

# **Health Insurance Portability and Accountability Act of 1996**

**(HIPAA)**

## **Privacy Policy Training**

**Disclosing Protected Healthcare Information  
Level III 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 **DISCLOSING** Protected Healthcare Information
- Understand the impact of HIPAA regulations on Policies and Procedures specific to **DISCLOSURE** of PHI
- Foster Continuous Improvement of policies and procedures

# DISCLOSING Protected Healthcare Information

Definition: **DISCLOSURE** means the release, transfer, provision of access to, or divulging in any other manner of protected health information (PHI) outside of the organization.

# DISCLOSING Protected Healthcare Information

- If you disclose PHI in your work environment:
  - Authenticate the receiver
  - Document the transfer and verify receipt
  - Business Associate Agreements
  - Transfer minimum necessary PHI for the need
  - Verify secure transfer methodology

# DISCLOSING Protected Healthcare Information

- If you disclose PHI in your work environment:
  - Backups
  - Storage on/offsite
  - Disposal
  - Termination of access
    - Employee(s)
    - BAA(s)

# 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**

# 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 DISCLOSURE of PHI?

- DISCLOSURE of protected health information without patient authorization
- Verification of requestor's identity
- DISCLOSURE of protected health information to business associates and other contractors
- DISCLOSURE of protected health information for certain government functions

# Which Policies / Procedures Address DISCLOSURE of PHI?

- DISCLOSURE of protected health information to family, friends, or others directly involved with the patient's care or payment
- DISCLOSURE of protected health information for law enforcement purposes
- DISCLOSURE of protected health information for underwriting purposes

# Which Policies / Procedures Address USE of PHI?

- DISCLOSURE of protected health information for marketing purposes
- DISCLOSURE of protected health information for fundraising purposes
- DISCLOSURE of protected health information for disaster situations
- Conflicts between authorizations and restrictions

# Which Policies / Procedures Address USE of PHI?

- DISCLOSURE of protected health information to avert threats to health and safety
- DISCLOSURE of protected health information for public health purposes
- DISCLOSURE of protected health information required by law



# Which Policies / Procedures Address USE of PHI?

- DISCLOSURE of protected health information to report abuse, neglect or domestic violence
- Subpoenas, Court Orders, Discovery Requests, and other legal processes
- Extension of privacy protection to deceased individuals

# Discussion of Our Affected Policies/procedures

- Do we need all the PHI that is used
- Where are we vulnerable to Sanctions/penalties  
(disclosure is the HIGHEST risk potential)
- 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 disclosures 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

# DISCLOSING Protected Healthcare Information



**Remember –  
You are the  
‘gatekeepers’  
of protected  
healthcare  
information**