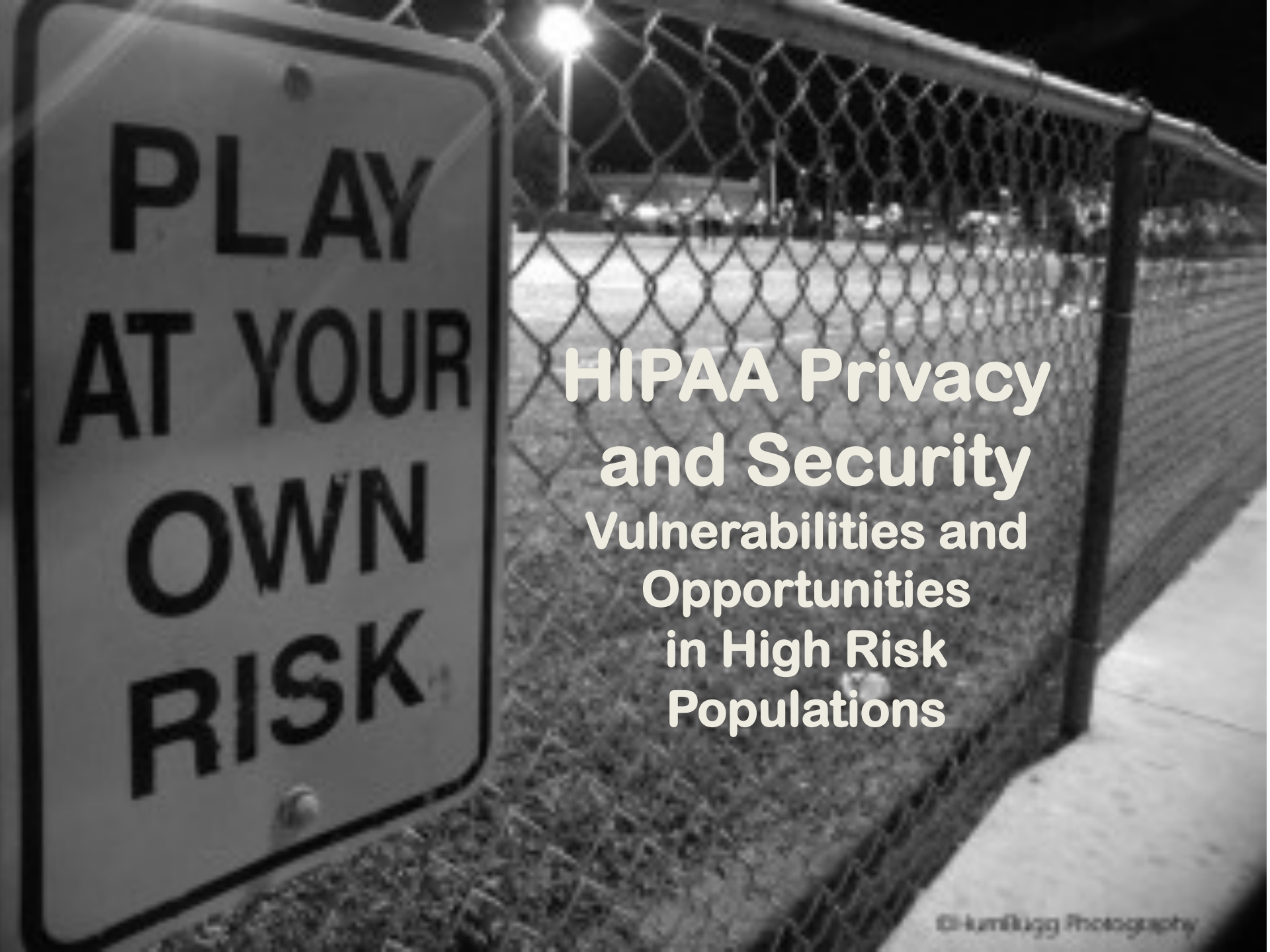


HIPAA Privacy and Security

Vulnerabilities and Opportunities in High Risk Populations

Learning Objectives

- Recognize the distinct HITECH HIPAA privacy and security vulnerabilities in high-risk health care settings.
- Explain the process and procedures to avoid costly data breaches in a health system affiliated with small-medium size practices and safety net medical and behavioral health practices.
- Identify strategies, partnerships and resources to develop best practices in HIPAA HITECH privacy and security compliance.
- List risk management and training solutions that have been successful for small-to-medium size and safety net providers who serve the high risk populations.

