


HIPAA Presentation

Washington D.C

April 26, 2002



Presenter: Alice Polley, Vice President Clinical Services, Integrity Officer



Sturdy Memorial Hospital

Overview

- Location: Attleboro, MA
- Non-profit, independent, financially stable
- Southeastern Massachusetts, 12-town service area and RI
- 145 beds
- FY 2001 statistics
 - 7742 admissions
 - 1091 births
 - 43,685 emergency visits
- Computer system—MEDITECH (Medical Information Technology)



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Overview - continued

- 11 Physician practice sites
- 45 Physicians
- Computer system—CompuSense
- MEDITECH access - T1 line

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Philosophy

- All Senior Managers wear many hats
- Vice President for Clinical Services
 - 5 Departments
 - Integrity Program for Hospital, Associates, and DME
 - Oversight for HIPAA compliance
 - 1998-2000 Y2K compliance; HIPAA is very different



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Summit Presentation

- Transaction and Code Sets Rules
- Privacy Rule—Hospital
- Privacy Rule—Associates
- Security Rule (proposed)
- Resources
- Integration into Integrity Program

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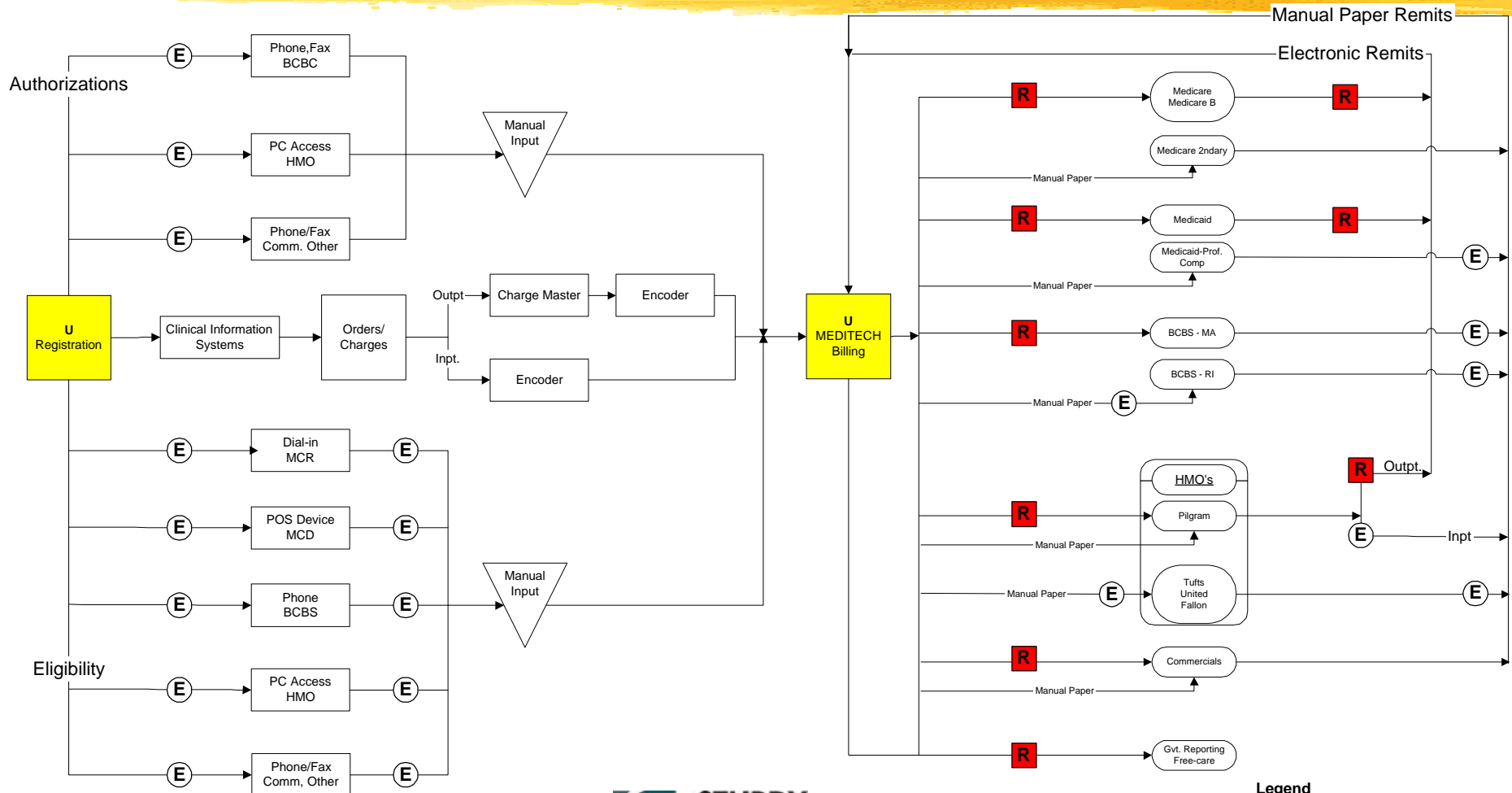
Transaction and Code Sets Rules

