



2021 General HIPAA Awareness Training



Learning Objectives

At the end of the training you will be able to:

- ✓ Understand what HIPAA is and its purpose
- ✓ Understand the use and disclosure of PHI
- ✓ Recognize the difference between HIPAA Privacy and Security
- ✓ Recognize the recent updates to HIPAA
- ✓ Understand why being HIPAA compliant is important

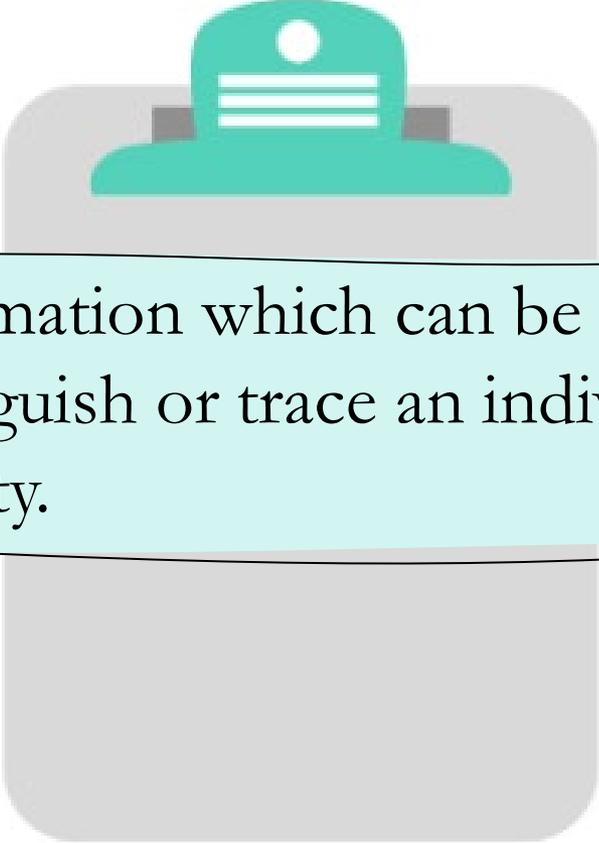


HIPAA

Health Insurance Portability and Accountability Act

- Improve privacy and security of sensitive health information
- Gives individuals inherent rights to sensitive health information

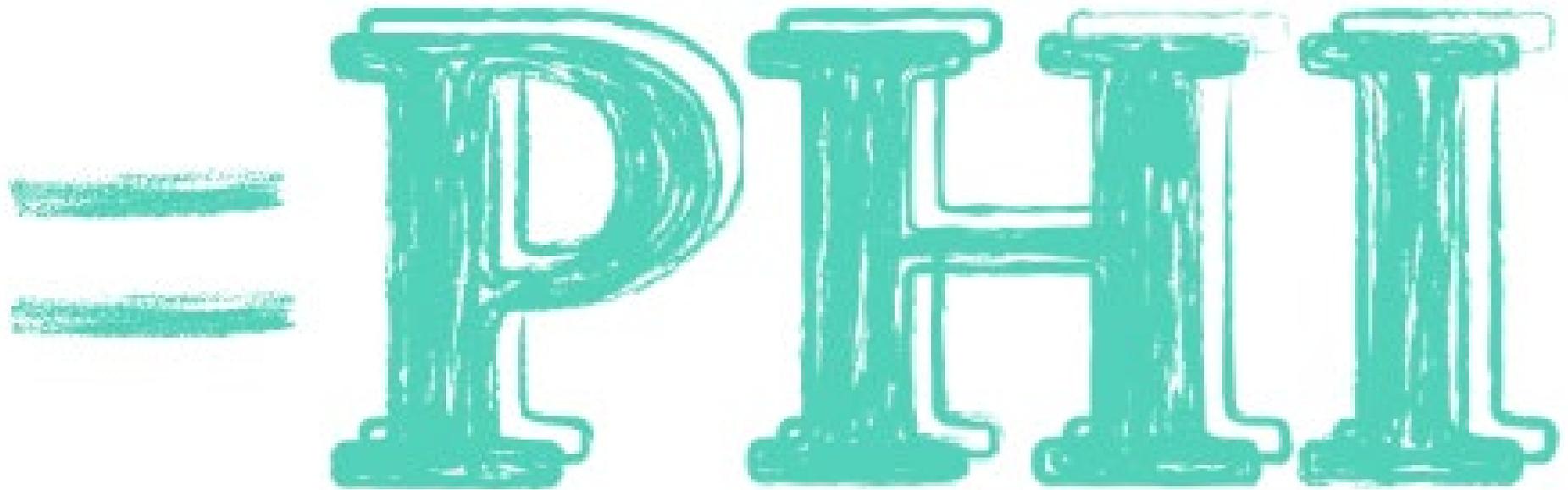
Identifying PII

A large, light gray clipboard icon with a teal clip at the top, serving as a background for the text box.

