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What is HIPAA?

We try our best to give residents the highest quality healthcare. As part of the promise to care for them, we keep information about their health private. Until now, this promise was simply part of health care's code of ethics. But under a new national law that goes into effect in April 2003, it will be illegal to violate this code.

This new law, the Health Insurance Portability and Accountability Act of 1996, or “HIPAA” for short, includes punishments for anyone caught violating resident privacy.

Those who do so for financial gain can be fined as much as $250,000 or go to jail for as many as 10 years! Even accidentally breaking the rules can result in penalties—and embarrassment—for you and our organization.
What is confidential?

All information about residents is considered private or “confidential,” whether written on paper, faxed, saved on a computer, or spoken aloud. This includes their name, address, age, Social Security number, and any other personal information.

It also includes the reason the resident is sick or living at a nursing facility, the treatments and medications he or she receives, caregivers’ notes, and information about past health conditions.

If you reveal any of this information to someone who does not need to know it, you have violated a resident’s confidentiality, and you have broken the law!
Do you need to know?

Most of HIPAA is common sense. Just follow the simple “need to know” rule. If you need to see resident information to perform your job—as doctors, nurses, CNAs, and billing clerks do—you are allowed to do so.

But even doctors and nurses don’t have the right to look at all the information about every resident. For example, a doctor caring for one resident has no right to look at the medical record of other residents unless that doctor is helping to care for them too.

Before you look at resident information, ask yourself, “Do I need to know this to do my job?” If the answer is no, don’t look.

If the answer is yes, look at only the information you need, and don’t share it with anyone.
I couldn’t help overhearing

Not all information is locked up in a file room or protected by passwords in a computer.

Remember that this information includes the fact that the resident is at the healthcare facility in the first place. If you see an acquaintance who is visiting a family member who’s a resident at your facility, you might want to tell another friend or family member later—“Hey, guess who I saw today . . . .” But you must keep it to yourself. The person you saw may not want anyone to know that his or her family member is a resident.

There’s no doubt that you will overhear private health information as you do your day-to-day work.

As long as you keep it to yourself, you have nothing to worry about.
Even the trash is private

Trash cans can trap you into violating HIPAA. Resident information stored on paper or computer disk should never be thrown into an open trash can. The reason is simple: No one knows who might end up seeing the trash once it leaves the building.

If you see resident information in an open trash container, tell your supervisor or a supervisor in the area.

He or she can get rid of it properly, either into a locked bin until it can be destroyed or directly into a paper shredder.
Who’s the boss?

Each organization must have a privacy official to make sure no one breaks the privacy rule. This person is responsible for coming up with the organization’s privacy policies and enforcing them.

If you spot someone breaking the rules, report him or her either to your supervisor or directly to the privacy official.

You should feel comfortable going to either of them with questions about how to follow the privacy rules.
When should I start?

HIPAA’s privacy rules don’t start until April 2003. But that doesn’t mean you should wait until then to follow these privacy rules.
Real-life examples

Case #1

You are going into a resident’s room to follow your assignment. You knock on the door and are invited in. You see that a nurse is in the room discussing the resident’s medicine. What should you do?

If you must do the job right away to properly care for the resident, ask whether you can interrupt. If the job can wait, explain that you will return in 15 or 20 minutes.

This protects residents’ privacy by letting them openly talk about their condition without being overheard.

Some residents may say it’s okay for you to stay in the room while they talk. But remember that residents may not feel comfortable sharing everything about their symptoms or medical history while you are in the room. They also might be embarrassed to ask you to leave.

Some nurses might even forget that you shouldn’t be in the room while they are talking about treatment with residents. That’s why it’s your job to come back later.
Case #2

You are working at the admissions desk of your facility when an ambulance comes from the local hospital with your neighbor’s grandmother. You overhear the family talking about hospice care. Should you say something to your friend the next time you see her?

No, the information you received was private. You cannot reveal any information you have about the resident.

When residents are in the nursing facility, they have the right to decide who should know that they are there. Your neighbor’s grandmother has a right to privacy and may not want the grandchildren to know about her medical condition.
Case #3

A friend is worried because his girlfriend is in a local hospital. He asks you to find out anything you can since you are friends with all the discharge planners from the local hospitals. Should you try to find information for your friend?

No. Suggest to your friend that he call or visit the information desk. If the patient has agreed to have her information available, the staff at the information desk can give it to him.