- Task Force—HIS, Billing
- We will file compliance plan for one-year extension
- MEDITECH
 - November 2001, went LIVE with version 4.8
 - June 2002, will begin testing 4.9 (rather than retrofit 4.8)
 - November 2002, will go LIVE with 4.9



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Transaction and Code Sets Rules



Legend

- U = Upgrade**
- E = Efficiency**
- R = Remediate**

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Transaction and Code Sets Rules

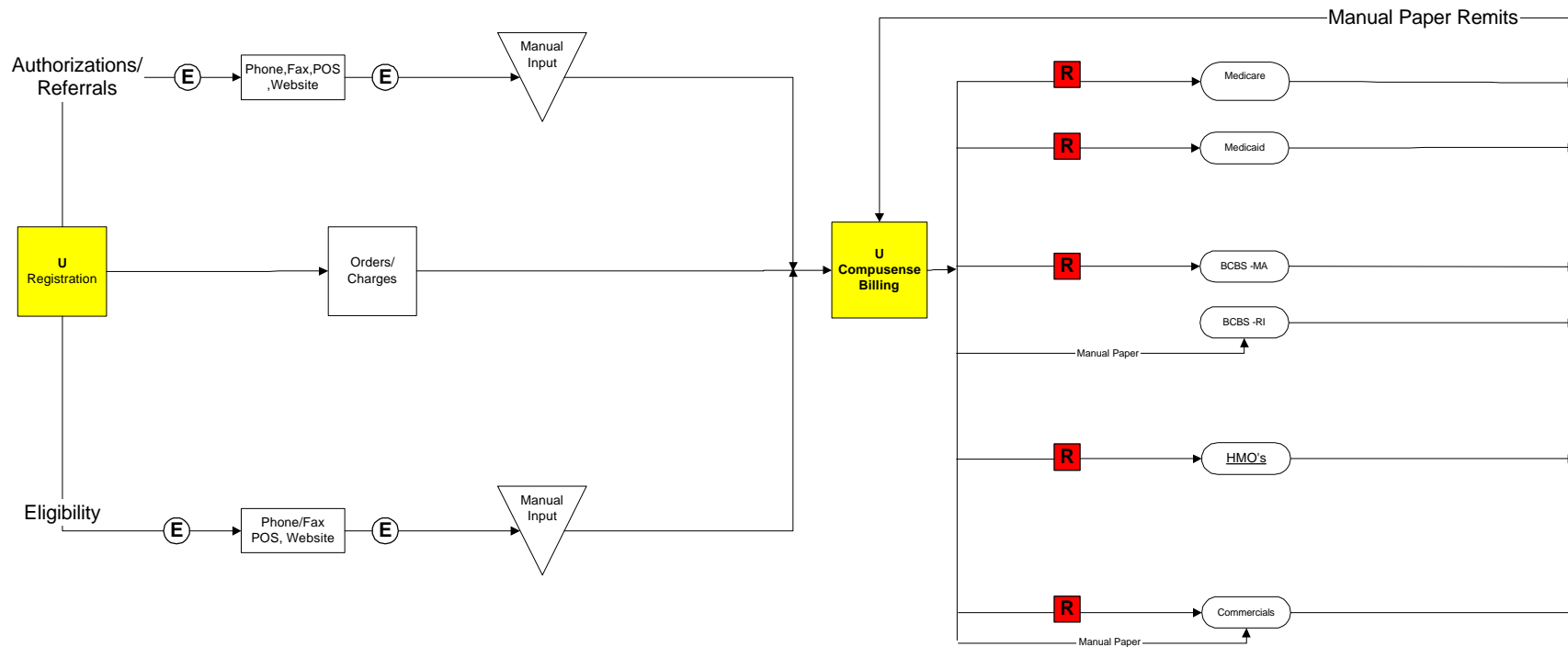
Submission Claim Information			
Groupings			Claims
Medicare			14
Medicare B			6
Medicaid			18
Medicaid - Prof.			12
BCBS - MA			13
BCBS - RI			13
HMO's			
Pilgram			9
Tufts			5
United			4
Fallon			4
Commercials			39
UCP Reporting (Gov. Reporting)			7
Total Submission Claims:			144



