



HIPAA Summit V

A Case Study: Kaiser's HIPAA Compliance from the Perspectives of Kaiser's Hospitals and Clinics

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Mid-Atlantic HIPAA Project

Focus on HIPAA Privacy

- Of the three key HIPAA Administrative Services components, **Privacy** has the first compliance date – **April 14, 2003**
- **Privacy** requirements have a **tremendous impact** – touching everyone from CEO to Medical Directors to physicians to patients to office staff and volunteers

Kaiser Permanente: A Snapshot

- **The nation's largest nonprofit health plan has:**
 - ✓ **Regions in 9 states and Washington, DC**
 - ✓ **8.4 million members**
 - ✓ **29 Hospitals**
 - ✓ **423 Medical Offices**
 - ✓ **11,000 physicians**
 - ✓ **128,000 employees**
 - ✓ **More than 3,000 applications that contain HIPAA-relevant information**

Mid-Atlantic States: A Snapshot

- **Kaiser's eastern-most Region has:**
 - ✓ **525,000 members**
 - ✓ **32 Medical Centers in the District of Columbia, Maryland and Virginia**
 - ✓ **875 full and part-time physicians**
 - ✓ **7,000 employees**
 - ✓ **More than 450 applications that contain HIPAA-relevant information**

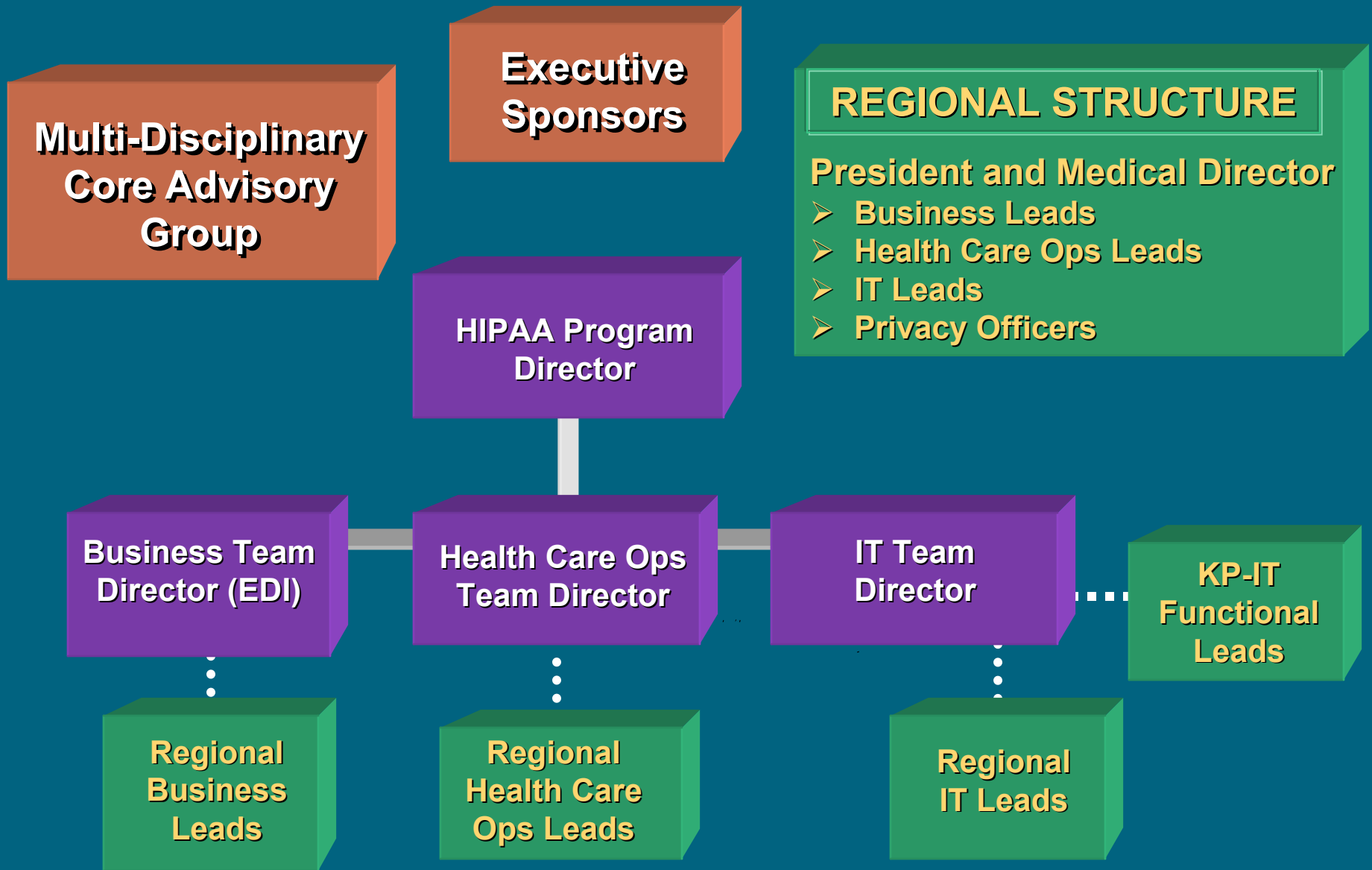
How KP Sees Itself Under HIPAA

- **KP is defining itself under HIPAA as regionally based “organized health care arrangements” (OHCA) that incorporate national functions using protected health information (PHI).**
- **This designation:**
 - ✓ **Better reflects the way KP uses PHI.**
 - ✓ **Makes it easier to know how to apply HIPAA rules.**
 - ✓ **Provides better service to our members (e.g., they receive one notice describing all uses versus several notices for different parts of KP).**

How Does HIPAA Impact KP?



The KP HIPAA Approach



Working Together on Solutions

1. Initiate Process

- HIPAA National Team drafts goals and objectives for work
- Forms multi-disciplinary, multi-regional work group that may include HIPAA leads, privacy officers, legal, subject matter experts, and others as needed.
- Drafts preliminary work products

2. Work Group Feedback and Revision Process

- Agenda and meeting materials sent
- Work group walks through materials – discussing, identifying changes and making recommendations
