

HIPAA HAPPENINGS

The Newsletter of the Office of HIPAA Privacy and Security

Message from Director HIPAA Security Policies and Compliance

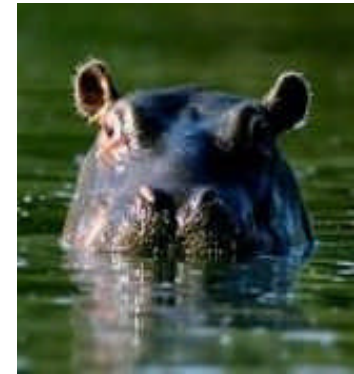
I am pleased to announce the posting of the HIPAA Security Policies to our Office website <https://www.med.miami.edu/hipaa/private/x22.xml>. Due to the proprietary nature of the policies, you will need to type in your medical domain username and password to access them. These policies encompass the requirements of the federally mandated HIPAA Security Rule. All workforce members, especially those who manage and work with computer systems storing patient information should be familiar with these policies. Any and all systems that contain electronic protected health information are governed by these policies. Each business unit/department is responsible for developing its own procedures for compliance with the HIPAA Security policies. Such documented procedures may be requested by Internal or External Auditors, General Counsel or the Office of HIPAA Privacy & Security. If you require any assistance or have questions, please contact us at 305-243-5000.

The Office of HIPAA Privacy and Security is here to support the 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 our practice. If you have a HIPAA question, concern, or other potential issue that you feel needs to be discussed or addressed, please contact our office for assistance.

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 as well as other federal and state laws. Compliance is more than ensuring that our activities agree with both the spirit and letter of applicable laws and regulations. It is about creating repeatable and standardized business processes that enhance the efficiency and effectiveness of the organization.

Thank you for all of your hard work and efforts in maintaining and supporting HIPAA compliance.

Sharon A. Budman, M.S. Ed., CIPP
Director/Ombudsman, Office of HIPAA Privacy and Security



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Leaving Messages for Patients on Answering Machines

The OCR (Office of Civil Rights) published official guidance to the HIPAA privacy rule that addresses frequently asked questions. The question regarding messages left on answering machines is specifically addressed. The guidance states that the Privacy rule "does not prohibit covered entities from leaving messages for patients on their answering machines." However, to "reasonably safeguard" the individual's privacy, the covered entity should "take care to limit the amount of information disclosed on the answering machine." The guidance further explains that the covered entity should consider "leaving only its name and number and other information necessary to confirm an appointment, or ask the individual to call back." The guidance does not further elaborate on this issue. For further information, please contact our office at 305-243-5000.



Provider to Provider Release of PHI

The HIPAA Privacy Rule permits physicians to disclose protected health information to another health care provider for **treatment** purposes without patient authorization. This may be done by fax or by other means. Covered entities must have in place reasonable and appropriate administrative, technical, and physical safeguards to protect the privacy of protected health information that is disclosed using a fax machine. Examples of measures that could be reasonable and appropriate in such a situation include following the Policy by using the prescribed cover sheet, the sender confirming that the fax number to be used is in fact the correct one for the other physician's office, and placing the fax machine in a secure location to prevent unauthorized access to the information. See 45 CFR164.530(c). University's Provider to Provider Form located on the HIPAA website: <https://www.med.miami.edu/hipaa/private/documents/PPRTP.pdf>

Fax Cover Sheets & Procedures

When faxing documents containing any protected health information (including just a patient name) our policy is to use the University prescribed fax cover sheet as it contains legal disclaimer language provided to us by our legal counsel's office. When faxing, the sender is required to call the intended recipient to verify the fax number and advise the individual that you will be faxing the document. This must be done each and every time. Not complying with this procedure constitutes a HIPAA Violation. The following link is for the University's standard fax cover page located on the HIPAA website:

https://www.med.miami.edu/hipaa/private/documents/um_hipaa_fax_cover2.doc



Email Disclaimer

All workforce members are required to insert email disclaimer language to their auto signature for all messages containing PHI. The HIPAA Liaisons, in conjunction with their departmental administrators should send a communication to all faculty and staff asking them to insert the required email disclaimer to their auto-signature. Information sent via regular email has no guarantee of confidentiality. Whenever possible, always try to use an encryption mechanism when sending email containing PHI. Always avoid sending highly sensitive information including HIV, Psychotherapy, and other diagnosis information via unencrypted email.

Detailed instructions on how to insert this disclaimer are available on the HIPAA website: https://www.med.miami.edu/hipaa/private/documents/um_hipaa_email_warning.doc

Release of Sensitive Information

Psychotherapy Notes

Psychotherapy Notes may only be released pursuant to a legally-sufficient written authorization signed by the patient that specifically authorizes the release of mental health PHI.

The release must be authorized by the provider. Psychotherapy Notes/Mental Health Information may only be released when the authorization for release of mental health record is not combined with an authorization for release of any other type of information. If the Psychotherapy Notes contain HIV/Aids information, the release of such information must be on a separate authorization by the patient. Authorizations may not be combined.

HIV/AIDS Information

Unless a court order specifically requires the University to disclose HIV/AIDS information concerning an individual, workforce members, contractors, and medical staff providers may disclose HIV test results or the identity of the patient upon whom a test has been performed only with the authorization of the patient, using the standard authorization form.

Subpoena and Authorization Processing Training

It is mandatory that Employees who handle subpoenas and Third Party Authorizations take the online training. The training may be accessed through the NetLearning system:

<http://netlearning.miami.edu>

Survey, Accreditation, etc...

If a department, division, or clinic receives notification of an audit, survey or other activity that requires a third party or oversight organization to have access to our clinical areas, records, etc, it is imperative that the department notify the Office of HIPAA Privacy and Security by phone at 305-243-5000 or by email **prior** to the scheduled visit. Such activities may require accounting for disclosures, business associate agreements, and even contractual verification prior to allowing such activities to take place. Additionally, there are many compliance efforts that require the coordination of various areas. Please contact the OHPS at 305-243-5000.

Notice of Privacy Practices Did you Know?

Did you know that it is a requirement of the Federal Regulation that the Notice of Privacy Practice be posted in all clinical patient areas. Covered health care providers that maintain an office or other physical site where they provide health care directly to individuals are required to post the entire Notice in a clear and prominent location. The Privacy Rule, however, does not prescribe any specific format for the posted Notice, just that it include the same information that is distributed directly to the individual. We recommend placing it in a clearly labeled binder on a table in the waiting area. If your department needs additional copies for distribution they must be ordered from the prescribed vendor.

Click here to access the order for:

<https://www.med.miami.edu/hipaa/private/documents/npporder.pdf>

PHI Flows

The Office of HIPAA Privacy and Security is currently reviewing and updating our documentation related to the PHI flows. When a new site of service is established please contact our office as the flows must be updated. We are required by law to maintain the PHI flows.

Frequently Asked Question

Question: Are accreditation organizations business associates of the covered entities they accredit?

Answer: Yes. The HIPAA Privacy Rule explicitly defines organization that accredit covered entities as business associates. Like other business associations, accreditation organizations provide a service to the covered entity which required the sharing of protected health information.

ANY QUESTIONS

Submit to
hipaaprivacy@med.miami.edu



The Office of HIPAA Privacy and Security would like to wish you a safe and happy new year.

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

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