Sturdy Memorial Associates

Transaction and Code Sets Rules

Sturdy Memorial Associates
HIPAA Transaction & Code Set Diagram



Legend
U = Upgrade
E = Efficiency
R = Remediate

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Transaction and Code Sets Rules

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<i>Submission</i>	<i>Intermediary Clearinghouse</i>	<i>Contact Name</i>	<i>Contact Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	<i>Contact Number</i>	<i>E-Mail Address</i>
Medicare A	Associated Hospital Service of Maine	Renee Richard	1515 Hancock Street	Quincy	MA	02169-5280	1-617-689-2604	renee_richard@bcbsme.com
Medicare B	National Heritage Insurance Company	Emmeline Derivois	75 Sgt. William Terry Drive	Hingham	MA	02044	1-877-567-3130	
Medicaid	Unisys	James C. Turnbull	5 Middlesex Ave, PO Box 9101	Somerville	MA	02145	1-617-576-4030	james.turnbull@unisys.com
BCBS - MA	BlueCross BlueShield of Massachusetts	Robert J. Mahoney	492 Old Connecticut Path	Framingham	MA	01701	1-508-935-2669	
BCBS - RI	BlueCross BlueShield of Rhode Island	Donna Curran	444 Westminster Street	Providence	RI	02903	1-401-459-2209	
Pilgrim	HPHC	Maureen Randall	1200 Crown Colony Drive	Quincy	MA	02169-0940	1-800-742-8328	maureen_randal@hphc.org
Commercial	Envoy/WebMD		15 Century Boulevard, Suite 600	Nashville	TN	37214	1-615-885-3700	
UCP	Division of Health Care Finance & Policy	Christine Belas	Two Boylston Street	Boston	MA	02116-4704	1-617-988-3100	
Remittance								
Remit Program	Beacon Partners, Inc.	David LaFontaine	200 Cordwainer Drive	Norwell	MA	02061	1-781-982-8400	dlafontaine@beaconpartners.com
Medicare A	Associated Hospital Service of Maine	Renee Richard	1515 Hancock Street	Quincy	MA	02169-5280	1-617-689-2604	renee_richard@bcbsme.com
Pilgrim	HPHC	Maureen Randall	1200 Crown Colony Drive	Quincy	MA	02169-0940	1-800-742-8328	maureen_randal@hphc.org
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<i>Submission</i>	<i>Intermediary Clearinghouse</i>	<i>Contact Name</i>	<i>Contact Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	<i>Contact Number</i>	<i>E-Mail Address</i>
Clearinghouse	WebMD/Healthwire	Joanne Locke	One Hampshire Street	Cambridge	MA	02139	1-617-761-3967	jlocke@webmd.net
Remittances								
None								



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Privacy Rule

- Task Force—began March 1, 2001
- Composition
- Privacy Officer—Director of Reimbursement (yes, really!)
- Directors of Medical Records, Patient Accounts, HIS, Public Relations, Imaging (had chaired Confidentiality Task Force in 2000); Risk Manager; Practice Manager from Associates; Lab IS/compliance
- Work Plan



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Privacy Rule - Initial Task List - March 1, 2001

