

Introduction

The University of Kentucky HealthCare complies with the Health Insurance Portability and Accountability Act (HIPAA) because we are a provider of services and are considered a covered entity. Education of HIPAA is a federal requirement and elicits trust from our patients. Please read the overview of HIPAA below and retain this document for reference during observation and learning experiences.

HIPAA Basics

HIPAA and state law mandates

- Privacy and security of Protected Health Information (PHI)
- Portability of health insurance
- Simplification of electronic billing

Purpose of HIPAA

- Protects the privacy of an individual's health information
- Ensures physical and technical security of an individual's health information
- Governs the use and disclosure of an individual's health information for treatment, health care billing, research, marketing and other functions

Patient Benefits of HIPAA

- Patients receive communication on how patient data will be utilized
- Patients have availability to their patient data
- Patients are informed when patient data is disclosed to outside parties

Protected Health Information (PHI)

- Defined as facts about an individual's past, present or future physical or mental health condition
- HIPAA protects all information that can identify a patient in combination with their health information

HIPAA Privacy Rule Protects

- Individual's health information in all forms to include:
 - Written information in all formats
 - Information spoken and heard
 - Information seen
- Individual's health information past, present, and future
- Individual's living and deceased

HIPAA Security Rule

- Maintains confidentiality, integrity, availability and privacy of employee, patient, physician, research subjects and University information
- Applies to all electronic information that is created, communicated, stored or processed

HIPAA and Your Experience

Tips and Best Practices

- Securely store all information (paper and electronic) and never share passwords
- Sign out of all applications and log off of your workstation when done
- Dispose confidential or protected health information properly by shredding or placing in secured bins
- Follow guidelines when transmitting information by email, fax, phone, or by other means
- Never discuss a patient's medical information in public, even if you think you are alone

Always Remember

- You are entering an environment that services large volumes of individuals and you are likely to encounter confidential information during your experience
- You will have some interesting and exciting experiences; you may see well-known individuals; and you may want to share these events with your family and friends, or on social media. But, it is imperative to only speak about your experiences with individuals who have a business related need to know
- Communicate with general references whenever possible
 - Example of specific reference: "Jane Doe was referred to a cardiologist."
 - Example of general reference: "The patient was referred to a cardiologist."
- UK Healthcare wants to educate and support our learners; so, ask for help when in doubt
- ***All information regarding an individual's health care is confidential and should be protected***

Penalties for Violations

- Disciplinary action by UK Healthcare up to and including dismissal from your observation and/or learning experiences
- Federal and civil penalties also exist for violations and individuals could be subject to charges

Always Report Violations (3 options)

- Report to your sponsor or preceptor who will investigate the situation
- Contact the office of Corporate Compliance at 859-323-8002 or richard.chapman@uky.edu
- Report anonymously to the ComplyLine at (877) 898-6072
 - Please be as detailed as possible because the Comply Line is completely anonymous and only knows the information reported

HIPAA Quiz

Complete the following questions with 100% accuracy.

1. All information regarding an individual's health care is confidential and should be protected.
 True
 False
2. HIPAA Privacy Rule protects individuals that are deceased.
 True
 False
3. I should ask for help from my sponsor, preceptor, or a UK HealthCare employee if I ever have questions about confidentiality.
 True
 False

HIPAA Acknowledgement

I certify that I have read the *HIPAA Education & Consent* document and will comply with HIPAA during observation and learning experiences. I understand that failure to comply may result in disciplinary actions.

Printed Name of Learner

Signature of Learner

Date

If you are under the age of 18, your parent or legal guardian's signature is also required below.

I certify that I am this individual's parent or legal guardian. Furthermore, I acknowledge the information outlined in the *HIPAA Education & Consent* document and understand I am liable for the minor's compliance with HIPAA.

Printed Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date