Nineteenth National HIPAA Summit

Privacy and Security under the HITECH Act

James B. Wieland Shareholder, Ober | Kaler 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

Ober | Kaler

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

- Builds on Executive Order 1335, April, 2004—
 - Created position of National Coordinator for Health Information Technology
 - Adopted a federal HIT Strategic Plan, calling for widespread adoption of interoperable EHRs within 10 years

- Establishes position of National Coordinator for Health Information Technology to--
 - Update the goals of the federal HIT Strategic Plan, with the same target of 2014
 - Adopt programs for the testing & certification of health information technology
- Establishes a HIT Policy Committee to make policy recommendations relating to the implementation of the national Health IT Strategic Plan.

- Establishes a HIT Standards Committee to recommend standards, implementation specifications, and certification criteria for the electronic exchange of health information.
- Provides Medicare and Medicaid incentives for meaningful use of certified EHR technology by providers.
 - Initial set of standards, implementation specifications, and certification criteria for EHR technology issued July 28, 2010.

- 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

Ober | Kaler

The HITECH Act – Business Associates

Effective February 17, 2010—

- BAs must comply with the HIPAA Security Rule safeguards and documentation 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

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

Ober | Kaler

The HITECH Act – Accounting of Disclosures

- HITECH Act will require accounting of routine disclosures through qualified EHRs
- Goes back three years
- Requires recommendations by HIT Policy Committee and adoption of certification standards for technologies to permit accounting
- 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

Ober | Kaler

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
 Ober | Kaler
 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

Ober | Kaler

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

Ober | Kaler

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

Ober | Kaler

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

Ober | Kaler

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

Ober | Kaler

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

Ober | Kaler

- Requires HIPAA covered entities and personal health record providers to report breaches of "unsecured protected health information"
- FTC published final rule for PHR providers August 25, 2009
 http://www.dwt.com/LearningCenter/Advisories?find=126206
- HHS published interim final rule for covered entities August 24, 2009
 - http://www.dwt.com/LearningCenter/Advisories?find=130345
 - Effective September 23, with 60-day comment period
 - HHS will delay enforcement 180 days

Ober | Kaler

State Security Breach Notification Laws

HIPAA pre-emption rule applies

 State laws survive unless it is impossible to comply with both, or the state law stands as an obstacle to the federal law

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 Ober | Kaler
 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

Report must be given to—

- The individual
- Prominent media outlets if ≥500 residents of the state are affected
- HHS concurrently if ≥500 individuals are affected; otherwise annual log

Notice must describe:

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

Ober | Kaler

- Notice must be given without unreasonable delay, and no later than 60 days following discovery (i.e., when breach is known or should have been known with reasonable diligence)
- Notice must be delayed at request of law enforcement official for the period requested (but the request must be written for a delay of more than 30 days)

Ober | Kaler

Notice must be given by first-class mail, except:

- Email notice is permitted if the individual has agreed to electronic notice
- Substitute notice if the CE does not have contact information.
 - If < 10 individuals, by written notice, telephone or other means
 - If ≥ 10 individuals, by—
 - Conspicuous posting on web site home page for 90 days, or
 - Conspicuous posting in major print or broadcast media with toll-free telephone number

Ober | Kaler

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
 Ober | Kaler
 Hooper, Lundy & Bookman, P.C.

33

Business Associate Session

- 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

HIPAA Security Standards

- Security Standards
 - Technologically agnostic
 - Scalable
 - High enforcement profile
- See Attachment One Security Standards Checklist
- Risk Assessment the Foundation for Compliance
 - See Attachment Two OCR First Annual Guidance

Business Associate Agreement

 See Attachment Three – Annotated post-HITECH Business Associate Agreement

Questions?

Speaker Contact Information:

- James Wieland: jbwieland@ober.com, 410-347-7397
- Paul Smith: psmith@health-law.com, 415-875-8488