1. Designate a Privacy Officer. Amy Pfeffer is the lucky lady.
2. Create a written Notice of our personal health information (PHI) practices, including specific activities like appointment reminders, marketing, fundraising, facility directories such as admission lists. Primary responsibility: _____. Date for draft: _____.
3. Identify Business Associates with whom we share protected information; review contracts; include language requiring compliance with HIPAA privacy rules and our privacy policies and procedures. (E.g., QSM, MMR, Lab Force, outside transcription service, auditors, lawyers, ????) Responsibility: _____. Date: _____.
4. Determine where Mass. Law pre-empts Privacy Rule. Responsibility: _____. Date: _____.
5. Draft Consent language for use of PHI. Responsibility: _____. Date: _____.
6. Review language in fundraising and marketing literature. We must offer "opt-out" option on the first mailing to a former patient and tell them how to exercise that option. If they do so, we must make sure to honor their choice. Responsibility: _____. Date: _____.
7. Create policies and procedures to ensure that we make "reasonable efforts" to disclose only minimum information necessary to accomplish an intended purpose. Responsibility: _____. Date: _____.
8. Provide guidance on Internet usage, including email between MD and MD, MD and patient. Responsibility: _____. Date: _____.
9. Create list of information releases that require *authorizations* and create a tracking sheet for all such disclosures. Responsibility: _____. Date: _____.
10. Identify employees or groups of employees who need access to PHI and categories of PHI to which such persons need access. (Includes Meditech menu review, CompuSense menu review, other software, and access to paper records, fax records such as lab results and orders.) Responsibility: _____. Date: _____.
11. Design and implement audit trails to track uses of PHI, access to PHI, and disclosures of PHI. Responsibility: _____. Date: _____.
12. Train employees re: our policies and procedures. (New employee orientation, existing employees) Responsibility: _____. Date: _____.

Unless delayed by Bush administration, implementation date is 2/26/03. **Note: There has indeed been a delay already. New implementation date is 4/16/03 AND a 30-day comment period has just been reopened.** Security Rule is still being promised early in 2001 and if passed will require at least as much work as Privacy.

Each person given responsibility for any of the above areas MUST read the applicable sections of the Rule. It is very clear, detailed, and explicit.



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Privacy Rule - Outside Vendors



- McDermott, Will & Emery notebook
(sample policies and forms)

Stephen W. Bernstein, 617-535-4062, sbernstein@mwe.co



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Privacy Rule - Status (Pre-NPRM)



- Notice—5 pages (copies available upon request)

Responsible person—Risk Manager

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Privacy Rule - Status (Pre-NPRM)

- Consent
 - One-page draft done (copies available upon request)
 - If requirement dropped....
 - Responsible person—Risk Manager

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Privacy Rule - Status (Pre-NPRM)



- Business Associates
 - 63 identified so far
 - 99 companies ruled out

Responsible person—Director of Patient Accounts

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Privacy Rule - Status (Pre-NPRM)



- Marketing
 - Questionnaire
 - Proposed changes....
 - Product samples, support group information
 - De-centralized function at Sturdy

Responsible person—Director of Public Relations



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Privacy Rule - Status (Pre-NPRM)

- Authorizations
 - Currently handled in Medical Records
 - Need to create new forms
 - Will need to track
 - May need to decentralize

Responsible person—Director of Medical Records



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Privacy Rule - Status (Pre-NPRM)

- Minimum Necessary
 - Systems issues—external access, internal access, sign-on
 - Menu review—HUGE amount of work to do here

Responsible person— HIS, department managers

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Privacy Rule



- Preemption of state law—Mass. Bar Association, August 2002

Sturdy Memorial Associates

Privacy Rule - Status (Pre-NPRM)

- Sturdy Memorial Associates
 - We will not use combined Notice or Consent
 - Are determining Business Associates
 - Are reviewing computer access, authorization processes
 - Still need to write Notice
 - Physical considerations—workstations, waiting rooms
 - CompuSense—must upgrade for Transactions, then review changes for Privacy (minimum necessary, access)