The “Risk Gap” is growing faster than the healthcare industry is prepared to adapt to it

Health Care Security and Privacy Investments are Lagging Behind

Myths about HIPAA & Meaningful Use Security Risk Analysis Requirement

- It is optional for small providers and practices
- Installing a certified EHR fulfills the MU security requirement
- My EHR vendor handled everything so I'm fine
- A checklist will suffice
- Once I complete a risk analysis I'm done
- I only need to do a risk analysis once

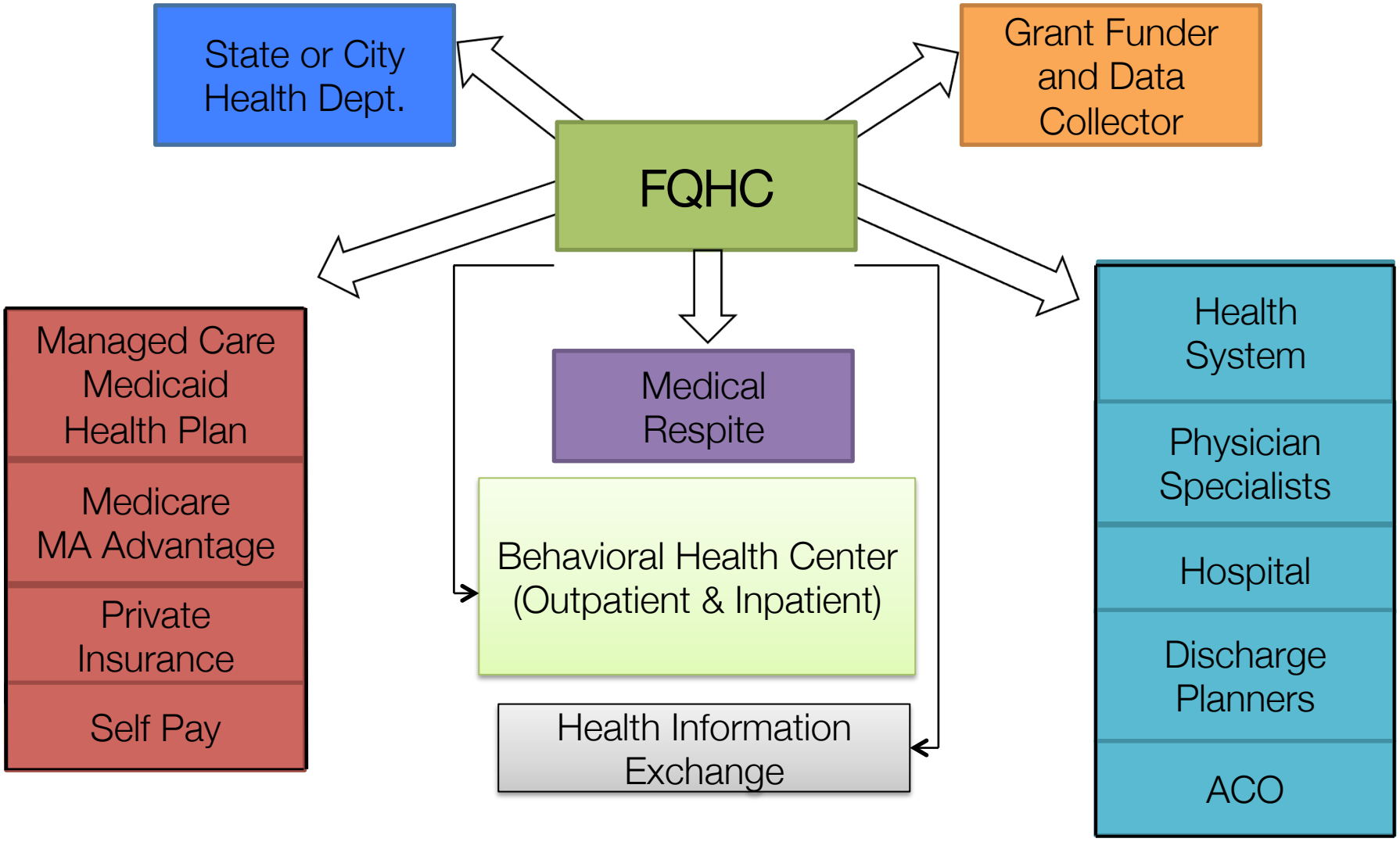

Exposed records
Data breach
digital
classification
Search
DATA
PRIVACY
Protection
law
anonimous
Metadata
Regulations
Patient Privacy
Privacy
Sensitive Information
Authentication
Risk
compliance
Understanding
Risk