Do not seek out resident or patient information unless you need it to do your job. When you happen to hear resident or patient information, do not repeat it to anyone.
Case #4

You pass by a nurses’ station where residents’ names are listed on a white board. You spot the name of a close friend’s grandmother.

Should you stop by her room?

No. If you learned of your friend’s grandmother’s stay only by looking at the white board, you should not go to her room unless your job takes you there.

If you find out from the resident or her family member that she is staying at the facility, feel free to visit her. But be sure to follow the facility’s visitor policies.
Case #5

You are walking by a trash can and notice a pile of medical records has been laid on top of the trash. What should you do?

Don’t just take the records to a shredder or locked container yourself. Take them to your supervisor.

He or she will tell the facility’s privacy official, and they will try to figure out why the records were not destroyed before they were thrown out.
Final Exam

1. You are working at your facility when your elderly neighbor is being admitted from the local hospital. Her family lives out of state. You see on the records, “unable to reach next of kin.” What should you do?
   a. Contact the neighbor’s family members and tell them.
   b. Say nothing and pretend you don’t recognize your neighbor.
   c. Tell the director of nursing that you know how to reach the person’s family.
   d. none of the above

2. When are you allowed to repeat private health information that you hear on the job?
   a. after you no longer work in the resident
   b. after the resident dies
   c. only if you know the resident won’t mind
   d. only when it’s necessary to do your job

3. Your friend’s grandmother fell while she was a resident at your facility and is having surgery at one of the local hospitals. Your friend wants to send flowers and asks you to find out which hos-
hospital her grandmother was admitted to. What should you do?

a. Tell your friend that you cannot find out for her, but that she can call the different hospitals in the area and ask whether her grandmother is staying there.
b. Search for the grandmother's name in the computer database.
c. Find a list of residents who were discharged and look for the grandmother's name to find out which hospital she was admitted to.
d. Ask all the nurses whether they know where the grandmother went.

4. You are cleaning up at a nurses' station and find an open recycling bin full of paper. You can see names, addresses, and numbers on the paper. What should you do?

a. Nothing. You can't be sure the information has anything to do with residents.
b. Show it to your supervisor in case the information is private resident information.
c. Ask the nurses who work there what information is on the paper.
d. None of the above
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. What question should you ask yourself before looking at resident information?</td>
<td>a. Would the resident mind if I looked at this?</td>
</tr>
<tr>
<td></td>
<td>b. Do I need to know this to do my job?</td>
</tr>
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<td></td>
<td>c. Can anyone see what I’m doing?</td>
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<tr>
<td></td>
<td>d. Am I curious?</td>
</tr>
<tr>
<td>6. Healthcare workers can go to jail for selling resident information.</td>
<td>True or false?</td>
</tr>
<tr>
<td>7. Doctors are permitted to see all information about every resident.</td>
<td>True or false?</td>
</tr>
<tr>
<td>8. Resident information should never be thrown away in an unlocked bin unless it has been shredded or destroyed.</td>
<td>True or false?</td>
</tr>
<tr>
<td>9. The privacy rules explained in this booklet shouldn’t be followed until April 2003.</td>
<td>True or false?</td>
</tr>
<tr>
<td>10. The privacy official enforces HIPAA privacy rules.</td>
<td>True or false?</td>
</tr>
</tbody>
</table>
Answers to the final exam

1. C
2. D
3. A
4. B
5. B
6. True
7. False
8. True
9. False
10. True
The Long-Term Care HIPAA Lifeline: A Practical Guide on How to Comply

This book gives you HIPAA information the easy way—boiled down to the basics and written in plain English, making compliance as simple as possible. This book is one of the few HIPAA products available on the market that is geared specifically for long-term care facilities. A bonus CD/ROM has all of the forms and checklists you’ll find in the book, making it easier to adapt them to your facility’s needs.

This book was written by an attorney and reviewed by a long-term care professional. Reviewer Laurie A. Miller, CCS-P, is the privacy officer, medical records director, and head of HIPAA implementation and training at Columbia Basin Care Facility in The Dalles, OR. Her input helped the author ensure that the material is not only practical, but also easy to understand and implement. Author Kathy J. S. Fritz, RN, is a HIPAA specialist with 15 years of experience as a registered nurse and adult nurse practitioner, including roles as a direct-care provider and department manager.

