

6/18/01

Are you HIPAAized? Get a Grip on HIPAA Implementation Essentials

Leslie Fox, MHA, RHIA, and Patty Thierry, MBA, RHIA

Thank you to Advance Magazine for permission to use this article

Leslie: I have noticed a significant increase in the coverage of Health Insurance Portability and Accountability Act (HIPAA) issues during the past six months. Health information management (HIM) professionals across the country are inundated with HIPAA updates, advertisements for HIPAA education, e-mail notices about HIPAA, implementation checklists and rumors of delays. Now that I am HIPAAized by all the correspondence coming across my desk, can you boil HIPAA issues down to one column and suggest to our readers what's really important for HIM professionals today?

Patty: I hear you Leslie. It's not an easy feat to keep up with all the HIPAA activities, and unfortunately, I can't boil the rules and key implementation activities down to one column. But I can identify what HIM professionals should be doing to learn about HIPAA and current HIPAA activities that affect HIM professionals. Unfortunately, there aren't many short cuts we can or should take when becoming informed about HIPAA. Whether you are a coder, HIM clerk, record analyst or department director, HIPAA affects the way you work, requiring you to be knowledgeable on certain aspects of the regulations.

Leslie: So what you are saying is that there aren't any cliff notes on HIPAA. This being the case, how does one keep up with HIPAA and play a role in its implementation?

Patty: Let's start at the beginning by building a HIPAA foundation. First, if you are an HIM department director, you need to read the proposed or final rules. (<http://aspe.os.dhhs.gov/admnsimp/>) Your role as a director is to be informed, to speak the HIPAA jargon and to participate in shaping HIPAA activities within your organization. You can contribute as either a HIPAA compliance committee member, leader of certain initiatives or as a participant in implementing aspects of security and transactions and codes sets within your department, for example.

Next, select two to five organizations that you will use as your regular source of information. One of those organizations should be the American Health Information Management Association (AHIMA). Their Web site (and the Journal of AHIMA) contains practical "what I need to know" articles and checklists. Their content is geared toward HIM professionals but also covers issues more broadly. Leslie, what do you do to keep up with HIPAA?

Leslie: I was afraid you were going to ask me that question. In addition to reading articles from various organizations such as AHIMA and the American Hospital Association (AHA), I subscribe to a HIPAA regulation listserv and an online HIPAA newsletter. These sources enable me to keep up via e-mail with daily HIPAA advancements. And fortunately, I also have you Patty as CARE's HIPAA point person to provide a summary of key HIPAA issues.

Patty: Those are great resources Leslie! You bring up a good point about having a point person to go to on

HIPAA issues. Within health care organizations, a dedicated person is often responsible to lead overall HIPAA initiatives. Often this individual works in one of the following departments: compliance, legal, information systems or in some cases HIM. These individuals are a good source of information and key individuals with whom HIM professionals should align.

Leslie: OK, so now that we know about basic resources, what kinds of activities are occurring across the country today?

Patty: Unfortunately, many organizations are slow to respond to the call for action and will be faced with implementing HIPAA on a rushed timeline. Although most organizations are just getting started, only a handful are well on their way. Let's look at some HIPAA-related activities. As I go through a few of the current initiatives, count how many opportunities HIM professionals have to get involved. Keep in mind also, that most of these activities are primarily data gathering and planning-related activities. There is also a ton to do once data is gathered and plans developed. HIM professionals will have endless opportunities to affect how HIPAA is implemented.

Developing HIPAA Leadership—First, organizations are creating the infrastructure necessary to support HIPAA initiatives. Decisions are being made regarding the department and the individual who will be responsible for the overall stewardship of HIPAA initiatives. Committee and subcommittee appointments are being made, often creating a HIPAA committee chair or member role for HIM professionals. In addition, the regulations require the appointment of a security officer and a privacy official. While many chief information officers or chief technology officers are filling the security officer role, HIM professionals with technical knowledge are also accepting these positions. The privacy officer role is a perfect match for HIM professionals because of our roots in confidentiality and understanding of information management practices.

Getting a Handle on the What, Where, When and How of Protected Health Information (PHI)—Organizations are mapping the internal and external flow of PHI and inventorying the storage of individually identifiable electronic health information. They are identifying how data is used, disclosed and maintained. This includes inventorying clinical and administrative information systems as well as information kept on backup media, research databases and on electronic information residing on personal computers.

