

HIPAA HAPPENINGS

The Newsletter of the Office of HIPAA Privacy and Security

Message from Director

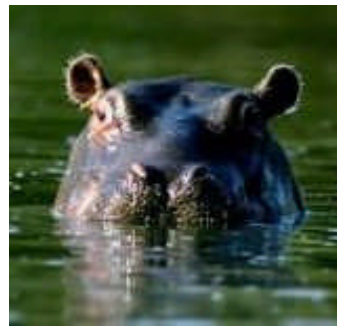
It is with great pride and excitement that we are publishing the very first issue of "HIPAA Happenings"; the newsletter of the Office of HIPAA Privacy and Security. Each issue will contain useful information related to current HIPAA issues. We hope that you find each issue enlightening and useful.

Please feel free to submit questions to hipaaprivacy@med.miami.edu. We will answer the questions and selectively publish some of the questions and answers in an upcoming issue. Additionally, all published issues of this newsletter will be accessible from our www.med.miami.edu/hipaa/public. They will be archived as a reference tool.

The Office of HIPAA Privacy and Security (OHPS) is here to support HIPAA compliance efforts of the institution. As employees of the institution, compliance is all of our responsibility. We ask that you make HIPAA Privacy and Security your practice. If you have a HIPAA question, HIPAA concern, or other potential HIPAA issue that you feel needs to be discussed or addressed, please contact our office for assistance at 305-243-5000. Each one of us plays an important role in this institution and its mission. We must all do our part in support of compliance with this federally mandated law as well as protect the valuable information assets of our institution.

Thank you for all of your hard work and efforts in maintaining and supporting HIPAA compliance. Many thanks to my team for all of their support in making this newsletter possible.

Respecting Patient Privacy, Building Patient Trust!
Sharon A. Budman, M.S. Ed., CIPP



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What is Minimum Necessary?



The Rule requires covered entities to make their own assessment of what protected health information (PHI) is reasonably necessary for a particular purpose, given the characteristics of their business and workforce. Medical Records Staff/Document Custodians may use and disclose PHI to providers for treatment purposes, to billing office personnel for the accomplishment of their billing function, and to patients and other appropriately authorized individuals. Authorized personnel shall request and access only minimum necessary PHI to accomplish these tasks, based on the authorization to release such information where applicable. No information shall be disclosed to anyone other than the patient without appropriate authorization or as otherwise permitted by law. For more information, please refer to University Minimum Necessary Policies as posted on our <http://www.med.miami.edu/hipaa/public/x82.xml>.

Accessing Minimum Necessary Protected Health Information

UM employees should be mindful of security responsibilities when accessing University information systems. University data should only be accessed for legitimate, job-related activities. Federal laws protect the privacy and security of patients' health data as well as other individually identifiable data. All medical school employees sign Health Insurance Portability and Accountability Act (HIPAA) confidentiality statement and are governed by both University HIPAA policies as well as University Information Systems policies. These policies apply to all employees regardless of tenure or rank. Additional information may be found on our https://www.med.miami.edu/hipaa/private/documents/ppp_minimum_necessary.pdf. You will be asked to type in your medical domain username and password to access these policies.

Did you Know?

Did you know that all Board Certification Groups that request patient cases for certification exams are required to sign a Business Associate Agreement?

Please submit all business associate information via the Office of HIPAA Privacy and Security
www.med.miami.edu/hipaa/public/x91.xml.

An agreement will then be sent to the Group for signature.

Mandatory Employee HIPAA Privacy & Security Training

All new employees receive mandatory HIPAA training through New Employee Orientation via the NetLearning application. Employees who have not received HIPAA training either provided by the departmental HIPAA liaison or via the online learning tool, for whatever reason, are required to now take the online training. Training is a requirement and may be accessed at any time through the <https://netlearning.miami.edu/lahtdocs/default.htm>. Those employees handling subpoenas and Third Party authorizations should also take the Subpoena CBL, available on Netlearning.



Frequently Asked Question of the Month

Question: May physicians' offices use patient sign-in sheets or call out the names of their patients in their waiting rooms?

Answer: Yes. Covered entities, such as physicians' offices, may use patient sign-in sheets or call out patient names in waiting rooms, so long as the information disclosed is appropriately limited. The HIPAA Privacy Rule explicitly permits the incidental disclosures that may result from this practice, for example, when other patients in a waiting room hear the identity of the person whose name is called, or see other patient names on a sign-in sheet. However, these incidental disclosures are permitted only when the covered entity has implemented reasonable safeguards and the minimum necessary standard, where appropriate. For example, the sign-in sheet may not display medical information that is not necessary for the purpose of signing in (e.g., the medical problem for which the patient is seeing the physician). See 45 CFR 164.502(a)(1)(iii).

Submit your questions to
hipaaprivacy@med.miami.edu

Did you Know?

Did you know that all of the HIPAA forms, known as Attachments, must be sent to the Office of HIPAA Privacy and Security for scanning into the centralized repository?

Please send all forms to the
OHPS
PAC 409 Locator Code (M-890)
Please feel free to keep a copy in
your files.

Important!!

The Office of HIPAA Privacy and Security is solely authorized to respond to Attachments 6, 13, and 33. No departmental personnel are permitted to respond to these documents. If you need assistance, please call the OHPS.

PHI Requests from Law Enforcement Officials

A covered entity may disclose PHI to law enforcement officials as follows:

- In response to a court order, subpoena, warrant, summons or similar process
- Limited information to identify or locate a suspect, fugitive, material witness, or missing person
- About the victim of a crime if, under certain limited circumstances, we are unable to obtain the persons agreement
- About a death we believe may be the result of criminal conduct
- In emergency circumstances to report a crime, the location of the crime victims, or the identity, description, or location of the person who committed the crime

If you receive a request from Law Enforcement, you may contact the Office of HIPAA Privacy and Security for assistance in reviewing the request. All requests from Law Enforcement must be received in writing on Official Letterhead. If there are extenuating circumstances, information may be released, but all releases of such information to law enforcement must be documented with an Attachment 45 and sent to the OHPS for scanning.



For access the latest forms and HIPAA information, please access the HIPAA Privacy and Security site at <http://www.med.miami.edu/hipaa> or contact the Office of HIPAA Privacy & Security at 305-243-5000.