Information which can be used to distinguish or trace an individual's identity.



Identifying PHI



[Click me to learn the 18 Identifiers that make health information PHI.](#)

Examples of PHI



Member ID Card

Medical Bill

Claim Forms

Explanation of Benefits

E-mail correspondence

Who does it apply to?



Covered Entities

Source of protected health information (PHI) and where it is first generated.

- Healthcare providers
- Health Plans
- Healthcare clearinghouses

Business Associates

Performs certain functions that involve the use or disclosure of PHI on behalf of, or provides services to, a covered entity.

- Pharmacy Benefit Manager
- Lawyers
- Any vendors

Knowledge Check



PHI stands for personal health information.

True

False



HIPAA Privacy Rule





Use and Disclosure

- For treatment, payment and operations
- Based on verbal authorization
- To comply with a legal agreement
- To benefit the public

**To learn more, refer to CPL 024.00
HIPAA PHI Uses and Disclosures



Minimum Necessary Rule

Whenever patients' PHI is used or disclosed, only the information necessary to accomplish the intended purpose should be disclosed.

Example: CMS requires that for billing information employee access to all applications and responses that include the billing PHI, even those employees that members such as we provide them with the billing information, but also include diagnostic information and each member's whole medical history.

Notice of Privacy



The Notice of Privacy must inform members of the uses and disclosures of PHI that Clever Care may make and defines the member's rights to access or amend their PHI.

**To learn more, refer to CPL 021.00
HIPAA Notice of Privacy Breach Practices



Member Rights and Authorization



Members have a right to:

- View and receive a copy
- Request amendments or changes
- Request restrictions
- Request an accounting of unauthorized disclosures

**To learn more, refer to CPL 027.00 HIPAA Right to Request Restriction of PHI & CPL 028.00 HIPAA Right to Access PHI



Your Role



1. Maintain the confidentiality of member PHI as required by HIPAA.
2. Only disclose the minimum necessary information to accomplish the intended purpose.
3. Remember that members have their rights to their PHI

Knowledge Check

A man calls Clever Care claiming to be the son of a member and is wanting to obtain PHI. Under which of the following circumstances would it be okay for you to disclose the member's PHI to the man over the phone?

A. It's okay to disclose PHI to anyone

B. If the member verifies himself and gives verbal authorization for you to disclose his PHI to his son.

C. You never disclose PHI over the phone!

D. If the son tells you the member has memory problems.



HIPAA Security Rule





Administrative

- Strategy for identifying security risks
- Security Personnel
- Workforce Training and Management
- Contingency Planning



Physical

Facility access and control



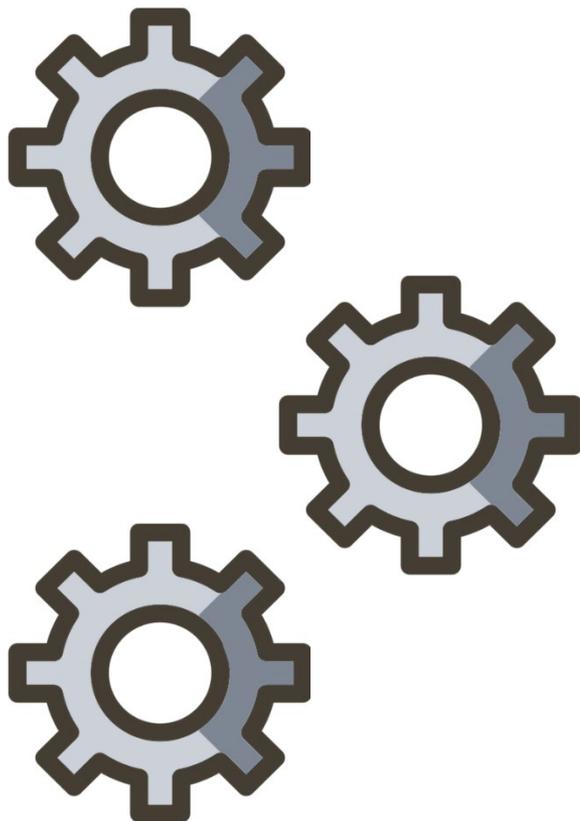
- Scan your badge upon entry. Don't allow anyone to follow you or "piggy back."
- Guests must always be accompanied by employee.
- Ensure drawers and storage with PHI are locked. Properly dispose of PHI in secure containers or shredding bins.

