Release of Protected Health Information

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EXECUTIVE SUMMARY:

What would you do if you received a subpoena in the mail requesting a patient's records? What would you do if a physician's office called and requested a patient's PHI (protected health information)? The "HIPAA Helpers" KPHLI team wanted to provide answers to these and other questions in order to make the staff be and feel more competent in handling these requests and in order to protect the patient's PHI. This will also prevent our local health departments from receiving fines and/or penalties for improperly releasing PHI. Upon completion of our project, we will assist the compliance officer in providing a mandatory HIPAA training session in our local health departments and an informational resource book will be available if needed for review.

INTRODUCTION/BACKGROUND:

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) required the Secretary of the U.S. Department of Health and Human Services (HHS) to develop regulations protecting the privacy and security of certain health information. HHS published the HIPAA <u>Privacy Rule</u> and the HIPAA <u>Security Rule</u>. The Privacy Rule established national standards for the protection of individually identifiable health information. The Security Rule established a national set of security standards for the protection of electronic health information.¹

The Privacy Rule describes who is covered, what information is protected, and how protected health information can be used and disclosed. A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and well-being.²

The Security Rule includes who is covered, what information is protected, and what safeguards must be in place to ensure appropriate protection of electronic protected health information. A major goal of the Security Rule is to protect the privacy "of individuals" health information while allowing covered entities to adopt new technologies to improve the quality and efficiency of patient care.²

The HIPAA HELPERS KPHLI Leadership team began this experience in April 2011 when we chose "HIPAA" as our Change Master Project. The team chose a subject that we were all passionate about. At the time, we didn't realize how broad "HIPAA" is and it involves so many areas, as listed above. One of the first things we needed to do when we met as our group was to define more specifically what part we were going to deal with. There are enormous numbers of websites about HIPAA so we figured every kind of information was already available except we did not see anything that was more specific about how to properly release and procure protected health information. We all knew how anxious our local health department staffs were in releasing requested PHI. They were worried about "getting in trouble" if the requested information was released

improperly. Failure to comply with HIPAA can result in civil and criminal penalties with a maximum penalty up to \$1.5 million annually and imprisonment for up to ten years.³ Who wouldn't be afraid to handle these requests?! These are some of the reasons the staff would say "it's not my job" or "let the supervisor do it". We chose to focus our efforts on providing education for the staff on the correct procedures used when requesting or releasing protected health information.

Although all staff is mandated to complete the HIPAA "TRAIN" module annually, most do not feel they gain enough knowledge to properly release PHI. The TRAIN module is great in providing the history of HIPAA and general information but does not give enough "real-life" examples or information on specific release of information.

The benefits of having a well-educated, competent staff performing duties related to HIPAA are well known. Our efforts with this project are to inform, educate and reduce the fear and anxiety in releasing PHI.

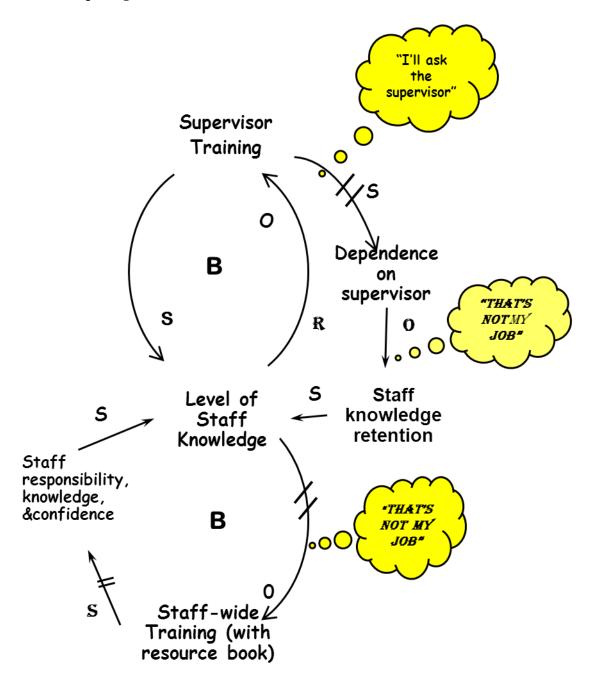
Problem Statement:

"Why, despite the on-going staff HIPAA training, does the staff continue to exhibit lack of competency in HIPAA regulations?"

Behavior Over Time Graph:

Desired level of knowledge]	
		GAP
Current level of knowledge]	
(Has not changed over time)		

Causal Loop Diagram:



10 Essential Public Health Services/National Goals Supported:

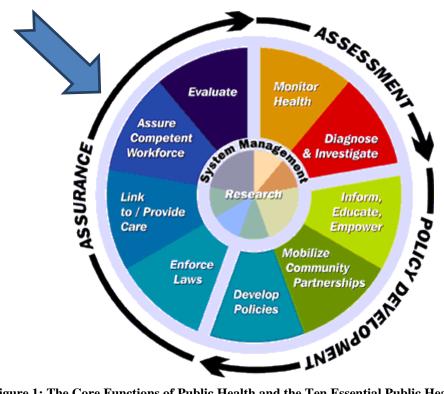


Figure 1: The Core Functions of Public Health and the Ten Essential Public Health Services

The Essential Public Health Services describes the public health activities that should be undertaken in all communities.

