

Health Insurance Portability and Accountability Act of 1996

(HIPAA)

Privacy Policy Training

**Using Protected Healthcare Information
Level II Training**



**Your HIPAA Privacy Officer:
Name Goes Here**

Session Facilitator:

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HIPAA Project Management Office

Objectives of Presentation

- Extend knowledge of HIPAA regulations and concepts for personnel that will be **USING** Protected Healthcare Information (We will discuss Disclosure later)
- Understand the impact of HIPAA regulations on Policies and Procedures specific to **USE** of PHI
- Foster Continuous Improvement of policies and procedures

USE of Protected Healthcare Information

Definition: **USE** means the sharing, employment, application, utilization, examination, or analysis of protected health information (PHI) inside the organization.

USE of Protected Healthcare Information

- If you USE PHI in your work environment, you **must** protect that information
- What if this were **YOUR** information

USE of Protected Healthcare Information

- You DO NOT need patient authorization to use PHI for:
 - Treatment, Payment or Operations
 - Disaster or Emergency conditions
 - Public Health purposes
 - Reporting Child Abuse, Other Abuse, Neglect, Domestic Violence
 - For facility directories (identification/location)

USE of Protected Healthcare Information

- You DO NOT need patient authorization to use PHI for:
 - As required by state or federal law
 - Research
 - For intelligence or national security
 - Medical Suitability Determination
 - Custodial Situations
 - Military and Veterans

USE of Protected Healthcare Information

- You DO NOT need patient authorization to use PHI for:
 - National Security and Intelligence
 - Subpoenas, Court Orders, Other Legal Processes
 - Law Enforcement
 - Victims of Crime

USE of Protected Healthcare Information

- Some examples of when you DO require patient authorization to use PHI:
 - When required by state law
 - Marketing
 - Fundraising
 - Unless specifically exempted

USE of Protected Healthcare Information

Use common sense, but:

- If you are not sure it's **OK**, **DO NOT** use the information without discussing it with your Privacy Officer and/or Supervisor
- **DO NOT** put yourself or your organization at risk
- **KNOW YOUR POLICIES and PROCEDURES**

USE Only What Is Needed

- Use the minimum necessary info to do your work
- Discuss system changes where appropriate (continuous improvement)

Which Policies / Procedures Address USE of PHI?

The State of West Virginia has retained Clayton-MacBain, LLC to create HIPAA policy templates. These templates are copyrighted materials and as such, agency policies must not be reproduced or shared without the authorization of your privacy officer.

Which Policies / Procedures Address USE of PHI?

- USE of protected health information without patient authorization
 - Authorization NOT required for this use
 - Minimum necessary PHI used
 - Protect PHI in your possession

Which Policies / Procedures Address USE of PHI?

- USE of protected health information for Research purposes
 - Institutional Review or Privacy Board may waive authorization (if research cannot be done without the data)
 - Dates of the study must be documented
 - Use must have minimal RISK to patient
 - There is an adequate plan to protect PHI
 - PHI will not be reused by others

Which Policies / Procedures Address USE of PHI?

- USE of protected health information for Marketing purposes
 - Demographic data may be used (name, address, etc.)
 - Never use clinical data
 - 'Opt Out' clause for future marketing must be included

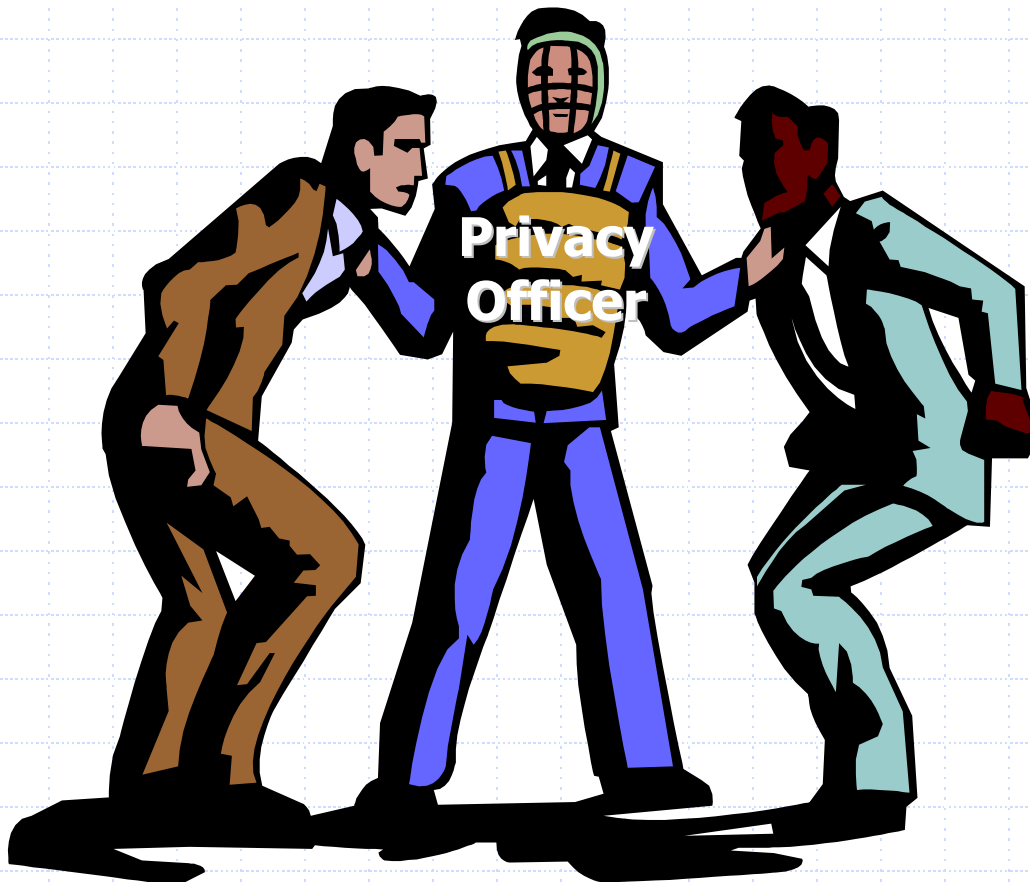
Which Policies / Procedures Address USE of PHI?

- USE of protected health information for Fundraising purposes
 - Demographic data may be used (name, address, etc.)
 - Never use clinical data
 - 'Opt Out' clause for future fundraising must be included

Which Policies / Procedures Address USE of PHI?

- Conflicts between authorizations and restrictions
 - Honor the Most Restrictive Request or Honor the Most Recent Request (default)
 - Contact the patient for resolution
 - Resolve conflicts before using PHI
- Psychotherapy notes – The State of West Virginia will not collect or otherwise use psychotherapy notes

Discussion of Our Affected Policies/procedures



We are not here to debate policies, but to improve them!

Discussion of Our Affected Policies/procedures

- Do we need all the PHI that is used
- Where are we vulnerable to Sanctions/penalties
- What can be done to strengthen our:
 - Policy
 - Procedure
 - Processes/systems

Continuous Improvement of Our Policies and Procedures

- Each of you are commissioned to:
 - Monitor PHI usage in your work assignments and those around you
 - Analyze gaps in protection and security of information
 - Report/Discuss any issues to your HIPAA Privacy Officer
 - Suggest resolutions and/or Policy/Procedure changes