

Are you “hip” to HIPAA?

What is HIPAA?

HIPAA stands for the Health Insurance Portability and Accountability Act of 1996. While the primary focus of HIPAA was to improve health insurance accessibility to people changing employers or leaving the workforce, the act also addresses issues related to the electronic transmission of health-related data. Specifically, the Administrative Simplification portion of the act mandates national electronic transmission standards and specific protections for individual health information.

There are four key provisions to the Administrative Simplification Act:

1. National standards for electronic transmission of health care data.
2. Unique health identifiers for providers, employers, health plans and individuals.
3. Security standards to protect electronically maintained health information.
4. Privacy regulations to protect individual health information.

The National standards for electronic transmission of health care data have been issued and are the first set of standards with which providers must comply.

Who is affected by HIPAA?

If you submit any health claims electronically or store patient records on a computer, you will need to comply with all of the HIPAA provisions.

Important Dates/Deadlines:

April 14, 2003 Ddeadline for meeting privacy standards if no extension was filed
December 2003 Security rules published

You can access more information about HIPAA at:

American Academy of Family Physicians: HIPAA Resources
<http://www.aafp.org/x3084.xml>

Privacy Standards at Health and Human Services: Office of Civil Rights
www.hhs.gov/ocr/hipaa.

Summary of State Law on Privacy in Relation to HIPAA, The CT Summary is at:
http://www.healthprivacy.org/usr_doc/CT2002.pdf

Transactions Standards and Code Sets at Health and Human Services: Centers for Medicare and Medicaid Services:
www.cms.hhs.gov/hipaa

HIPAA Advisory Site: www.hipaadvisory.com

For more information about this newsletter or home care, please contact the CAHC office.

If You **DO** These HIPAA **DON'Ts** You Could Be Fined...

- Conversations in public areas between nurses/other staff members about patients whom you can identify by the content of the conversation.
- Clinical records lying unattended in a public place.
- Private information stored in unlocked files in hallways.
- Easily viewable computer screens with patient information and no one at the desk.
- Cell phone conversations between a nurse and physician taking place in a public area.
- Two staff members complaining about a patient in the public bathroom.
- Fax machines that receive patient information in locations where the information is not secure.
- Scheduling boards that list patients by name, type of visit, and diagnosis, hanging in an area that is accessible to visitors.
- Papers with patient information on them (such as report printouts) being cut up and reused as scrap paper.