Nineteenth National HIPAA Summit

Business Associates and Privacy under the HITECH Act

Paul T. Smith, Partner Hooper, Lundy & Bookman, P.C.

Ober | Kaler

Hooper, Lundy & Bookman

Developments

- The Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009
- FTC final data breach reporting rule for PHR providers August 25, 2009
 http://www.dwt.com/LearningCenter/Advisories?find=126206
- HHS interim final data breach reporting rule for covered entities August 24, 2009
 - http://www.dwt.com/LearningCenter/Advisories?find=130345
 - Effective September 23, with 60-day comment period
- Proposed HITECH rule for privacy, security & enforcement, July 14, 2010 http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/nprmhitech.pdf
 - Comment period expired September 13, 2010

The HITECH Act

- Title XIII of the American Recovery and Reinvestment Act of 2009
- Enacted February 17, 2009
- Most provisions effective February 17, 2010

The HITECH Act

- Strengthens HIPAA privacy and security standards
- Creates new data breach notification requirements

The HITECH Act - Enforcement

- Increases penalties for HIPAA violations (effective immediately)
- Penalties tiered, based on fault & whether corrected
- \$100 per violation for innocent violations
- Up to \$50,000 per violation for violations due to willful neglect that are not corrected

The HITECH Act - Enforcement

- Permits states' attorneys general to bring civil suits under HIPAA to recover penalties and attorneys' fees
- Clarifies that individuals who are not covered entities can be prosecuted criminally under HIPAA
- Beginning 2012, requires formal CMP investigations for violations involving willful neglect
- Requires HHS to conduct periodic HIPAA compliance audits

The HITECH Act – Special Restrictions

- HITECH Act allows patient to restrict disclosure of PHI to health plan for payment or operations if patient pays out of pocket in full (2/17/2010)
 - Proposed regulations would implement this, and request comments on notification of downstream providers, such as pharmacies

The HITECH Act – Minimum Necessary

- Restricts use and disclosure to "limited data set" or to the minimum necessary "if needed" (2/17/2010)
 - Statutory provision to be replaced by guidance to be issued by HHS within 18 months of enactment of HITECH
 - CE or BA making disclosure to determine minimum necessary
- In the proposed rule:
 - HHS interprets this as requiring CEs to consider use of limited data set
 - HHS does not address who decides
 - HHS does not issue guidance, but requests comments on what aspects of the rule it should address

The HITECH Act – Accounting of Disclosures

- HITECH Act will require accounting of routine disclosures through qualified EHRs
- Goes back three years
- Requires adoption of certification standards for technologies to permit accounting (optional criteria adopted July, 2010)
- Followed by regulations on what information should be included in an accounting.
- Effective:
 - 1/1/2014 for CEs who acquired EHR before 1/1/2009
 - 1/1/2011 or date of acquisition for CEs who acquired EHR after 1/1/2009
 - Secretary may postpone for up to two years

The HITECH Act – Sale of PHI

- HITECH Act will restrict sale of PHI without authorization
- Effective 6 months after final regulations
- Requires regulations to be issued within 18 months of enactment
- HITECH Act includes exceptions:
 - Public health
 - Costs of preparation and transmittal of data for research
 - Treatment
 - Sale of the entity
 - Payment to BAs
 - Payment by individual for copy of record
 Hooper, Lundy & Bookman, P.C.

The HITECH Act – Sale of PHI

- Proposed regulation would add exceptions:
 - Disclosures for payment
 - Disclosures required by law
 - Reasonable cost-based fee for preparation and transmittal of information for any permitted purpose

The HITECH Act – Electronic Copy

HITECH Act—

- Permits patient to obtain electronic copy of PHI in an EHR, and to direct the CE to transmit electronic copy to a third party (2/17/2010)
- Fee not to exceed CE's labor costs

Proposed regulation would--

- Extend the right to any electronic PHI, whether or not in an EHR
- Require CE to provide copy in format requested by patient, if readily reproducible in that format; otherwise, in an agreed format
- Allow CE to charge for electronic media
- Permit patient to direct CE to transmit paper PHI to third party
 - But request must be written and signed

The HITECH Act – Marketing

- HIPAA allows a CE to be paid by a third party for marketing the CE's products, services or benefits
- HITECH Act prohibits remunerated marketing, except--
 - Reasonable remuneration for communications concerning drugs and biologicals currently being prescribed
 - Payment to BAs for communications on behalf of CEs

