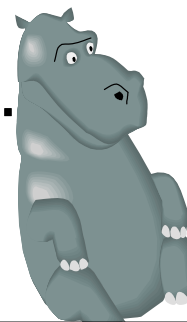


***Texas Tech University
Health Sciences Center***

HIPAA TRAINING

Let's talk about HIPAA
or is it HIPPA or is it
HIPPO?

And the H word is.....



HIPAA

Health Insurance Portability and Accountability Act of 1996

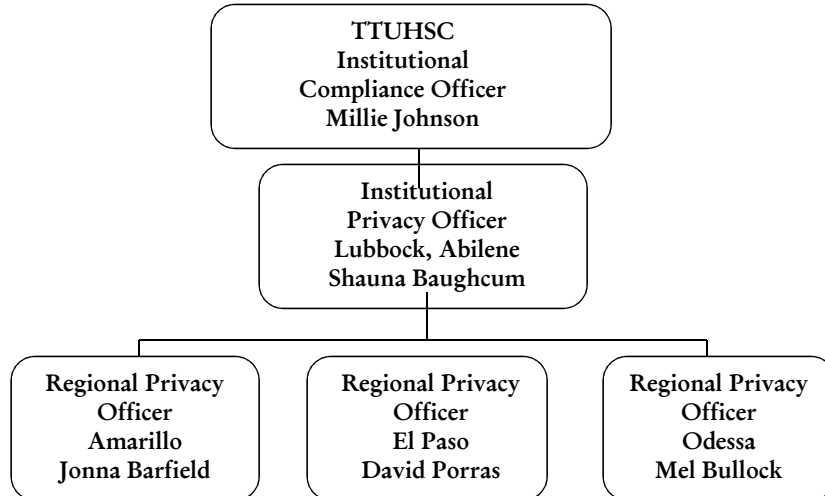
- What is it and who does it effect?
 - Federal regulation protecting and securing patient's health information.
 - Any member of the workforce at TTUHSC.
 - Faculty, staff, students, volunteers, contract employees, etc
- This is a general training.
- Depending on job function additional training may be required.



- Most of HIPAA is common sense. Just follow the simple question of:
"Do I need to know this information to do my job?"



TTUHSC Privacy Structure



How does TTUHSC comply with HIPAA?

- Privacy Notice is posted in all clinical areas.
 - Handout is given to all new patients.
- Patient Authorizations are obtained when needed.
- Research Activity are monitored for patient privacy.



What is PHI?

- Protected Health Information has 18 identifiers-
 - Name, Postal address information, other than town or city, state, zip code; telephone number; fax number; email address; social security numbers, medical record numbers; health plan beneficiary numbers; Account numbers; certificate/license numbers; VIN and serial numbers including license plate number; device identifiers and serial numbers; web universal resource locations (URLS); internet protocol address numbers; biometric identifiers, including finger and voice prints; full-face photographic images and any comparable images; All elements of dates, date of death; all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older; any other unique identifying number.



Guidelines for Release of PHI

- By Mail
 - All PHI must be in a sealed envelope.
- By Fax
 - PHI should NOT be faxed unless determined medically necessary by a medical provider to fax the information to prevent a delay in treatment.



Guidelines for Release of Information of PHI

- By Telephone
 - Limited information may be given.
- By Email
 - Allowed with internal usage only. Must be to another ttuhsc.edu address
 - External refer to TTUHSC Operating Policy 52.05



Even trash is PHI

- PHI stored on paper should never be thrown in the trash can.
- All paper information with PHI should be shredded.
- All electronic information with PHI should be permanently erased.



Protecting PHI

- May sure you are not storing PHI on unsecured:
 - Flash Drives
 - Lap Tops
 - Desk Tops
 - Cell phones/cameras



Privacy Breaches

- Notify the Privacy Officer on your campus
- The reason for the breach should be identified.
- Please give as much detail as possible.



Non-Retaliation Policy

- TTUHSC shall not retaliate against anyone who reports in good faith a privacy violations or who files a complaint with the Secretary of Health and Human Services.
- See HSC OP 52.04, Non-Retaliation Policy



Sanctions

- Any TTUHSC workforce member who fails to comply with TTUHSC's privacy policies and procedures may be subjected to sanctions, including, but not limited to, oral warning, written reprimand, suspension with or without pay, and termination in accordance with TTUHSC policies on discipline.



Penalties

- Civil
 - \$100 per violation maximum \$25,000 per year per person for all violations of identifiable requirements.
- Criminal
 - For knowing violation \$50,000 fine, 1 year imprisonment, or both.
 - If committed under false pretenses, \$100,000 fine, 5 years imprisonment, or both.
 - If committed with intent to sell, transfer or use for commercial advantage, gain or malicious harm, \$250,000 fine, 10 years imprisonment, or both.



HIPAA Website

- TTUHSC Operation Policy 52.02
- TTUHSC Privacy Manual
- Forms
- Contact Information
- Frequently Asked Questions
- Other related links to HIPAA

WWW.TTUHSC.EDU/HIPAA

ETHICSPPOINT.COM



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Final Thought

Curiosity Killed the Cat-
DON'T BE THE CAT!!!