- National and legal test against law and revise materials
- Work group meets until process complete

Final drafts of work products forwarded to work group for closing feedback (2-4 week window)

3. Final Work Products Distributed

- HIPAA Regional Leads
- Work group members
- Privacy Officers
- HIPAA Core Advisory Group
- Other key stakeholders
- Post on KP HIPAA Web Site

How Is HIPAA Going to Affect Frontline Operations?

- **Privacy Notice/acknowledgement may impact point of service**
- **Patients will have the right to review and copy their medical records and can ask for corrections/information to be appended**
- **New and revised policies and procedures
Privacy and Security training for all staff**
- **Sanctions for knowingly misusing or disclosing health information**

KP Has Developed Some Solutions, but Still Faces a Host of Challenges...

Privacy Notice

- **HIPAA Requirement:** Must make Notice of Privacy Practices available to KP members and patients and request written acknowledgement of receipt
- **KP Response:**
 - ✓ Mail notice and pre-printed receipts to current and new members
 - ✓ Make notices available at points of service
- **Issues:**
 - ✓ Low acknowledgement return rate
 - ✓ Confusion at point of service
 - ✓ Others?

Disclosure Accounting

- **HIPAA Requirement:** Must maintain a record for up to 6 years of how an individual's PHI has been disclosed
- **KP Response:**
 - ✓ Establish central database in each Region
 - ✓ Create electronic data feeds from existing applications using volumes of PHI (e.g., tumor registry, immunizations)
- **Issues:**
 - ✓ Accumulating disclosures could be costly if done manually
 - ✓ Storage capacity (electronic versus paper)
 - ✓ Others?

Facility Directories

- **HIPAA Requirement:** Must comply with patient restrictions of uses or disclosure of PHI maintained in patient directories in both inpatient and outpatient settings
- **KP Response:**
 - ✓ Modify surgery scheduling systems to flag patient information that should not be shared, if application does not already have that feature
- **Issues:**
 - ✓ Outpatient facilities may not use surgery scheduling systems
 - ✓ Others?