Workstation and device security

- Lock and secure your computer when away, even when working at home.
- Don't leave PHI unattended.
- Keep mobile devices containing PHI secure.



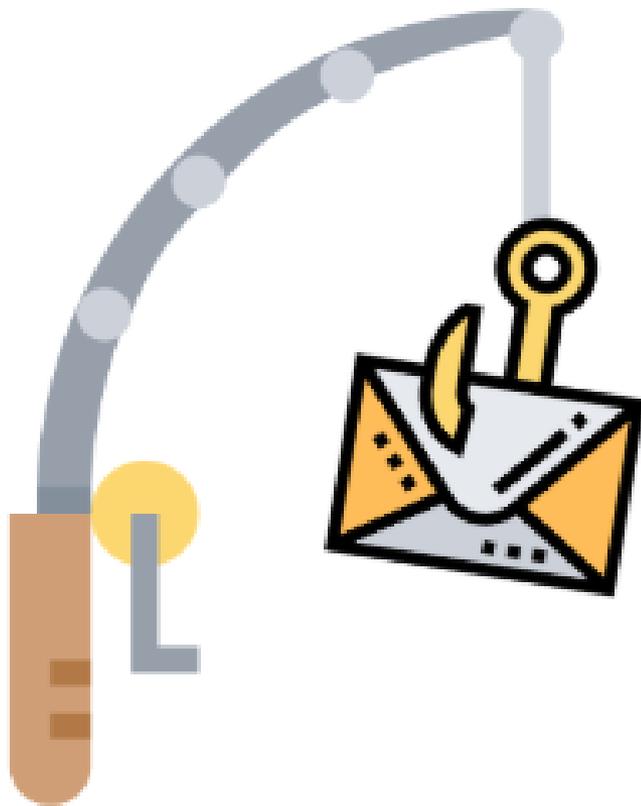
Technical



- Access control
- Audit controls
- Integrity controls
- Transmission Security



Phishing



When an attacker targets individuals by posing as a legitimate person or entity to lure individuals into providing sensitive information.



Phishing

(no subject)



Dave Firdaus <tomd88371@gmail.com>

To  Andrei Barlahan



8:38 AM

[EXTERNAL EMAIL] Do not open links or attachments unless you recognize the sender and know the content is safe.

Hello

I need you to carry out an urgent task for me, Send your number for details.