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Security Rule

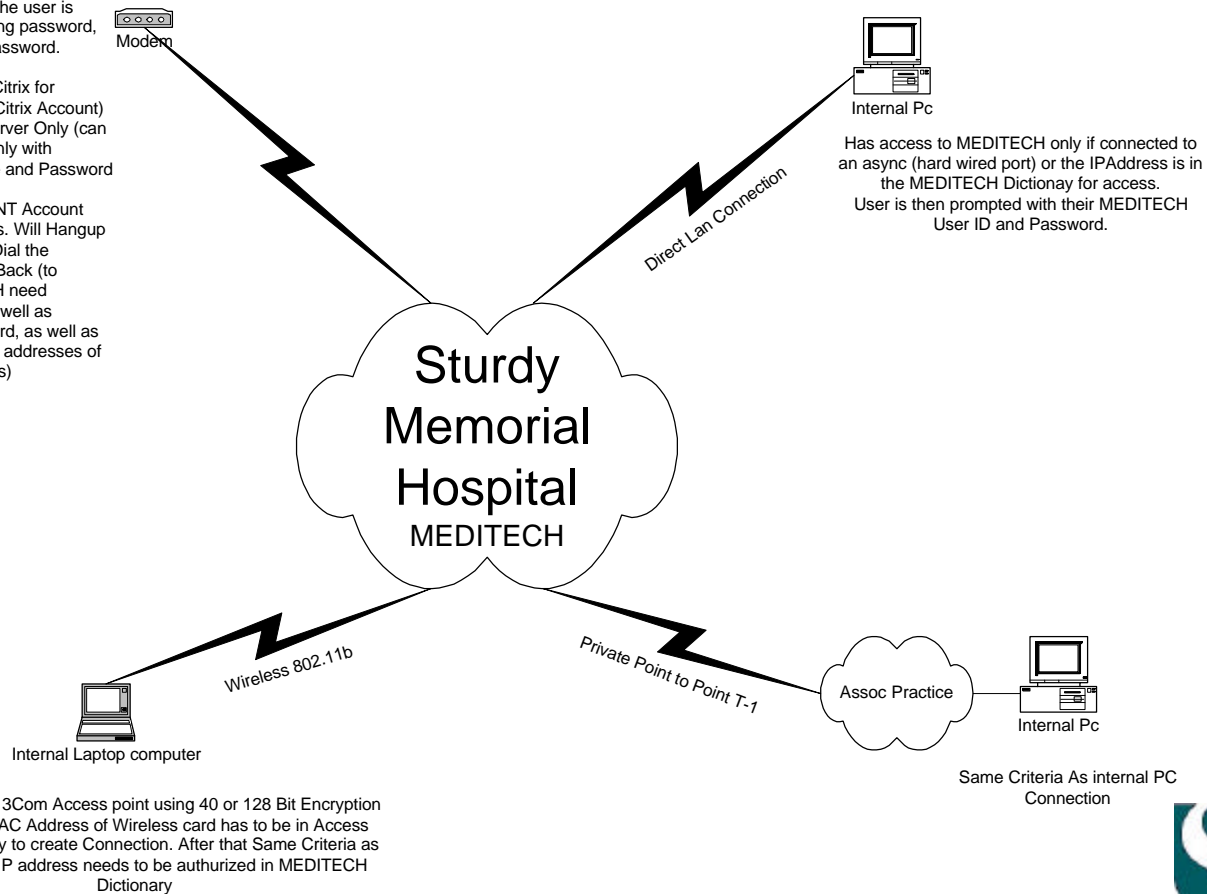
Current Security Connections for access to the MEDITECH System

3 Methods

1- Dial in Access- directly into MEDITECH modem. The user is prompted with Operating password, then a User ID and Password.

2- Dial In Access Via Citrix for Compuserve (Needs Citrix Account) to log into the Citrix Server Only (can Access MEDITECH Only with MEDITECH Username and Password

