

# HIPAA Refresher Training

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Warren County Department of Fire Rescue Services  
January 13-15, 2020

# Resources

- <http://www.hhs.gov/ocr/privacy/hipaa/understanding/index.html>
  - [“HIPPA For Professionals”](#)
  - [Updated June 16, 2017 \(still valid/current\)](#)

# What is HIPAA??



- HIPAA = Health Insurance Portability and Accountability Act. It is a Federal Law that was passed in 1996.
- Created by – United States Department of Health and Human Services (DHHS)



# The Privacy Rule

- The intent of the Privacy Rule is to provide basic rights regarding the use of “Protected Health Information” (PHI).
- It protects all “individually identifiable health information.” It can be electronic, paper, or oral.
- Applies to “covered entities.”



# Who or What is a “Covered Entity”?

## Three Categories:

- Health plans.
- Health care clearing houses.
- Health care providers who transmit any health information electronically.

WCFR EMS Providers fall under the  
“Health Care Provider” category!

# What's Required?

The Privacy Rule requires “Covered Entities” to:

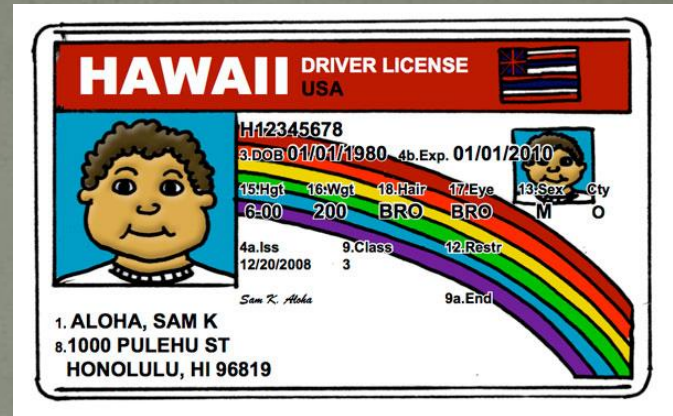
- Protect PHI
- Designate a Privacy Officer
- Develop a Notice of Privacy Practices
- When permitted, only disclose the minimum necessary PHI
- Conduct/document training for the entire Department
- Develop an Authorization Form for release of PHI





# Examples of PHI

- Name
- Address
- Date of Birth / Age
- Social Security Number
- **Scene pictures** that include license plates
- Medical condition / past medical history
- Full face photos



# Safeguarding PHI

- PCR's should be kept in a secure location.
- Networks containing PCR's should be password-protected with user specific logins.
- Generic logins allow for anonymous access to PHI and set up the Department for liability.
- Include confidentiality statements on e-mails and faxes that contain PHI.
- *Never allow someone else to use your login information.*





# Permitted Disclosures

Disclosure of PHI is acceptable in the following circumstances (contact Rick):

- Treatment
- Payment
- Operations
- Public Health Regulations
- Victims of Abuse
- Judicial Proceedings
- Law Enforcement
- Births and Deaths
- Research
- Protection of Public Safety



# Civil Penalties

The U. S. Department of Health and Human Services may impose civil penalties on a covered entity of \$100 per failure to comply with a Privacy Rule requirement.

# Criminal Penalties

- A person who knowingly obtains or discloses individually identifiable health information in violation of HIPAA faces a fine of **\$50,000** and up to **one-year** imprisonment.
- The criminal penalties increase to **\$100,000** and up to **five years** imprisonment if the wrongful conduct involves false pretenses, and to **\$250,000** and up to **ten years** imprisonment if the wrongful conduct involves the intent to sell, transfer, or use individually identifiable health information for commercial advantage, personal gain, or malicious harm.
- Criminal sanctions are enforced by the U. S. Department of Justice.

➤ Pub. L. 104-191; 42 U.S.C. §1320d-6.



# HIPAA

## Scenario One

You and your partner respond for a neighbor who suffers from depression. You discover during your assessment that the patient has had suicidal thoughts. After the call, you are concerned that other First Responders in your community need to know the extent of the patient's illness so they can watch for warning signs should the depression deepen.

Can you share what you have learned with you fellow First Responders?

# Answer

- No, this is a breach of confidentiality.

# HIPAA

## Scenario Two

There is a call in your town. It involves the treatment of an entrapped farmer who subsequently dies from his injuries. You are concerned that a Critical Incident Stress Debriefing might lead to a violation of HIPAA.

Should you be concerned?



# Answer

- No, a Critical Incident Stress Debriefing is held with only those providers involved in the call. The rules of CISM is that everything said at the debriefing is confidential.

# HIPAA

## Scenario Three

You are in charge of presenting a CE session for the monthly meeting of First Responders. You want to share some of the details of a recent call, but you are concerned you will be in violation of HIPAA because the patient is a resident in your town.

Can you do case review as education? If so, what precautions should you take to protect the patient'

# Answer

- You can use the details of the call as education as long as you do not give out identifying information such as name, address, etc.



# HIPAA

## Scenario Four

The First Responders in your fire department routinely use a break room in the station to fill out their paperwork. The room is not secure. How can you ensure that confidentiality is not compromised?

Can you work on paperwork while non-FRs are in the room?

# Answer

- If you are working on EMS First Responder paperwork, you need to be sure to put everything away when you are done. Do not leave call reports with confidential information on the table where anyone can pick it up. You can work on paperwork with non EMS personnel in the room, but do not share the information with them.

# HIPAA

## Scenario 5

- You have just assisted with your first field delivery of a newborn. You are so excited you post it on Facebook with pictures from your cell phone. Can you do this and still comply with HIPAA?



# Answer

- No. Putting information about EMS calls on Facebook is a breach of confidentiality. Even if you use no names it would be very easy in a small community for people to figure out who the mother and child are.

# Take-Aways:

- Rick Farrall is the WCFR HIPAA Officer
- WCFR 2020 Notice of Privacy Practices located:
  - Warren County Fire and Rescue Administration
  - Warren County Fire and Rescue Fire Manager
  - Warren County Ambulances
  - Warren Memorial Hospital EMS Room
- Always safeguard your patient's Protected Health Information; share ONLY with those directly involved in their emergent care (scene to E.R./transfer of care)