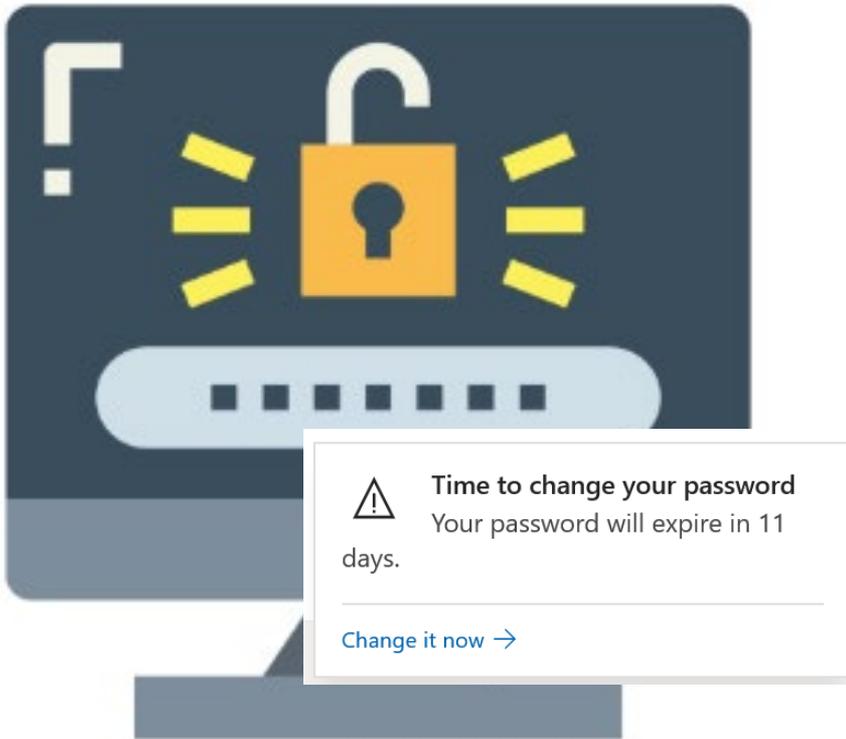
Regards,

Dave Firdaus

Chairman and CEO at Clever Care Health Plan



Passwords



- Change every 90 days
- Make passwords strong
- Don't store passwords where someone can access it (i.e. written on a post-it on your desk)
- Don't share your password!



Your Role



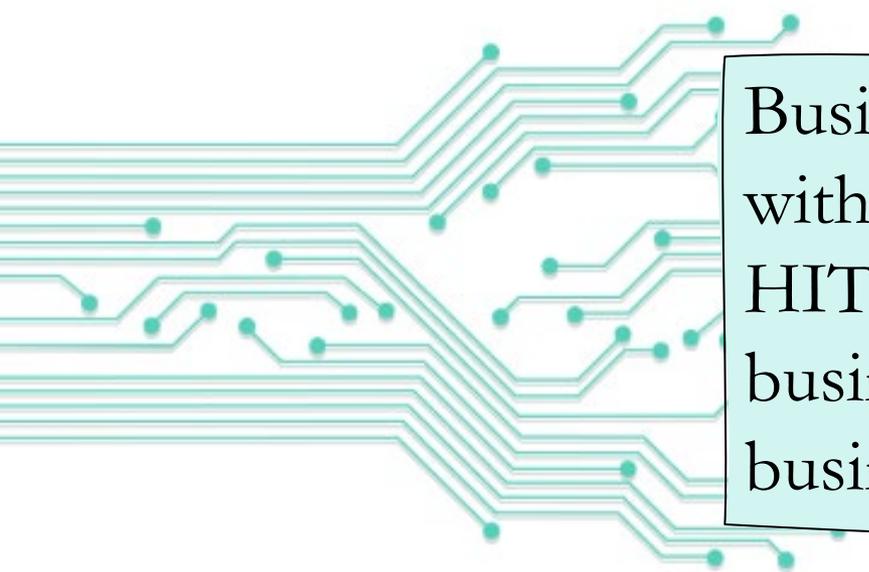
- Lock your laptop and secure your work area
- Ensure no PHI is left unattended and is properly disposed of
- Be careful of phishing scams



HITECH Act / Final Breach Notification Rule



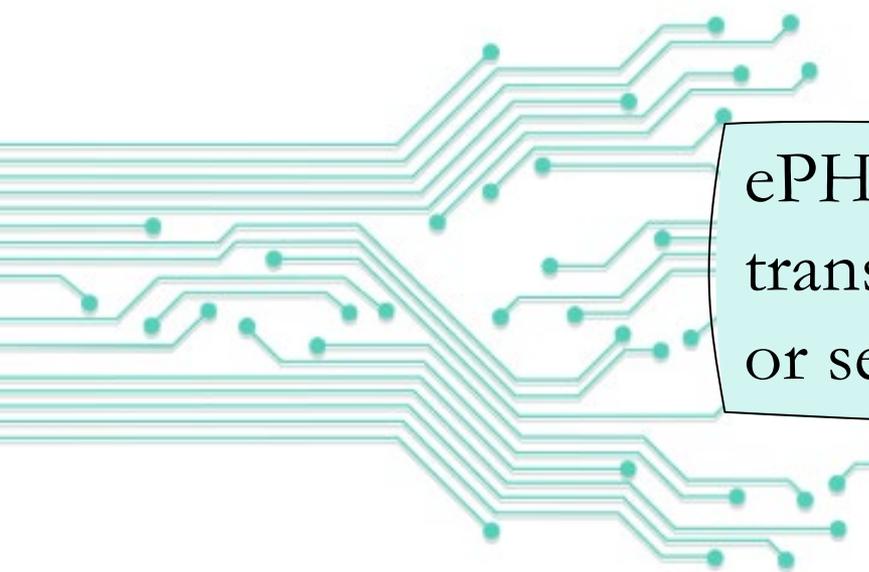
HITECH



Business associates must now comply with HIPAA's Security Rule and HITECH also increased the types of businesses that are considered business associates.