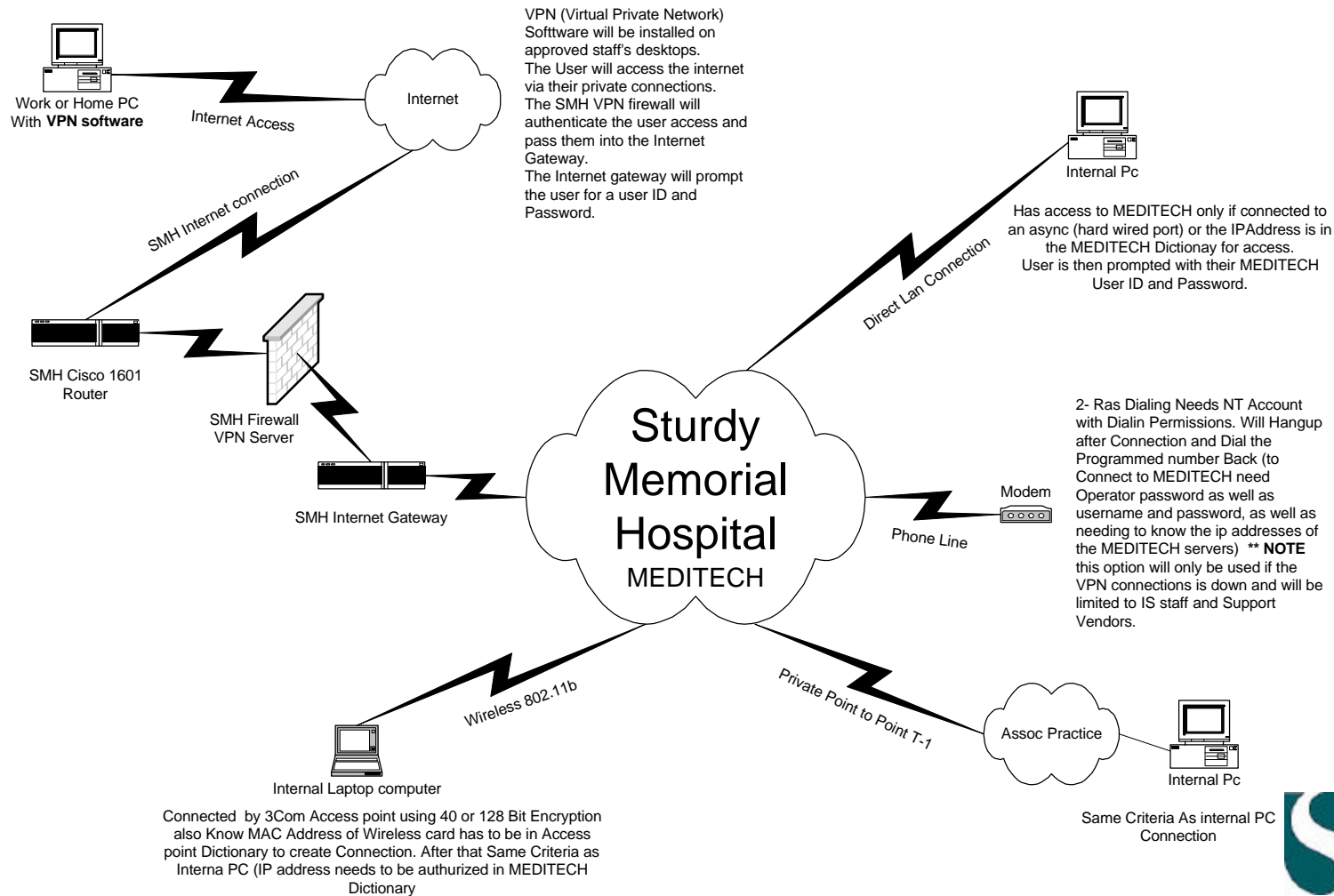
2- Ras Dialing Needs NT Account with Dialin Permissions. Will Hangup after Connection and Dial the Programmed number Back (to Connect to MEDITECH need Operator password as well as username and password, as well as needing to know the ip addresses of the MEDITECH servers)



