# HIPAA and Joint Commission Requirements Compared and Contrasted

Thirteenth National HIPAA Summit
September 25, 2006
Fran Carroll
Corporate Compliance and Privacy Officer
Joint Commission on Accreditation of
Healthcare Organizations



### Objectives

- 1. To review Joint Commission history as it pertains to HIPAA, the new Joint Commission survey process and how HIPAA issues enter the survey.
- 2. To review key standards and their applicability to HIPAA.
- 3. To review questions raised by organizations and the Joint Commission response.
- 4. Q & A.

#### The Joint Commission & HIPAA

- Review of legislation and comments
- Review of standards in 2001 – to date re: HIPAA
- Changes to Standards
  - Example IM 2.10
    - EP 1 Individuals aware of uses and disclosures
    - EP2 Removal of identifiers encouraged
    - EP3 Not disclosed without patient permission
    - EP4 Right to access, amend, and receive accounting

#### Joint Commission Survey Process

- Reformatting of Standards 2004
  - Standard; Intent
  - Standard; Rationale; Elements of Performance
- Priority Focus Areas
- Patient Tracer Methodology

Number of areas where HIPAA and Joint Commission Standards need to be considered together when developing P&P's or practices of the organization.

- NSPG #2 improve communication among HC providers, #8 medication reconciliation
- Standards: RI 6; PC 1; PI 1; LD -2; EC –
   2; HR 2; IM 7;
- Meeting Joint Commission Standards
   = HC ops = Minimally Necessary

- Leadership
  - LD 1.30 The hospital complies with applicable law and regulation.
    - EP1 The hospital provides all care, treatment and services in accordance with applicable licensure requirements, laws, rules and regulation.
  - LD 3.15 The leaders develop and implement plans to identify and mitigate impediments to efficient patient flow throughout the hospital.

#### Patient Rights

- RI 2.10 The hospital respects the rights of patients.
- RI 2.20 Patients receive information about their rights
- RI 2.50 Consent is obtained for recording or filming made for the purposes other than identification, diagnosis, or treatment of the patients.

#### Patient Rights

- RI 2.120 The hospital addresses the resolution of complaints from patients and their families.
- RI 2.130 The hospital respects the need of patients for confidentiality, privacy, and security.
- RI 2.180 The hospital protects research subjects and respects their rights during research, investigation and clinical trials involving human subjects.

- Management of Information
  - IM 1.10 The hospital plans and designs information management processes to meet internal and external information needs.
  - IM 2.10 Information privacy and confidentiality are maintained.
  - IM 2.20 Information security, including data integrity, is maintained.
  - IM 2.30 Continuity of information is maintained.

- Management of Information
  - IM 3.10 The hospital has a process in place to effectively manage information, including the capturing, reporting, processing, storing, retrieving, disseminating, and displaying of clinical/service and non-clinical data and information.
  - IM 4.10 The information management system provides information for use in decision making.

- Management of Information
  - IM 6.10 The hospital has a complete and accurate medial record for patients assessed, cared for, treated or served.
  - IM 6.50 Designated qualified staff accept and transcribe verbal or telephone orders from authorized individuals.
  - IM 6.60 The hospital provides access to relevant information from a patient's record as needed for use in patient care, treatment and services.

#### Environment of Care

- Overview and goals address privacy in terms of auditory and visual.
- EC 2.10 The hospital identifies and manages security risks.
- EC 9.10 The hospital monitors conditions in the environment.

- Patient Safety Goals
  - 8 Medication Reconciliation
    - 8b A complete list of the patient's medications is communicated to the next provider of service when a patient is referred or transferred to another setting, service, practitioner, or level of care within or outside the organization.

#### Questions Raised by Organizations

- What is PHI?
- After Hours Security of Medical Records
- Is providing consent for a blood transfusion on a speaker phone a violation of HIPAA?
- Is there a standard for workforce sanctions for breach of patient confidentiality?
- What about white boards?

#### Questions Raised by Organizations

- When we are sending information by mail must it be certified?
- A LTC facility was told that telling a hospital that a patient received a site infection from surgery was a violation of HIPAA – how does the Joint Commission feel about that?
- Sign in sheets?

#### Questions Raised by Organizations

- How long are we supposed to keep records?
- Is there 2 hours of HIPAA training required annually?
- Is there a Joint Commission standard regarding BAA's?
- Is there a requirement to put a privacy filter on a computer?

#### Resources

- American Health Lawyers Association: Expert Series, National Accreditation Standards and HIPAA: A Comparative Analysis, Copyright 2002
- www.jcaho.org
- www.hhs.gov/ocr/