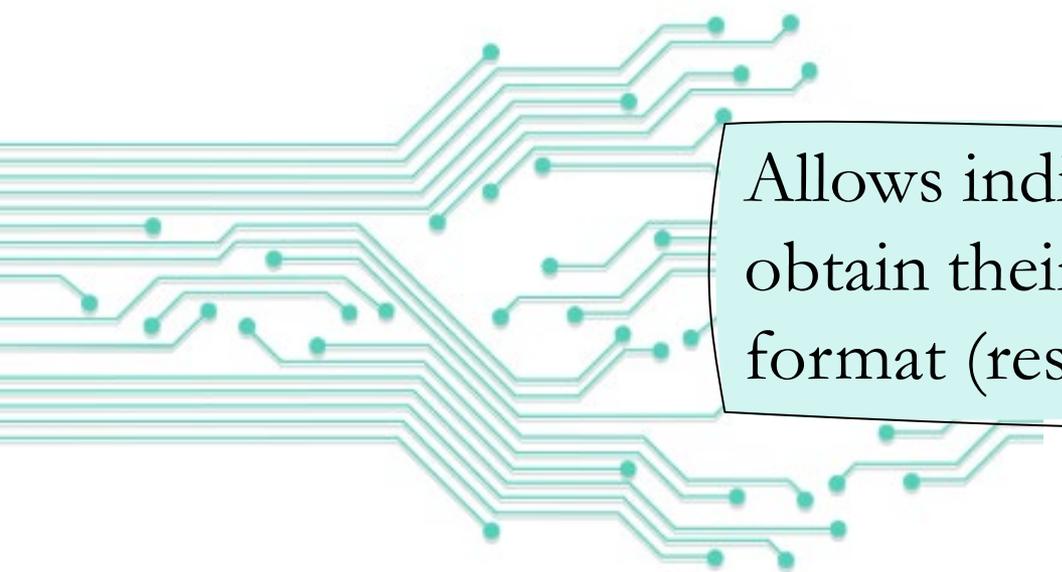


HITECH



ePHI must now be encrypted when transmitted electronically (i.e. email or secure service)

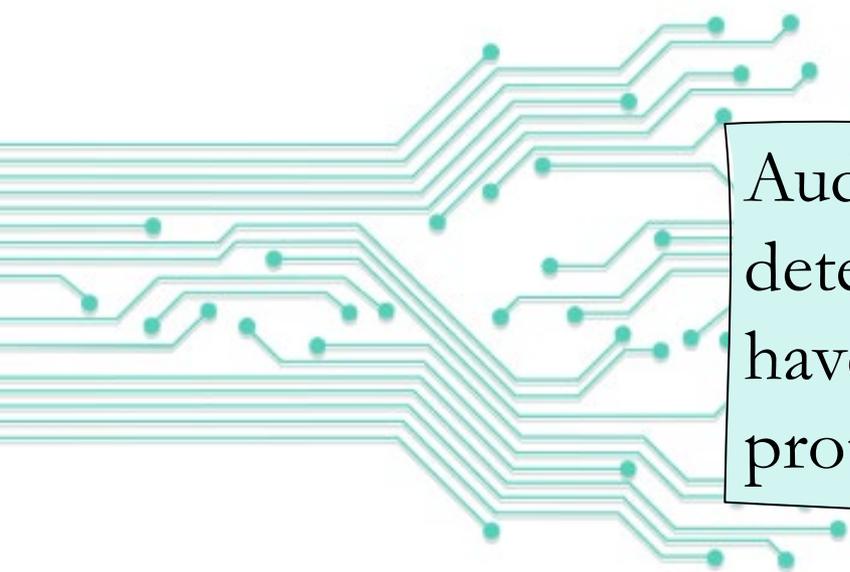
HITECH

A decorative graphic on the left side of the slide, consisting of multiple parallel lines that branch out and connect to small teal dots, resembling a circuit board or data flow diagram.

Allows individuals to request and obtain their PHI in an electronic format (restrictions apply).