Performing a Privacy Risk Assessment—A privacy risk assessment involves the mapping of information flow as well as comparing your organization's current privacy policies and procedures against the proposed privacy standards. This also involves reviewing and revising vendor agreements (business associate agreements) to ensure that third-party vendors/business partners also protect the privacy of your organization's identifiable health information.

Developing Training Programs—Training programs are an essential action in any HIPAA readiness plan. Organizations are performing assessments of their current training programs related to privacy and security. Once this is done, they will be able to develop awareness training. Inevitably, security breaches will carry stricter consequences and training will be required on a regular basis.

Leslie: So far I count at least seven activities requiring HIM expertise. But don't let me interrupt you...

Patty: At least! On the security front, there are two major activities:

Performing a Security Assessment—Existing information security policies need to be evaluated against the four categories outlined in the security standards. There are numerous checklists and tools to assist with this task. Audit trail functionality previously turned off will finally get priority treatment. The best audit trails will record read only access as well as additions and deletions to patient information.

Researching Security Technologies—The security regulations are technology neutral, which means that organizations have guidelines but can pick products that fit within their technology standards. Under consideration are biometric identifiers (such as fingerprints, voiceprints or retinal scans) for authentication of users, single sign-on technology, virtual private networks, digital certificates and electronic signatures.

Leslie: Should our readers be aware of any specific database projects?

Patty: Yes! There are at least two databases that HIM professionals should be involved in evaluating:

Assessing the Accuracy of your Master Patient Index (MPI)—Data integrity is an important aspect of the security regulations. In addition, ensuring the accuracy of your MPI will be paramount should a rule on individual health identifiers come to pass (currently on hold). We know that the MPI is a target for data integrity issues. Many organizations are assessing the accuracy of their MPI to determine the number of duplicates (patients assigned more than one number) and overlays (more than one patient assigned the same number). If you don't have a plan to assess and clean up your MPI, now is a good time to plan and budget for this activity.

Evaluating Billing Systems—The Electronic Data Interchange (EDI) transaction standards must be implemented by Oct. 16, 2002. The electronic replacement (X12 837 Claim/Encounter) to the UB92 and 1500 forms will be implemented at this time and may require you to capture additional data elements. If you are concerned with the transmission of complete and accurate data you will want to be involved in the testing of EDI transactions. The consequences of not participating in this HIPAA activity will present itself in the form of error reports in your inbox and increased accounts receivables. A "second round" of electronic transactions is slated to begin sometime after the first round of transactions is implemented. This second round includes the transmission of health care attachments (such as discharge summaries and other supporting data).

Leslie: So let me see if I can summarize the HIPAA activities that HIM professionals are likely to initiate, project manage or conduct. First they can raise the issue of allocating resources and establishing accountability for "HIPAAizing" their organization. HIM professionals are great candidates for doing an inventory of electronic and manual systems in which individually identifiable patient health information resides. HIM professionals should also be involved in evaluating the effectiveness of current security and privacy measures. Finally, as gaps in security and privacy are identified, HIM professionals can be involved in policy development, design and implementation of new procedures and systems, training, and staffing of database improvement projects.

Patty: One other significant contribution HIM professionals can make is to be the organization's HIPAA cheerleaders. Hospitals anticipate expenditures on HIPAA activities that they cannot easily recoup. With hospitals struggling to make ends meet, HIPAA regulations can engender resentment and attitudes that are counterproductive. Negativity is contagious, lowering employee morale and productivity. HIM professionals have an opportunity to wave the flag of privacy rights and responsibilities. Much of law encompasses things that we are already doing well because it is and always has been the business of health care leaders to care for and to protect patients and their health information. Keeping the focus of our colleagues on the fact that we are taking serious precautions with patient health information for the good of our patients rather than for merely pleasing regulators, elevates these activities and inspires the creative thinking and the efforts required to make HIPAA activities successful.

Leslie Ann Fox is president and CEO, and Patty Thierry is vice-president of operations and CIO of Care Communications Inc., a Chicago-based HIM services company whose newest service is online coding with CAREcoding.com. They invite their readers to send their thoughts and opinions on this column to lfox@care-communications.com or to pthierry@care-communications.com.