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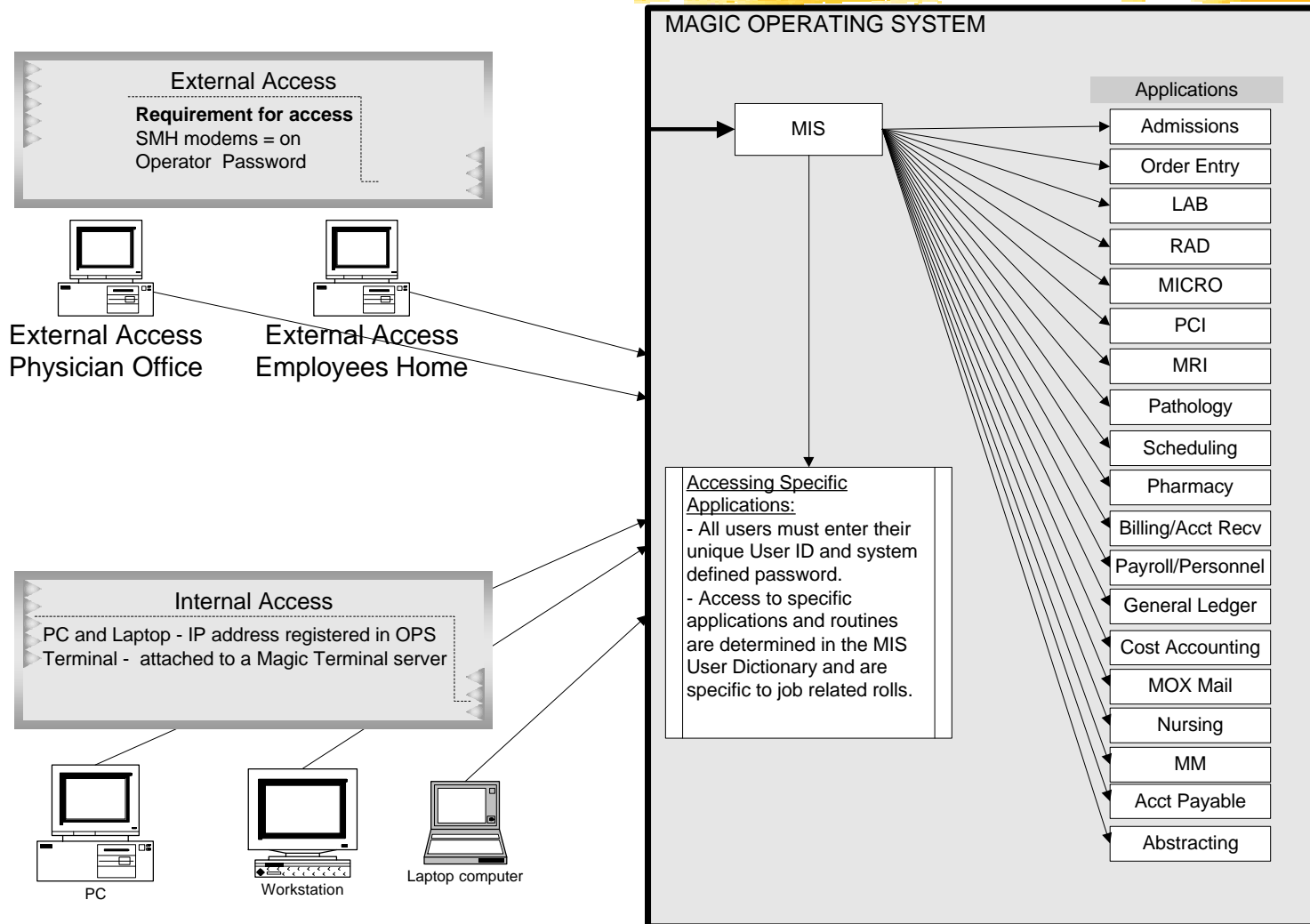
Security Rule

Future Security Connections for access to the MEDITECH System



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Security Rule - Accessing MEDITECH System



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Security Rule - Menu/Procedure Control

The individual department's Manager and Supervisors determine menu access.

- The appropriate department Manager and Supervisor approve all edits to menus.
- The Information System department controls physical changes to the menus. Additions and edits are processed only with proper access request and change forms signed by the department Manager and Supervisor.



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Security Rule - Application Access Dictionaries

Enter/Edit Order Entry Access Dictionary

Mnemonic: [] Active? [] Enter Verified Orders? [] Cashiers? []
Description: [] Allow report sections Add/Rev? []
Edit Signed Reports? []
Final Bill Warning? [] Cancel Signed Reports? []
Show signs on warning messages? []
Restrict Orders To Categories: [] Mnemonic: [] Description: []
Restrict Interfacing Cal For PPT Assoc. Ord.: [] Mnemonic: [] Description: []

Routines

Mnemonic: [] Description: [] Mnemonic: [] Name: []

Functions

Mnemonic: [] Description: [] Mnemonic: [] Name: []

MEDITECH Applications have a specific Access Dictionary. These dictionaries control access to specific application procedures and processes.