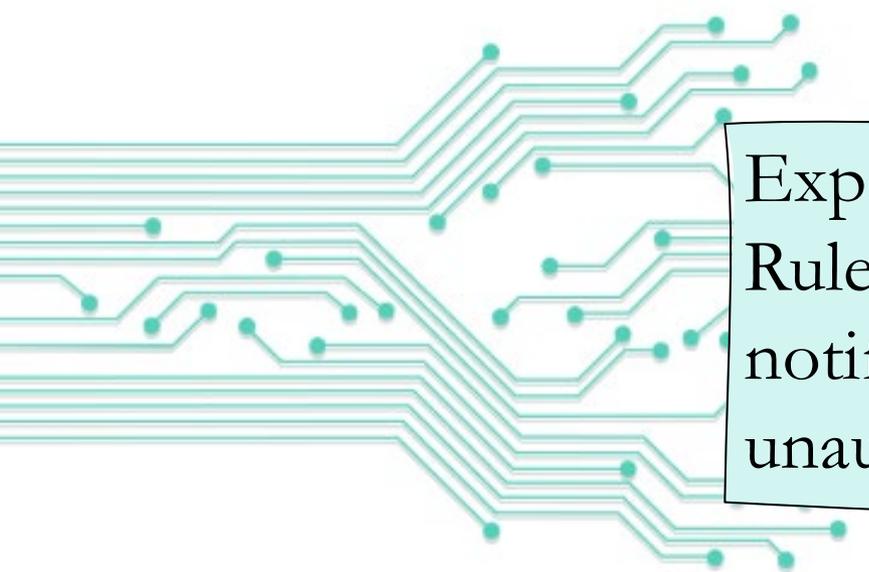
HITECH



Audits are permitted in order to determine HIPAA-covered entities have secure enough policies to protect PHI and ePHI.



HITECH

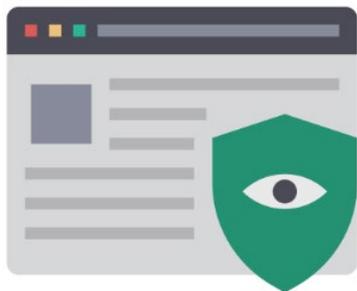


Expands the Breach Notification Rule, covered entities must provide notification if ePHI was disclosed to unauthorized users.

What is a breach?



Unauthorized access or disclosure of PHI that compromises the information's privacy or security.





Breach Notification Rule

When to notify:

Member Notification

- No later than sixty (60) calendar days after breach

HHS Notification

- If 500 or more impacted, then no later than sixty (60) calendar days after breach
- If less than 500 impacted, then no later than sixty (60) calendar days after the end of the year.

Media Notification

- Breach affecting 500 or more members
- No later than sixty (60) calendar days after breach



Breach Notification Rule



Exception to the Rule:

- Unintentional access or disclosure
- Accidental disclosure within the same organization
- Disclosure of PHI cannot be retained



**To learn more, refer to CPL 026.00
HIPAA Notification of Privacy Breach

Penalties of failing to follow HIPAA



- **Non-compliance** carries a penalty
- Unauthorized Disclosure or Misuse of PHI is a criminal offense.
- Penalties apply to both individuals and organization, or even its officers.



Your Responsibility



- Maintain confidentiality of member's PHI
- Understand HIPAA Policies
- Immediately report all suspected HIPAA violations .
**Remember you are protected from any retaliation.

HIPAA Related P&Ps

CPL 021.00 HIPAA Notice of Privacy Practices

CPL 022.00 HIPAA Accounting for Disclosure of PHI

CPL 023.00 HIPAA PHI Uses and Disclosure

CPL 024.00 HIPAA Security Standards for PHI Protection

CPL 025.00 HIPAA Notification of Privacy Breach

CPL 026.00 HIPAA Right to Request Restriction of PHI

CPL 027.00 HIPAA Right to Access PHI

HIPAA Related P&Ps are
available on [SharePoint](#)