The HITECH Act – Marketing

- Proposed regulation would—
 - Require remuneration for communications relating to drugs and biologicals to be reasonably related to the CE's cost of making the communication
 - Define remuneration as direct payment from a third party whose products and services are being marketed
 - Permit a CE to continue to receive remuneration from third parties for treatment-related communications concerning the CE's own products and services
 - Must be disclosed in NPP, and patient given opportunity to opt out
 - Restrict the treatment exception in the HIPAA privacy rule to communications tailored to an individual's health care needs
 - Population-based communications would be health care operations, and would require authorization, unless they fell under another exception

The HITECH Act – Fundraising

- HIPPA requires fundraising communications to contain and opt-out, and requires CEs to make reasonable efforts not to send fundraising communications to individuals who have opted out
- HITECH says that an opt out is treated as a revocation of authorization
- The proposed rule--
 - Would require CEs to include the opt-out right in their NPPs
 - Would prohibit sending fundraising communications to individuals who have opted out
 - Would prohibit onerous opt-out mechanisms
 - Requested comments on—
 - Scope of opt-out
 - Using more targeted data for fundraising, e.g., department

The HITECH Act – Decedents

Proposed rule would—

- Allow disclosure to friends and family
- End privacy protections after 50 years

The HITECH Act – Research

- HIPAA prohibits combining conditioned authorizations with unconditioned ones
- Proposed rule—
 - Would allow conditioned authorizations (e.g., clinical trials) to be combined with unconditioned authorizations for the same research (e.g., tissue banking), as long as they are clearly differentiated
 - Invites comments on whether to relax the rule that authorizations be research-specific

The HITECH Act – Immunizations

- HIPAA requires an authorization for a CE to provide immunization information to a school
- Proposed rule would allow this, if—
 - The state requires the school to obtain immunization information to admit the student
 - The parent, guardian or person in loco parentis consents
 - Informal, oral consent would suffice

The HITECH Act – Notice of Privacy Practices

- Proposed rule would require NPP to describe—
 - Individual's right to restrict disclosure of PHI where patient pays in full
 - CEs ability to send subsidized treatment communications
 - with opt-out right
 - Individual's right to opt out of fundraising communications
 - Presently just required in the communication itself
 - Need for authorization for sale of PHI and use of PHI for marketing

Effective February 17, 2010—

- BAs must comply with the HIPAA Security Rule safeguards and documentation requirements
- BAs must comply with data breach reporting requirements
- BAs must comply with the required terms of the BA agreement
- BAs subject to the additional privacy and security provisions of the HITECH Act that apply to CEs

- Requires HIPAA covered entities and personal health record providers to report breaches of "unsecured protected health information"
- Requires business associate to report breaches to covered entity
- HHS published interim final rule August 24, 2009
 http://www.dwt.com/LearningCenter/Advisories?find=130345
 - Effective September 23, with 60-day comment period
 - HHS delayed enforcement 180 days

Unsecured protected health information is protected health information that has not been encrypted or destroyed

- Initial guidance issued April 17, 2009; updated in interim final regs
- NIST encryption standards for electronic data in use
- Shredding or destruction of hard-copy media
- NIST standards for purging or destruction of electronic media

Conditions for reporting

- Breach must not be permitted by the Privacy Rule
- Breach must pose significant risk of harm
 - To whom disclosed
 - Possibility of mitigation
 - Type and amount of information disclosed
- Risk analysis must be documented if no disclosure made

 Hooper, Lundy & Bookman, P.C.

Exceptions to reporting:

- Good faith unintentional access by authorized person
- Inadvertent disclosure by one authorized person to another
- Unauthorized disclosure to a person who cannot reasonably retain it

Notice must describe:

- What happened (including date of breach and date of discovery)
- Types of information involved
- Mitigation efforts
- Contact information

Business associates—

- Required to notify CE without unreasonable delay and in any event within 60 days
- Required to provide information that the CE must include in notification (but should not delay initial notification while they collect this information)

Covered entities deemed to discover breach—

- If the BA is an agent, when the BA discovers it (or is deemed to discover it)
- If the BA is an independent contractor, when the BA notifies the CE

- Agent or Independent Contractor
 - Attribution of Breach Notice to Covered Entity
 - Proposed vicarious liability for Civil Monetary Penalties
- Federal Common Law Test
 - Most law developed under federal statutes such as ADA and ERISA
 - Restatement (Second) of Agency

- Business associates must comply with required terms of BAAs
 - Safeguarding
 - Limitations on use and disclosure
 - Agreements with subcontractors
 - Assistance with patient rights
 - Return or destruction on termination

- Should you amend BAAs?
 - Incorporation of HITECH privacy and security provisions
 - Data breach reporting
 - Automatic amendment

Questions?

Speaker Contact Information:

■ Paul Smith: psmith@health-law.com, 415-875-8488