Missed $ from bonus payments and patient volume
Increased Fines from Breaches and Audits
Fraud and Identity Theft Consequences
Reputation Damage and Consumer Mistrust

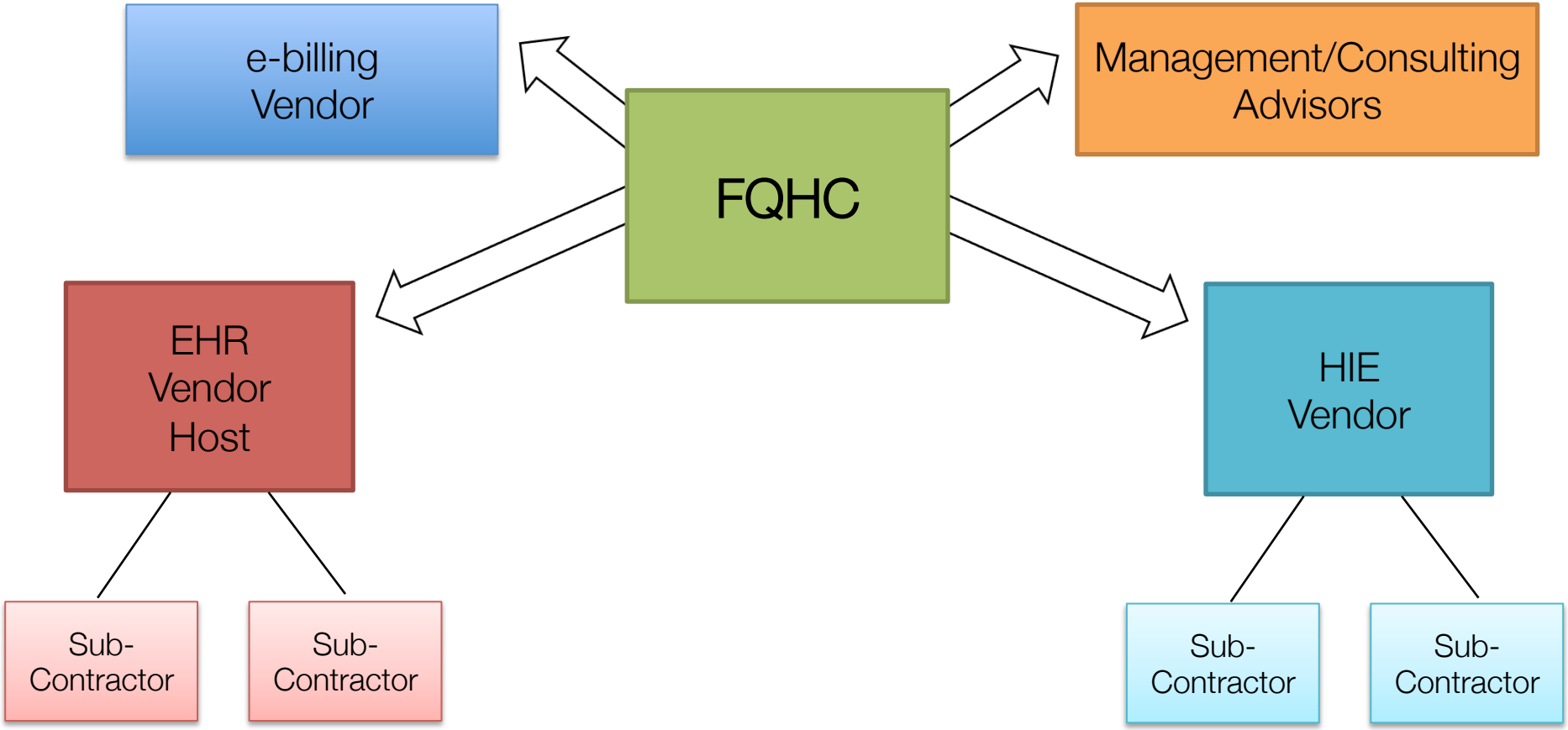
Case Study

- Large, multi-location FQHC
- Minors and adults treated for STD
- Typical environment for those most in need
- Funding from state-sanctioned grant-funder in return for data
- BAA in place
- Computers stolen from grant-funder but never determined if patient data accessed
- no encryption
- no risk analysis or contingency plan for notification

Potential Vulnerabilities



Don’t Leave Out…Business Associates and Subcontractors



Obligation vs. Reality

Obligation	*Reality*
Notification to Patients	Minors, parents not aware of STD treatment
Notification to Public	Concern about negative publicity
Obligations under BAA	Refusal of BA to take action
Cooperate with Police Investigation of theft	Computers never found, not sure if accessed
Notification to OCR	Delayed due to police investigation of theft