The Core Public Health Functions Steering Committee developed the framework for the Essential Services in 1994. This steering committee included representatives from US Public Health Service agencies and other major public health organizations.

The Essential Services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems.⁴ The Essential Service our KPHLI project addresses is:

#8 Assure competent public and personal health care workforce.

Our project is also supported by the *Healthy People 2010* objectives 14.1 Public Health Competencies/Public Health Infrastructure with the implementation strategy to determine the current status of "competency" of the Kentucky Public Health workforce, assess the current level of proficiency and to develop a method of assessing whether the standards are being met.⁵

PROJECT OBJECTIVES/DESCRIPTION/DELIVERABLES:

Our original objective was to update the current TRAIN module or to create a new module. This was not attainable at this time but we hope to revisit this goal at a later date.

The objectives were to:

- Assess current level of knowledge pertaining to HIPAA procedures in regard to the correct way to release/request patient PHI
- Assess why we have a gap between current level and desired level of knowledge despite the yearly HIPAA trainings

The deliverables will be to:

- Assist the HIPAA Compliance Officer in delivering a mandatory annual training session
- Create an educational/informational book as a resource for all staff
- Develop a measurement tool to determine our success

METHODOLOGY:

We were fortunate that our group members were located within 20 miles of each other so meeting in person was fairly easy and seemed to prove to be the best and most productive method for us. We met several times within the first few months, trying to narrow our focus. We changed our name, changed our focusing question, and redefined our goals in the process. The group held two on-line meetings and carried on regular communication via email. We developed a pre-test to determine the current level of knowledge. The results were not surprising. Many of the staff did not know some of the important aspects of releasing PHI. After each meeting, we divided up tasks and updated each member regularly. We searched websites, reviewed our current HIPAA policy manuals, and reviewed the current TRAIN module. We spoke with some staff at Frankfort and HIPAA compliance officers at other facilities.

RESULTS:

As a result of our KPHLI project, the HIPAA Helpers have developed a HIPAA resource book that can be referred to when a staff member receives a request to release PHI. The resource book has specific information on the steps that need to be taken when releasing and/or requesting PHI. In addition, our team members will work with the HIPAA Compliance Officer in our local health departments in providing information to be used at our mandatory annual HIPAA training sessions.

CONCLUSIONS:

It is a federal mandate that the local health departments, as well as all covered entities, must protect the patient's protected health information. The HIPAA Helpers hope that the work done on our KPHLI Change Master Project will educate and inform our staffs on the lawful ways to release and procure PHI. We hope this effort will assure their competence and relieve their anxieties, thus keeping us in compliance with the federal laws and rules of the HIPAA of 1996.

LEADERSHIP DEVELOPMENT OPPORTUNITIES:

Vickie Trevino

My year in KPHLI has been both challenging and rewarding. The 360 Degree Public Health Leadership Profile, BarOn EQI Emotional Intelligence Assessment and the Emergenetics Profile has helped me determine what type of leader I am and has helped me understand myself better both professionally and personally. I was enlightened when seeing how others viewed my leadership styles and skills. KPHLI has engaged me in experiences and exposed me to material that I would have normally not sought after. In the beginning I wasn't sure that I would ever be able to accomplish all that would be expected of me. As our Project started taking shape, I became more excited about being able to produce an end product that would help our staff in our local health departments. With the help and support of the KPHLI Leadership Team and my Change Master Project teammates, our Project has finally come-together. I feel I am a better, more knowledgeable leader because of this experience and feel it will continue to assist me in the future.

Marilyn Loy

As a scholar in the KPHLI program I was very reserved about what the year would bring. As I took on each project my confidence grew and I became more aware of how the overall experience has helped me in my position. The feedback from the 360 Degree Leadership Profile was very helpful; knowing how other people rated me was very interesting to me. It made me examine myself in a lot of areas. The Emergenetics profile was my favorite. It made me feel that it's ok to be social and structural. These are good qualities and everyone is different. I think the KPHLI program would be great for all my staff. It really helped to change my attitude and my outlook on public health.

Robyn Dickerson

KPHLI has been interesting and challenging. This experience has opened my eyes to various areas of public health which now I know is endless. The 360 Degree Public Health Leadership Profile, BarOn EQI Emotional Intelligence Assessment and the Emergenetics Profile was an eye opener—in both a good and bad light. It revealed areas

in which I need improvement—areas I believed I had excelled. However because of the results, I am open to re-evaluating my leadership style in hopes of becoming a better/more effective leader.

KPHLI has brought me from my comfort zone of being a loner by placing me with a team of powerful women to work on a Change Masters Project (required for graduation). In doing this, I have learned how to work as a team, but most of all, I have realized that great minds can accomplish great work as we strive to develop a document of importance to both our departments and in the near future, help those throughout the state of Kentucky.

I believe I have grown a lot because of what I've learned about myself at KPHLI, the various topics discussed, and the views of others that form public health. This experience has been great and I definitely will recommend this for others in this organization.

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