

# UPMC CancerCenter

Partner with University of Pittsburgh Cancer Institute

## **HIPPA Review**

# Health Insurance Portability and Accountability Act (HIPAA)

## What is HIPAA:

- Stands for “Health Insurance Portability and Accountability Act”

## Addresses three areas:

1. Insurance portability
2. Administrative simplification
3. Security and privacy: health care providers must use safeguards to maintain the privacy and security of **protected health information** (PHI).

# Protected Health Information (PHI)

- Individually identifiable information: written, oral or electronically transmitted.
  - Name
  - Address
  - E-mail address
  - Telephone/fax number
  - Social Security number
  - Birth date
  - Admission date
  - Discharge date
  - Insurance plan number
  - Medical record number
  - Photos
  - Finger prints
  - Vehicle Identifiers

# Protected Health Information (PHI)

- During a patient's initial visit, the staff member will give them UPMC's Notice of Privacy Practices, Data Use Agreement, and UPMC's Release of Information Policy.
- If staff receive a subpoena requesting PHI, you should follow the release of PHI policy and guidelines.
- A patient may request to amend his/her PHI. If this is denied, staff will inform the patient in writing and allow them to include a statement of disagreement.

# Confidentiality

- Patients have the right to privacy concerning their medical care, financial status, and family affairs.
- You are only allowed to access a patient's record if it pertains to your volunteer duties.
- Never use a patient's name when discussing their care.
- Never discuss or whisper a patient's care information in public areas, elevators, lobbies, waiting rooms, etc. Instead, wait until you get to a private area before discussing information.

# Hypothetical Scenario



Terry is eating lunch in the café. Terry hears staff members at the next table talking in detail about a patient's diagnosis, mentioning the patient's name and discussing the patient's current treatment plan. What should Terry do?



Excuse me,  
I can hear  
what you  
are talking  
about

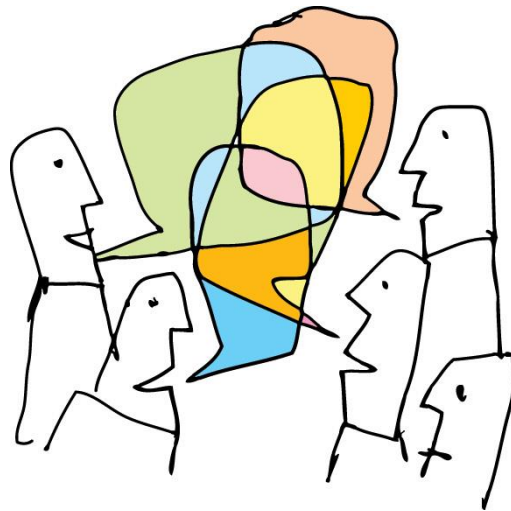
- *I'll keep  
what I  
heard to  
myself*

I think I'll  
move to a  
table across  
the room

*I have a HIPAA  
violation to  
report to my  
supervisor*

# Action Steps

- When you overhear this, you should report the incident to a supervisor or privacy officer and inform the staff member that they should not be discussing patient information in public areas.





# Computer Access

- Create a strong password and DO NOT share your password – do not even give it to your supervisor
- Do not leave confidential information up on your screen when you step away from your computer
- Never open an e-mail attachment from an unsolicited source
- Use e-mail disclaimer
- If you believe your password was stolen, you should immediately change it and call the ISD Help Desk.

# Computer Access

- When printing patient information, retrieve it from the printer, confirm the printer you are using and retrieve the information even if it was sent to the wrong printer.
- If a staff member received a phone call requesting medical records of a patient be faxed, they must:
  - Use appropriate UPMC Fax Cover Sheet
  - Notify the recipient in advance (if it is a non-routine fax)
  - If available, use the button on the fax machine to dial the pre-programmed number
  - Verify recipient fax number is part of the authorization
  - Verify with the recipient that the fax was received

# Confidential Information

- You are only permitted to view medical record information on yourself (to an extent) and the patient for whom you are caring for, but only as necessary to perform your volunteer duties.
- As a volunteer, you should always keep your computer password confidential, properly dispose of PHI by shredding or placing it in a shredding container, not download information from untrusted sources and log off your computer when not in use.

# Confidential Information

- Never leave a photocopier unattended when making copies of confidential information.
- Confidential information should always be disposed of in a shred bin.
- Immediately remove confidential information from the fax machine.
- To report inappropriate use of patient information, you can notify your privacy officer, supervisor and call the privacy helpline.

# Need-To-Know

- Need-To-Know refers to the principle that patient information should be accessed or disclosed only as necessary in order to provide services to the patient or as otherwise authorized by the patient or the law.
- If you receive a call from a reporter that is asking about the status of a famous patient, you should always direct them to your facility's media relations department.

# Treatment, Payment or Operations (TPO)

Without the patient's permission, information can **ONLY** be shared if it pertains to:

- A person's **treatment**
- **Payment** of his or her bill
- Hospital **operations**

# Hypothetical Scenario

Terry is refilling water pitchers in the patient/visitor kitchen. Terry is surprised to find that fellow volunteer, Pat, is currently a patient in one of the treatment rooms. Terry wants to tell their mutual friends that Pat is a patient so that other volunteers/friends can send Pat cards. Terry wants to be helpful and let the nice ladies in the volunteer office know, too.

Pat, I pledge  
to protect  
your privacy!  
These lips are  
sealed.

You want me to  
tell people? Okay,  
I'll just need your  
written consent.

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Please take the HIPPA quiz,  
found on the website, to complete  
this topic's training.

Thank you!