Confidential Communications

- **HIPAA Requirement:** Must accommodate reasonable requests by individuals to receive PHI information at alternative locations by alternative means
- **KP Response:**
 - ✓ Modify applications that mail appointment reminders and lab results
 - ✓ Develop database that maintains alternative addresses and intercepts mailings of high-priority communications
- **Issues:**
 - ✓ Handling of other sensitive communications (explanation of benefits, behavioral health, prescriptions)
 - ✓ Others?

Business Associates

- **HIPAA Requirement:** Must get assurance that business associates safeguard PHI
- **KP Response:**
 - ✓ Conducted training with contract owners in Regions and National on new contract template language
 - ✓ Have contract owners ensure template language is incorporated into existing, new and renegotiated contracts
- **Issues:**
 - ✓ Must conduct periodic audits of contracts
 - ✓ Others?

Marketing

- **HIPAA Requirement:** Must obtain authorization for HIPAA-defined marketing activities except for communications about health-related products or services
- **KP Response:**
 - ✓ Make minor changes to existing communication practices when they fall under HIPAA marketing definition
- **Issues:**
 - ✓ Maintaining awareness of HIPAA rules as new opportunities to communicate with members arise

Policies and Procedures

- **HIPAA Requirement:** Must document HIPAA policies and procedures to ensure compliance
- **KP Response:**
 - ✓ Identify which policies will be national polices, to be maintained by KP National Compliance
 - ✓ Create approval process that includes Regional input and review
 - ✓ Use these policies to shape the development of procedures at a Regional level
- **Issues:**
 - ✓ Changes required by stricter state laws would prevent standardized approach to compliance
 - ✓ Others?



Privacy and Security Training For All Staff and Physicians

- **Training is vital as it must also take into account any stricter state laws, which override federal rules. And it must be tracked.**
 - ✓ **HR policies must include Privacy/Security guidelines**
 - ✓ **Training delivery options include self-paced workbooks, e-learning modules, video, and instructor-led**
 - ✓ **Content must be role-based and incorporate KP-specific policies and procedures**
 - ✓ **Develop implementation template Regions can customize**

Training Communication Themes

- **The goal is a consistent message across KP to help staff “Get Hip to HIPAA.”**
 - ✓ **Patient Privacy Is a Right – Protecting It Is the Right Thing to Do**
 (“How is patient information handled on white boards, charts, phone messages and computer screens? Keep any PHI you might come across to yourself.”)
 - ✓ **Making Common Sense Common Practice**
 (“Keep computer password confidential by not sharing it with others.”)
 - ✓ **Protect Patient Information as if It’s Your Own**
 (“Don’t discuss patient information in common areas such as hallways, elevators or waiting rooms.”)
 - ✓ **What Information Do I Need to Know?**
 (“Use only as much information as needed to accomplish the task.”)

To Keep KP's Privacy Efforts on Track...

Privacy Officer's Role

- Each Region has designated a Privacy Officer, who will have a dotted line to KP National Compliance. This provides a community of privacy experts sharing best practices and striving for consistency when appropriate.
- Duties vary but all include:
 - ✓ Develop/maintain privacy program/plan
 - ✓ Develop policies and procedures
 - ✓ Ensure compliance with federal/state law
 - ✓ Monitor systems development
 - ✓ Oversee privacy training/awareness
 - ✓ Collaborate on development sanctions
 - ✓ Plan for reporting concerns/violations
 - ✓ Risk assessments
 - ✓ Investigate breaches
 - ✓ And more ...



Contributing to the Success of HIPAA at Kaiser Permanente

- **HIPAA and patient privacy are in alignment with KP values**
- **Active national and regional sponsorship**
- **Dedicated national and regional HIPAA teams**
- **Multi-disciplinary approach**
- **KP is a “learning” organization**
- **Our 55-year history of providing high-quality health care service to diverse populations**

Questions?

- **KP HIPAA Web Site:**
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