    Consistency of disciplinary actions
  • Strong collaboration with IT Security
    HIPAA is more than privacy
    Same report out of incidents, education, etc., as is conducted for Privacy

Awareness

• What Employees Need to Know
  • How to report concerns
    Open lines of communication, Non-Retaliation, Hotline
  • Policies and where to find them
    Including consequences for non-compliance
  • What is a HIPAA violation
    Not every issue is a HIPAA violation
  • HIPAA protects the employee as well as the patient
  • HIPAA should never interfere with patient care
    Emergency rooms
Awareness

• Delivering the Message
  • Focused departmental based education
  • Education by “walking around”
  • HIPAA Tip of the Month
  • Keep annual education fresh and timely
  • Use examples and department staff
  • Collaborate with IT
  • Use existing organizational pathways
  • Make Compliance Week Matter
  • Be Visible!

Collaborate
Collaborate

• General Counsel/Legal Team
  • Assist with development and updates of Business Associate Agreements
    Specifically when a vendor requests a change
  • Investigations
    Determine when investigations should be under the direction of Counsel
  • Assists with reporting requirements and “internal politics”
  • General resource for legal interpretation
    Seek legal opinion when in doubt

Collaborate

• Human Resources
  • Compliance recommends-Human Resource implements
  • Collaborate on investigations
    In general, a HR representative should be involved/aware of any ongoing investigations
  • Ensure that HR and Compliance policies are in sync.
  • Compliance must:
    Insure that disciplinary actions are fair and consistent
    Remain independent during investigations
    Understand the boundaries
Collaborate

• Information Security
  • Business Associate/Vendor Security Program
    Vendor risk assessments
      Upon initiation of the arrangement and at regular intervals thereafter
      Results of the assessment can assist with any potential BAA amendment requests
    Limits of liability
  • Access controls
    Appropriate use of e-mails
    Transmission of PHI
  Safeguards
    Phishing campaigns
    Physical walk throughs

Collaborate

• Health Information Management
  • Release of information
    Understanding the defined data set
  • Request for amendment
    A HIPAA/Compliance determination
  • Responding to law enforcement
  • Policy overlaps/conflicts
Educate

Why is educating your workforce so important?

• **Increase** staff knowledge and awareness
  • Know rules & regulations
  • Know internal policies & procedures and the Code of Conduct
  • Only then can you hold staff accountable for compliance
  • Know who to call or contact for guidance

• **Lower** risk for inappropriate access or breach to your organization
  • Awareness of the monitoring program (coworker snooping, household snooping, VIP access)
  • Insiders pose the greatest risk for breaches – intentional or accidental

• **Increase** communication between staff and compliance team
  • Encourage reporting when areas of concern or risk are identified
  • Non-Retribution for reporting in good faith
  • Make reporting easy! (i.e., post phone numbers, hotline, email, web-based)
Educate

- **New employees**
  - What is HIPAA & PHI?
  - Appropriate Use & Disclosure of PHI
  - HIPAA Policies & Procedures
  - How to report HIPAA concerns

- **Current employees** – annual via on-line solution
  - Updated annually based on trends

- **Quiz**

GROWTH

- **Compliance Committee/Board Meetings**
  - Board members – they are patients, too!
  - Senior leaders – stewards of the organization

(cont.)

Educate

- **Medical Staff Meetings**
  - Physician focused education

- **Lunch & Learn** - focused education at staff meetings
  - Educate to your audience

- **Corrective Action** - Mandatory
  - 1:1 when breach has occurred
  - Department-wide after egregious breach/termination
Educate

• Educate entire workforce by using varied platforms to meet the needs of your organization

  VARIETY

• Power Point (new employees)
• On-line (current employees annually)
• Compliance Tip of the Month – emailed to ALL
  Based on organizational issues/violations, hotline calls, HIPAA in the news
• HIPAA 101 Brochure – on line, new employees, department educations, 1:1
• Verbal discussions (break rooms) with formal agenda
• Badge Buddies
• Pens, flashlights, lunch bags etc. with Hotline number & catchy phrases
• Compliance Week – visit all Hospital campuses & be seen

Educate

HIPAA Hints

✓ Protected Health Information (PHI) must be kept private!
✓ Use and disclose PHI for treatment, payment and operations as permitted by federal and state law.
✓ Think about where you are and who can overhear you.
✓ Think before you share PHI—written, verbal and electronic.
✓ Use # or click “send secure” button when emailing PHI.
✓ Use the minimum amount of PHI necessary to get the job done.
✓ Never share your password.

Corporate Compliance Contact Information

Compliance Hotline
1-866-413-6913
Compliance Office
1-435-507-7837
compliance@ihn.org

HIPAA 101

PATIENT PRIVACY IS EVERYONE’S RESPONSIBILITY
**Educate**

**Education program is driven by identified areas of risk**

- Monitoring of electronic data sources – identify trends
  - Types of snooping alerts
  - Locations
- Organizational issues/violations
- Hotline Calls
- Reports to the Compliance department (email, calls, web-based, walk-in)
- In the news (local & national)

**Education is NOT one size fits all**

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**HIPAA Hazards**

- Snooping in medical records.
- Unencrypted laptops and mobile devices.
- Use of PHI on Social Media.
- Posting or sharing photos and videos containing PHI.
- Disclosure of sensitive medical information.
- Improper disposal of PHI.
- Relaying patient information without authorization.
- Oversharing.

**Privacy Monitoring Program**

Inpsira protects electronic health records by monitoring for inappropriate or unusual access such as:

- Colleagues/Managers
- Family Members
- VIPS
- High Patient Access
- Self Access
- Self Modification
- Other Suspicious Activities

Do not access records unless you are doing so within the scope of your job!
Educate

Create a Formal Agenda

• What is HIPAA and why is it important?
• What is PHI? Provide examples
• Appropriate Use & Disclosure of PHI
• Minimum Necessary
• Monitoring Program
• HIPAA in the News
• Hot Topics (i.e., Social Media, cell phones)
• Information Security Risks (i.e., log on/password, encryption)

Educate

HIPAA Audits – Incorporate Education

• Document observations and make recommendations based on audit findings

• Part I: HIPAA Regulatory Requirements - § 164.520 Notice of Privacy Practices for Protected Health Information
  • Is the NPP posted? Is it current?
  • Are brochures available in English and Spanish? Are they current?
  • Is written acknowledgement obtained? What if the patient refuses to sign?

• Part II: Physical environment – walk abouts
  • Monitors, shredder boxes, trash can inspection
In Summary....

• Effective HIPAA management is a collaborative effort
• Support from the Board and Senior Leadership is critical
• A well educated workforce is a compliant workforce
• Make sure your Privacy Committee is effective
• Employees need to understand your monitoring capabilities
• Your role is to protect the employee as well as the patient
• Buy your IT colleagues lunch
Your Turn

- Do staff contact your Privacy office proactively to report concerns?
- Do staff contact your Privacy office for guidance or advice before issues arise?
- How engaged in your Board/Senior Leadership?
- How do you monitor the effectiveness of your program?

"Oh, it's carved in stone, but it's open to interpretation, right?"

It's not what WE know, it's what our workforce knows that matters!

Questions???

KEEP CALM and ASK QUESTIONS
Thank You!

Dee Baughman
BaughmanD@ihn.org

Joe Piccolo
PiccoloJ@ihn.org