



UAMS

HIPAA HYPE

**“Confidentiality is everyone’s job,
not everyone’s business”**



July 2004

The UAMS HIPAA Office will have an educational booth outside the elevators on the ground floor of the main hospital on July 30th from 1:00-2:30 PM. We will have candy and several prize drawings for gift certificates to Boulevard Bread Company, and a t-shirt with mouse pad!!!

Safeguarding PHI

As a UAMS employee, it is your responsibility to help ensure the privacy of our patient’s **Protected Health Information**, also known as PHI. Here are some reminders of how we can protect our patient’s PHI. (Safeguarding Protected Health Information Policy, 3.1.38)

- Do not leave PHI on unattended desks, computer terminals, fax machines, or copiers.
- IV bags and other medically related material that isn’t suitable for shredding should have all patient identifiers removed or obliterated when discarding in regular trash.
- After business hours or when not in use, PHI should be kept in a secure location.
- Dispose of PHI properly by shredding or placing in locked privacy bins.
- Avoid discussing PHI in public areas, such as cafeteria lines, the Gourmet Bean or sandwich shop lines, or in elevators.
- Use lowered voices when discussing PHI in hallways, at nurses’ stations, and outside patient rooms.
- Only access PHI on a “need to know” basis. If you don’t need to know it for your job, you don’t need to access it!
- Do not share your personal passwords or post them where others may have access.
- Leave office doors closed and/or locked if you must be away from your desk.
- Avoid dictating in public areas, such as hallways or elevators.

Verifying Identity and Authority Over the Telephone

Prior to disclosing any Protected Health Information (PHI) you should verify the identity and authority of all individuals requesting the information. (Verification of Identity Policy, 3.1.37)

Examples for Verifying Identity and Authority when it is not known to you:

- If the requestor is a patient, only the identity of the patient needs to be verified, such as asking for a combination of full name and date of birth, and last four digits of their Social Security Number or other demographic information checked against documentation in our system.
- If the requestor is a family member, ask for their name, relationship to the patient and specific identifying information regarding the patient. To verify authority to obtain PHI, check for documentation in the patient's record. If no such documentation exists, you may ask for the patient to call back to provide verbal permission.
- If the requestor is a UAMS Employee, ask to see their UAMS ID Badge or obtain their name, phone number and department and determine the purpose of the request for information. If the purpose is for treatment, payment or healthcare operations (TPO), provide the minimum necessary information to satisfy the reason or intended use of the information. If the information requested is not for TPO purposes, advise the caller that the information is protected under HIPAA and you will not release the information without patient consent.
- If the requestor is a non-UAMS provider, ask for their name, phone # and organization's name plus specific identifying information regarding the patient and the purpose for the request, such as for treatment or payment. When in doubt call the number back or ask them to fax a written request on company letterhead.

When we all make protecting the health information of our patients a priority; we are more likely to be in compliance with HIPAA and have integrity in the public eye. All known or suspected violations of the privacy regulations must be reported.

Quiz

1. True or False
Since I work here, I have the right to access anybody's Protected Health Information or PHI, even if it doesn't pertain to my job duties.
2. True or False
Before releasing PHI, I need to always verify the identity of the requestor.
3. All of the following statements are good examples of safeguarding PHI, **except**
 - A. Dispose of PHI in the appropriate manner, such as using a shredder or privacy bin.
 - B. Do not discuss patient's PHI in public areas, such as the cafeteria or elevator.
 - C. IV bags with patient labels can be thrown away in the regular trash can; it doesn't really make a difference.
 - D. Leave office doors closed when away from your desk.

Name _____ Dept. _____

Phone Number _____

Send to HIPAA Office, #829, to register for prize drawing!

Do you have suggestions or questions you'd like to ask? E-mail us!

HIPAA@UAMS.EDU