Resources

For More Information About...	Resource
Covered Entities	<p>Covered Entity Guidance CMS.gov/Regulations-and-Guidance/Administrative-Simplification/HIPAA-ACA/Downloads/CoveredEntitiesChart20160617.pdf</p> <p>Fast Facts HHS.gov/hipaa/for-professionals/covered-entities/fast-facts</p>
Business Associates	<p>Contracts HHS.gov/hipaa/for-professionals/covered-entities/sample-business-associate-agreement-provisions</p> <p>Frequently Asked Questions HHS.gov/hipaa/for-professionals/faq/business-associates</p>
Communicating with a Patient's Family, Friends, or Others Involved in the Patient's Care	<p>HHS.gov/sites/default/files/provider_ffg.pdf</p> <p>HHS.gov/hipaa/for-professionals/special-topics/mental-health</p>
Emergency Situations: Preparedness, Planning, and Response	<p>HHS.gov/hipaa/for-professionals/special-topics/emergency-preparedness</p>
PHI Disposal	<p>HHS.gov/sites/default/files/ocr/privacy/hipaa/enforcement/examples/disposalfaqs.pdf</p>
Privacy and Security of Electronic Health Records (EHR)	<p>HealthIT.gov/topic/privacy-security-and-hipaa</p>
Model Notices of Privacy Practices	<p>HHS.gov/hipaa/for-professionals/privacy/guidance/model-notices-privacy-practices</p>

Resources

For More Information About...	Resource
Omnibus HIPAA Final Rule (2013 Modifications to the HIPAA Privacy, Security, Enforcement, and Breach Notification Rules)	GPO.gov/fdsys/pkg/FR-2013-01-25/pdf/2013-01073.pdf
Security Rule Guidance Material	HHS.gov/hipaa/for-professionals/security/guidance
Training Materials	HHS.gov/hipaa/for-professionals/training

Embedded Hyperlink	Complete URL
Code of Federal Regulations (CFR) Title 45, Section 160.103	https://www.ecfr.gov/cgi-bin/text-idx?SID=2e74e451fc72a29cdf7e67af5219ce6&mc=true&node=pt45.1.160&rgn=div5#se45.1.160_1103
HHS Special Topics in Health Information Privacy	https://www.hhs.gov/hipaa/for-professionals/special-topics
HIPAA Breach Notification Rule	https://www.hhs.gov/hipaa/for-professionals/breach-notification
HIPAA Compliance and Enforcement	https://www.hhs.gov/hipaa/for-professionals/compliance-enforcement
HIPAA Covered Entities and Business Associates	https://www.hhs.gov/hipaa/for-professionals/covered-entities
HIPAA Guidance	https://www.hhs.gov/hipaa/for-professionals/privacy/guidance



Questions?

- Contact SIU Manager, Andrei Barlahan
 - Mobile: (714)650-8691
 - E-mail: Andrei.Barlahan@ccmapd.com
- Contact the Clever Care's Privacy Officer or Security Officer



QUIZ Time!

This concludes our training! Exit out of here and go back to Paycom Learning to take quiz. You must get at least at **80%** to pass. Good luck!



2021 HIPAA Awareness Quiz

Instructions: Select the correct answer, save the file and submit back to whoever issued this quiz for grading.

NOTE: You must obtain an 80% to pass the quiz.

1. What does HIPAA stand for?
 - a. Health Insurance Portapotty American Association
 - b. Health Insurance Portability and Accountability Act
 - c. Health Insurance Portability and Accounting Act
 - d. None of the above

2. What are some examples of protected health information?
 - a. A blank piece of paper that belongs to a member
 - b. Explanation of Benefits
 - c. E-mail Correspondence with a member's name and DOB
 - d. B and C

3. T or F. The Notice of Privacy must inform members of the uses and disclosures of PHI that Clever Care may make and defines the member's rights to access or amend their PHI.

4. T or F. Clever Care Health Plan may disclose PHI without a member's authorization if its for treatment, payment or operational purposes.

5. T or F. As an employee of Clever Care Health Plan, I have the right to disclose member PHI to all my friends and family.

6. T or F. HIPAA penalties due to violations apply to both individuals and organization, or even its officers.

7. Which of the following would qualify as implementing the Minimum Necessary Rule?
 - a. Giving CMS only the data they request
 - b. Giving a person over the phone someone else's medical conditions
 - c. Giving a member your login and password
 - d. Taking a screenshot of your screen

8. Which of the following would be considered physical protections?
 - a. Requiring that employees lock computers after use and lock doors to restricted areas.
 - b. Requiring that employees swipe badges in order to access a restricted area.
 - c. Requiring that employees dispose of PHI in secure containers or shredding bins.
 - d. All of the above

9. Members have a right to do the following with their PHI:
 - a. View and receive a copy
 - b. Request amendments or changes

- c. Request restrictions
 - d. Request an accounting of unauthorized disclosures
 - e. All of the above
10. T or F. Phishing is another cool way to spell fishing.