

Family Medicine Residents HIPAA Highlights

May 2016 Heather Schmiegelow, JD



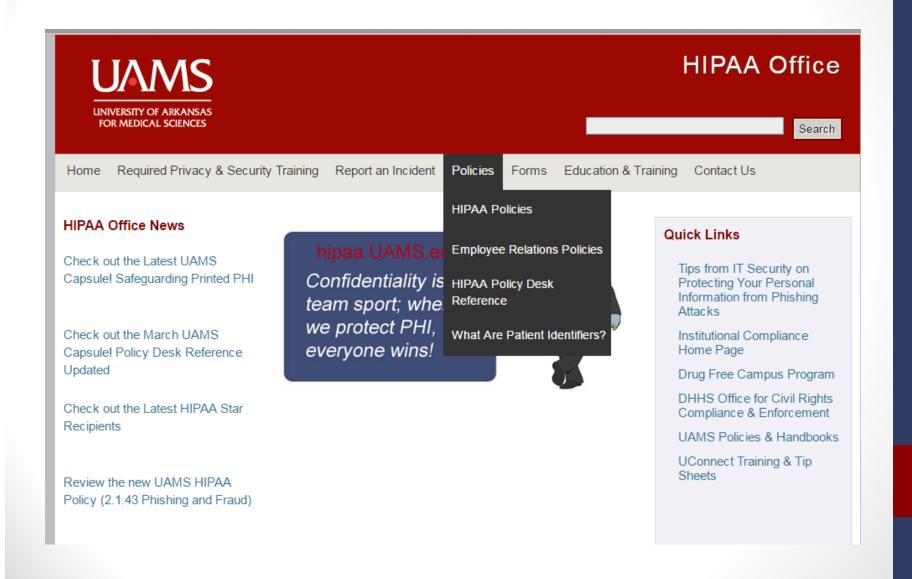
The UAMS HIPAA Office

- Heather Schmiegelow, UAMS HIPAA Privacy Officer
- Stephen Cochran, UAMS Security Officer
- Sara Thompson, HIPAA Compliance Manager
- William Dobbins, HIPAA Informatics Manager & Auditor
- Brittany Parker, Office Manager/Education Coordinator
- Anita Westbrook, Medical Center Privacy Officer
- Jennifer Holland, Research Privacy Officer

http://hipaa.uams.edu 501-603-1379



HIPAA Policies at UAMS



What You Already Know

- HIPAA does not interfere with treatment of patients.
- HIPAA does not interfere with education.
- Never access patient records unless it is part of your job to do so.
- Do not speak about patients in public areas, lower your voice, be aware of who is around you.
- When printing documents containing PHI to shared printers, make sure each page pertains to the correct patient
- Be careful when handling paper documents containing patient information (for example, patient rounding lists). Do not carry them off campus in your lab coat or leave them laying around a resident workroom. Lock them up or shred them! Never leave patient information in a vehicle unattended.
- Log off or lock your computer when you are not using it

Some Things to Be Extra Careful About

- Emails containing PHI must be secure and encrypted
- Emails containing PHI sent from a UAMS email address to another UAMS email address are automatically secure and encrypted
- Emails sent outside of UAMS are <u>not</u> automatically secure and encrypted
- To encrypt an email sent outside of UAMS, click on the "mark secure" button provided on the standard toolbar in Outlook or typing the word [secure] in brackets in the subject line will also encrypt the email
- Make sure you are sending the email to the intended recipient
- Include only the minimum necessary PHI in the email to accomplish the intended purpose

Some Things to Be Extra Careful About

- Text messages containing PHI must be secure and encrypted
- Cortext is the app approved by UAMS for secure text messaging
- Contact the UAMS Technical Support Center to get Cortext on your smart phone:

Phone: 501-686-8555

E-mail: TechSupportCenter@uams.edu

Web site: https://uams.service-now.com/ess/

Phishing Attacks



- Phishing attacks are attempts by criminal hackers to obtain UAMS information and use it for criminal purposes, such as filing a fraudulent IRS tax return, submitting false claims for reimbursement to commercial and government payers, and obtaining the payroll funds of a UAMS employee, faculty or staff member
- Be suspicious of emails or other electronic communications from senders you do not know or from senders who do not normally send you such communications
- Do not open an attachment in an email that looks suspicious
- Guard carefully your sensitive information (user ID, password, bank account number, SSN); do not provide it when such information is requested via email