HIPAA Guidance Can Be Overwhelming

Integrity

Mobile Media

Availability

Access Control

Business Associates

Risk Assessment

Contingency Planning

Authentication

Encryption

HIPAA Privacy

Patient Access

Confidentiality

Disaster Recovery

Risk Management

Fines

Breach Notification

Audits

Privacy and Security Risk Assessment

10 questions to begin assessing your organization's needs

Patient Engagement in the Office: HIPAA HITECH EXPRESS

QiP Security and Privacy Solutions for the Healthcare Industry

	Before Arrival	Check In	Waiting	Clinical Encounter	Encounter Closing	After Patient Leaves Office	Outside Patient Specific Encounter
Care Activity	Registration: Patient calls for triage/appt	Review/verify/ update patient information	Gather patient data, provide educational information,patient completes screening forms, updates health information	History and Physical, Documentation, Assessment/Diagnosis, Care Plan, CPOE, Procedures, Patient Education	Additional education and checkout. After Visit Summary provided (MU measure)	Referrals, diagnostic orders, labs, encounter charges/claims submission: insurers, data warehouses,	Chronic care management registries, group visits, home visits
Which health care personnel processes the information	Call Center /inhouse or contracted BA), front desk staff, via patient portal	Front Desk	Patient/family member	Care team: Medical Assistant, RN, Clinician	Medical Assistant or at Check out desk	Medical Assistant, Referral Manager, Billing dept.	RN Care Manager, CHW, Patient navigator (insurance enrollment counselor), Social Worker
What sensitive health information is being processed	Demographics, insurance #, SS #, encounter type/reason	Patient health record. Include all recent hospital or ER information	PHI	PHI, e-RX	PHI (meds, problems, allergies, pharmacy info, education)	PHI, Claims data	Demographics, insurance, SS#, income tax returns
Where does this information exchange take place	Patient Management System , EHR or Portal	HIE, EHR	Paper/clip board, kiosk, tablet	EHR, pharmacy	EHR /PM system	EHR, HIE, billing software, insurance portals,	PM/EHR, Registries, data warehouse
How?	Admin staff enters data, patient enters data via portal	Access data via PM/EHR, HIE, portal	Patient	Desktop, laptop	EMR	Desktop, laptop, workstation, printer/fax/copier	Desktop, laptop, tablets, mobile devices
What's the Risk?	Access to Patient Info not controlled, Patient portal not secure	EHR access not secure, HIE data incomplete or corrupted, info is for another patient	Paper or clip board left unattended or misplaced, Kiosk not secure or general sign on used	Access to desktop, laptop not secure (passwords, role mgmt), No auto sign-out for EHR	Required info not provided, Unauthorized perscriptions entered, Required MU processes not performed	Data not encrypted when transferred, No BAA in place to ensure privacy adherence	Access to PHI data not controlled nor is data encrypted, mobile devices are not secure (encrypted, tracked)
HIPPA HITECH EXPRESS mitigates risk	Security and privacy repository that contains all the policies, procedures, templates, notices required Guided process that assists you: Complete your PHI Inventory and Risk Assessment; Identify and prioritize critical gaps requiring remediation; Develop a remediation workplan and track progress; Complete required policy and procedures and plans.						

Strategies and Solutions

What do you need?

- ✓Security awareness training to ensure educated staff
- ✓Simplified, concise Rapid Risk Assessment, Gap Prioritization and Remediation plan
- ✓Straight forward workflow to manage the process effectively
- ✓Security privacy document library: comprehensive policy, procedures, and templates
- ✓On Going Risk Management and Breach Protection
- ✓On-demand Virtual Privacy Security e-Assistant

Where can You get help?

Large Academic Medical Centers and Hospitals can assist smaller health centers by creating a “consortium” to build outreach for better patient care and care coordination

Partnering on Grant Opportunities:

- Health Care Innovation Grant (CMS)
- Patient Centered Outcome Initiative (PCORI)
- Grants to Expand Care Coordination through the Use of Technology-Assisted care in Targeted Areas of Need (TCE-TAC)

Seek out Foundation Opportunities

- Gladys Brooks Foundation
- The Hearst Foundation/Wiliam Randolph Hearst Foundations
- The Kresge Foundation
- The Robert Wood Johnson Foundation Vulnerable Populations Health Grant
- W.K. Kellog Foundation Grants
- The Arthur Vining Davis Foundation

Questions?

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