This book will answer your urgent HIPAA questions, such as:

- How will HIPAA affect the MDS and billing?
- How will resident interactions change under HIPAA?
- How can I establish new HIPAA-compliant contracts?
- How can I write resident waivers to legally address long-term care privacy issues?
The Long-Term Care Compliance Manual
This easy-to-use resource goes beyond theory to bring you the practical, nuts-and-bolts advice on how to build a solid corporate compliance program. The Long-Term Care Compliance Manual will provide you with

- guidance in establishing the seven elements required of every compliance program
- sample forms and proven policies to mitigate the risk of fraud and abuse in your facility
- the tools you need to evaluate the effectiveness of your program

Newsletters

Briefings on Long-Term Care Regulations
This newsletter reports on the ever-evolving world of long-term care and helps readers thrive in an industry undergoing constant change and overburdened by regulations. Each issue of Briefings on Long-Term Care Regulations delivers essential information on topics that are most important to an administrator's professional success, including

- the latest news on PPS
- HIPAA updates
- CMS regulations
- innovations in quality care
- corporate compliance
- staff recruitment and retention

Briefings on HIPAA
Created exclusively for health care professionals who are in charge of information security or sit on information security task forces, this newsletter will help you comply with HIPAA, including

- rewriting contracts with business partners, including attorneys, auditors, and consultants to make sure that they adhere to privacy rules.
• telling patients about how their information is being used and whom it is being disclosed to
• restricting the amount of information used or disclosed to the minimum necessary to achieve the purpose of the use or disclosure
• establish privacy-conscious business practices

**Briefings on Assisted Living**
This monthly publication is the first newsletter dedicated to providing expert news, analysis, and advice about best practices in operations and development of assisted living facilities. Readers are the first to know about new initiatives and policies affecting the assisted living industry in time to comply. From recruiting, training, and retaining staff to keeping your facility at maximum occupancy while satisfying state and federal inspectors, **Briefings on Assisted Living** helps manage on-the-job challenges and offers strategic solutions that improve day-to-day operations and positively affect your bottom line.

**Video**

**Long-Term Care Corporate Compliance: Playing Your Part**
Part of our award-winning Spotlight on Compliance series, **Long-Term Care Corporate Compliance: Playing Your Part** focuses specifically on corporate compliance in long-term care. It focuses on the OIG’s Compliance Program Guidance for Nursing Facilities, which identifies a wide range of risk areas that relate specifically to long-term care. The video combines compelling, true-to-life scenarios that show how different staff members play a part in corporate compliance with expert advice and easy-to-remember guidelines for handling any compliance concern.

**HIPAA Online Learning Courses from**
**www.hcprofessor.com**

**Long-Term Care Privacy for Frontline Staff**
Long-term care clinical, frontline, ancillary, and administrative staff who need only a basic understanding of the HIPAA regu-
tions can get easy, accurate training with the online course Long-Term Care Privacy for Frontline Staff, which covers the fundamentals of the HIPAA regulations, case examples, and a final exam that can help your facility meet HIPAA’s training requirement.

Confidentiality and Privacy for Long-Term Care Managers and Licensed Staff
Long-term care administrators, managers, and licensed clinical care staff who need to understand the HIPAA regulations can get convenient, accurate training with this online course, which covers the most important aspects of the HIPAA regulations, including:

- What is HIPAA and what does it govern?
- What makes information “identifiable” under HIPAA?
- The minimum necessary standard
- Ways to protect resident privacy
- Maintaining records
- Ways to protect electronic data

Long-Term Care HIPAA Package

The Long-Term Care HIPAA Trainer’s Toolkit
This kit makes training staff on the HIPAA privacy and security regulations easy. In this comprehensive, yet easy-to-understand group of resources, you’ll get:

- The Long-Term Care HIPAA Trainer’s Playbook
- 20 copies of HIPAA Training Handbook for Long-Term Care: Privacy for Frontline Staff
- 20 copies of HIPAA Training Handbook for Long-Term Care Managers and Licensed Staff: An Introduction to Confidentiality and Privacy under HIPAA
- Five copies of HIPAA Daily Do’s and Don’ts, a 5” x 7” laminated cheat sheet to remind staff what they’re allowed to do under HIPAA
- Five copies of The HIPAA Rapid-Fire Reminder, a 5” x 7” laminated card that lists the specific sections and page numbers of the HIPAA final privacy rules you’ll use the most