- Restrict Access to Categories - Limits the access to certain procedures.
- Functions - Limits the Users to functions within the applications. Such as enter/edit, amend, cancel etc..

Enter/Edit LIS Access Dictionary Page 1 of 4

Mnemonic: ALL Active? [] Description: All Access

User	User Name	Alert	Confidential Tests/Procs	Restrict to Res Entry	Department
2ND_BP	PATEL, BHARATI, DEEN		LAB		
2ND_EJ	JOSE, COLLEEN				
2ND_DU	BLACKWELL, CECILE				
2ND_FF	FISHER, FRANCINE				
2ND_JAU	JANERO, JOSE LITO				
2ND_JS	SEPULVEDA, JOHN				
2ND_MC	COUET, KATHARIN				
2ND_LAG	BORTON, LISA A				
2ND_LS	SALUJE, LINDA				
2ND_MC	CORPUS, MARION				
2ND_PA	ADAMS, PAT				
2ND_REB	BURPHAM, RON				

LAB? [] User Result? [] Broadcast Results? [] Reg Pt From EE Req? []
MTC? [] Edit User Result? [] Call Results? [] Reg Pt From Eng Iss? []
EBK? [] Edit Apt Result? [] EE Res Adv Spec? [] DU Result Inquiring? []
PTH? [] Edit LIS Pt Data? [] Watch QC Seq Entry [] USER Perform Phis Test? []

Lab Sites: [] Restrict To Facilities: [] Restrict To Reg Screens: [] Default Res Lookup? [] REG
1 HL [] Cal Res Screen: [] Reg Screens: [] Inface Alert Msg? [] DXP
2 W [] [] [] [] [] [] [] [] []
3 [] [] [] [] [] [] [] [] []
4 [] [] [] [] [] [] [] [] []
File W/Out Res Act? []

- Confidential Test/Procedures, Determines which Confidential procedures users can result and inquire.
- Restrict to Modules, Limits the access a user has to patient data within specific modules.
- Restrict to Sites, Limits the access a users has to patient data within a specific LAB site.

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Security Rule - Hardware Restrictions

Each device accessing the MEDITECH system must be identified in the Magic Operating system. The device is assigned a unique name, which is used by several Applications in the system

Restricting patient access by hardware device

Enter/Edit MIS Location Dictionary Page 1

Mnemonic: BALF
Active: Y
Name: BALFOUR PAWLLION
Phone #:
Facility:
Type: I Output Type:
Confid: M Temp Activity: Y
BL Department:
Default Printer: BALF
Terminal: Associated Printer: Order Entry:
TSAJ, 5
TSB, 1
TSL, 13

Terminal	Associated Printer	Order Entry
TSAJ, 5		Admin. Nursing Screens Dept Screen
TSB, 1		Input OERADM Input
TSL, 13		Output OERADM Input
		Diet Screens Input SHACK Output

In the MIS location dictionary, the unique device name is entered into the Terminal Prompt.

When users who have the "Restricted By location" flag set to yes in MIS, and access patients from one of these devices, the system will only display patients from that location.

A user with the "Restricted by location" prompt set to yes in MIS, must physically go to the location to access patients on the unit.

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Security Rule

- The system is the easy part
- Administrative functions
 - Menu access
 - Audit trails
 - Monitoring
 - Discipline
- Human Resources communications
 - New employee access
 - Terminated employees
- Physician Offices
 - Shared passwords, staff turnover
 - Non-Sturdy Memorial Associates physicians (30+/-)
- Life Care nursing home

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Security Rule



Responsible person—Director of HIS

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Resources



- State hospital association
- New England HIPAA workgroup
- E-newsletters—HIPAAAlert, HIPAAAdvisor, PSN_Editor, Compliance Monitor
- Council of Ethical Organizations (the consultant I contact as needed)

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Integration into Integrity Program

- Integrity Committee—add Privacy Officer, Security Officer
- Commission audits
- Include in reports to CEO and Board

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Conclusion

- This is just another unfunded mandate
- No need to spend megabucks
- Make changes that make sense to your organization
- Reasonableness standard
- Do what is best for patients--always

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