Phishing Attacks



Examples of phishing attacks:

- Click here to receive your 5% raise
- Log in here to increase your email storage capacity
- Click here to obtain your \$1,000.00 refund

If you suspect you have received an email that is a phishing attack:

- Report suspected phishing attacks to UAMS IT Technical Support Center at (501-686-8555) or through the IT selfservice portal at http://itss.uams.edu; and
- Forward the suspect email to ITSecurityTechnical@uams.edu

Some Things to Be Extra Careful About When Using Electronic Devices

- Patient information may never be stored on unencrypted devices. Thumb drives, smartphones, iPads, etc. must be encrypted if they contain PHI – to purchase encrypted mobile devices, submit requests to UAMS IT Technical Support Center at (501-686-8555) or through the IT self-service portal at http://itss.uams.edu
- Cloud storage such as Dropbox, Google Docs, iCloud or any other similar services not authorized by UAMS must never be used for storage or transmission of ePHI.
 - Photography of patients in governed by policy never take a photograph containing a patient, or a part of a patient, or a patient's name on a piece of paper or computer screen, without consulting the Patient Photography Policy.
 - Posting PHI on social media sites like Facebook do not do it.

Posts about PHI on Social Media Sites Violate HIPAA!

Electronic Public Displays of patient information without a written patient authorization are prohibited. This includes the posting of photographs, video or any information about a UAMS patient through electronic means including, but not limited to, social networking sites; such as Facebook, Twitter, Instagram, blogs, and similar services. The only exception is a posting in response to a UAMS patient that gives no further information about the patient.

Posts about PHI on Social Media Sites Violate HIPAA!

Mary, using her personal iPhone, took digital photos of a patient who had been attacked by a shark. She posts the photos to her Facebook page and includes the following: "You won't believe the shark bite this surfer survived today!" Later that same day, in response to a "Friend's" question, Mary responded: "We were able to save both of his legs." Meanwhile, one of Mary's Friends, "John," responded to Mary's original post with the comment "Yes, that surfer got a lucky break!"

It's important for you to know:

- Mary's profile states that she is a Resident in the Department of Emergency Medicine of Large Hospital System in Anytown, USA; and
- Among her "Friends" is "John," a Resident in the Department of Surgery at the same hospital.

Was this a HIPAA violation? YES!!!!

Some Things to Be Extra Careful About When Talking About Patients

- HIPAA allows you to discuss patient information with "friends and family involved in the patient's care"
 - If the patient is present or available, obtain their permission first
 - In the patient is not present or available, share only if in the best interest of the patient
 - Use professional judgment to determine if sharing information is appropriate and share only the minimum necessary
 - Be very careful when discussing sensitive information such as HIV status with or in front of family members or friends
- Be careful when discussing patients with each other
 - Do you know your HIPAA identifiers?
 - Do you know who is standing behind you at Doc Java?

Breaches

- UAMS must notify patients in writing of breaches of their PHI
- UAMS must report breaches to the Office for Civil Rights of the U.S. Department of Health and Human Services
- In some cases breaches must be reported to the media
- Examples of potential breaches:
 - o an unencrypted laptop containing PHI is lost or stolen
 - o an unencrypted thumb drive containing PHI is lost or stolen
 - o a rounding list is left in a patient's room
 - an After Visit Summary is given to the wrong patient
 - o an email containing PHI is sent to the wrong recipient

Examples of HIPAA Violations Resulting in Monetary Fines

- Feinstein Institute for Medical Research in New York fined \$3.9 million related to a laptop computer containing the electronic protected health information (ePHI) of approximately 13,000 patients and research participants stolen from an employee's car.
- Cornell Prescription Pharmacy in Denver, Colorado fined \$125,000 regarding the disposal of unsecured documents containing the PHI of 1,610 patients in an unlocked, open container on Cornell's premises.

Call Us or Visit Us Online!

UAMS HIPAA Office

• Phone: 501-603-1379

Online at http://hipaa.uams.edu

