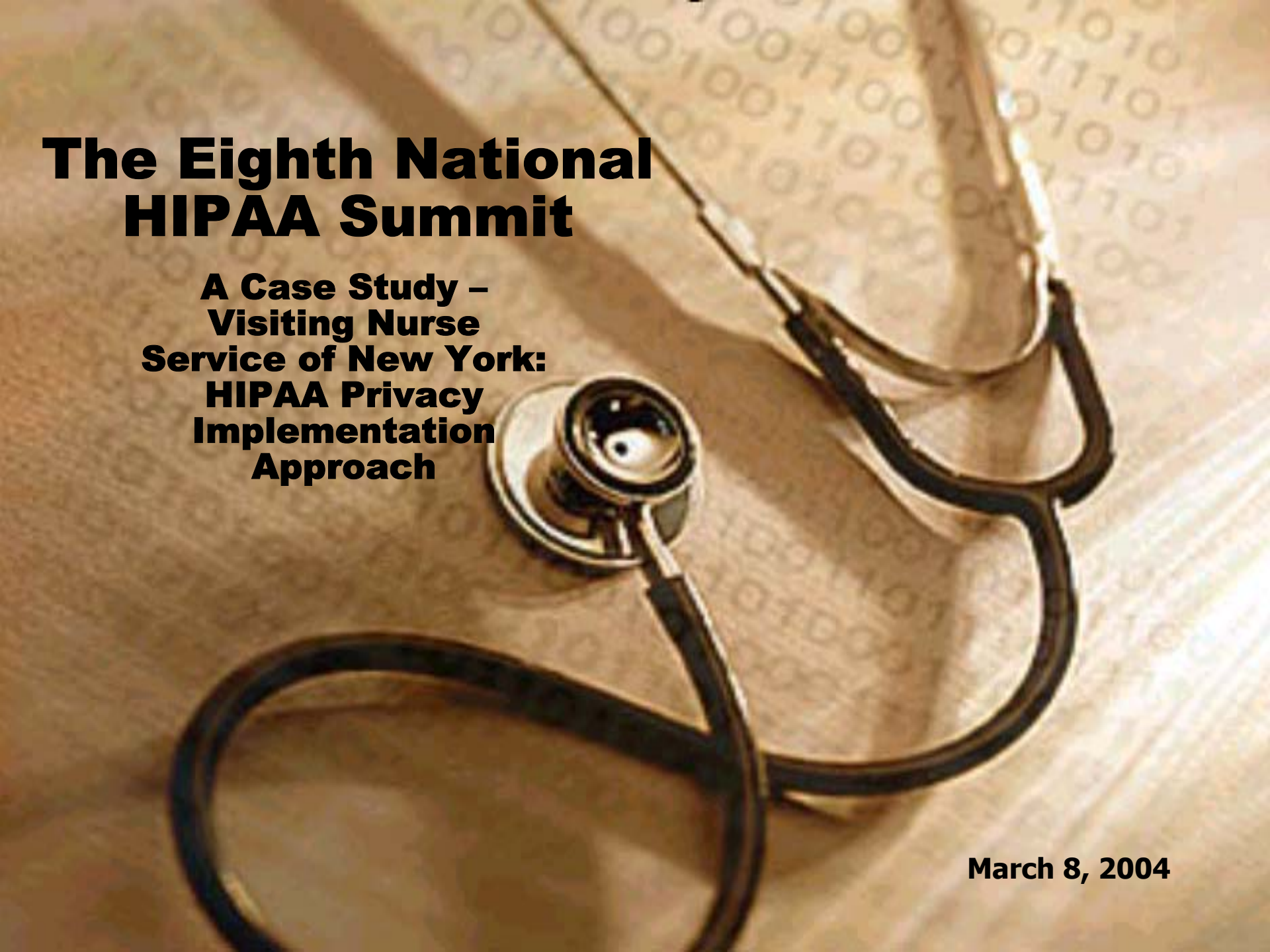

The Eighth National HIPAA Summit

A Case Study – Visiting Nurse Service of New York: HIPAA Privacy Implementation Approach

March 8, 2004

Introduction

Introduction - Speakers

Visiting Nurse Service Of New York
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Our speakers today lead the VNSNY HIPAA implementation program and include individuals from VNSNY and Deloitte.

Speaker	Role	Presentation Sections
Roxlyn Woosley	Chief Privacy Official, VNSNY	Introduction, Implementation Challenges
Yelena Patish	Performance Improvement Specialist, VNSNY	Practical Example
Jack Scott	Senior Manager, Deloitte	Approach and Methodology

Introduction - VNSNY

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The Environment

- Largest non-profit home health care agency in the nation with approximately 10,000 employees, including:
  - Registered Nurses: 2,100
  - Rehabilitation Therapists: 500
  - Social Workers: 450
  - Home Health Aides: 4,700
- VNSNY's covered entities include a health plan and health care providers
- Six regional offices coordinate home and community-based services to over 24,000 patients in New York City and Nassau County

The Services

- Acute Care
- Long-Term Home Health Care
- Rehabilitation Services
- Family Care Services
- Hospice Care
- Two licensed home care agencies
- Congregate Care/Wellness Program
- VNS CHOICE Health Plan
- Geriatric Care Management & Assessment
- Community Mental Health
- Children and Family Services
- Infusion Services

Introduction - Today's Objectives

- Review VNSNY's business philosophy toward privacy compliance
- Provide an overview of the HIPAA implementation approach and methodology
- Discuss a Practical example of one of the implementation projects
- Discuss Implementation Business Challenges
- Questions and Answers

Introduction - VNSNY Philosophy

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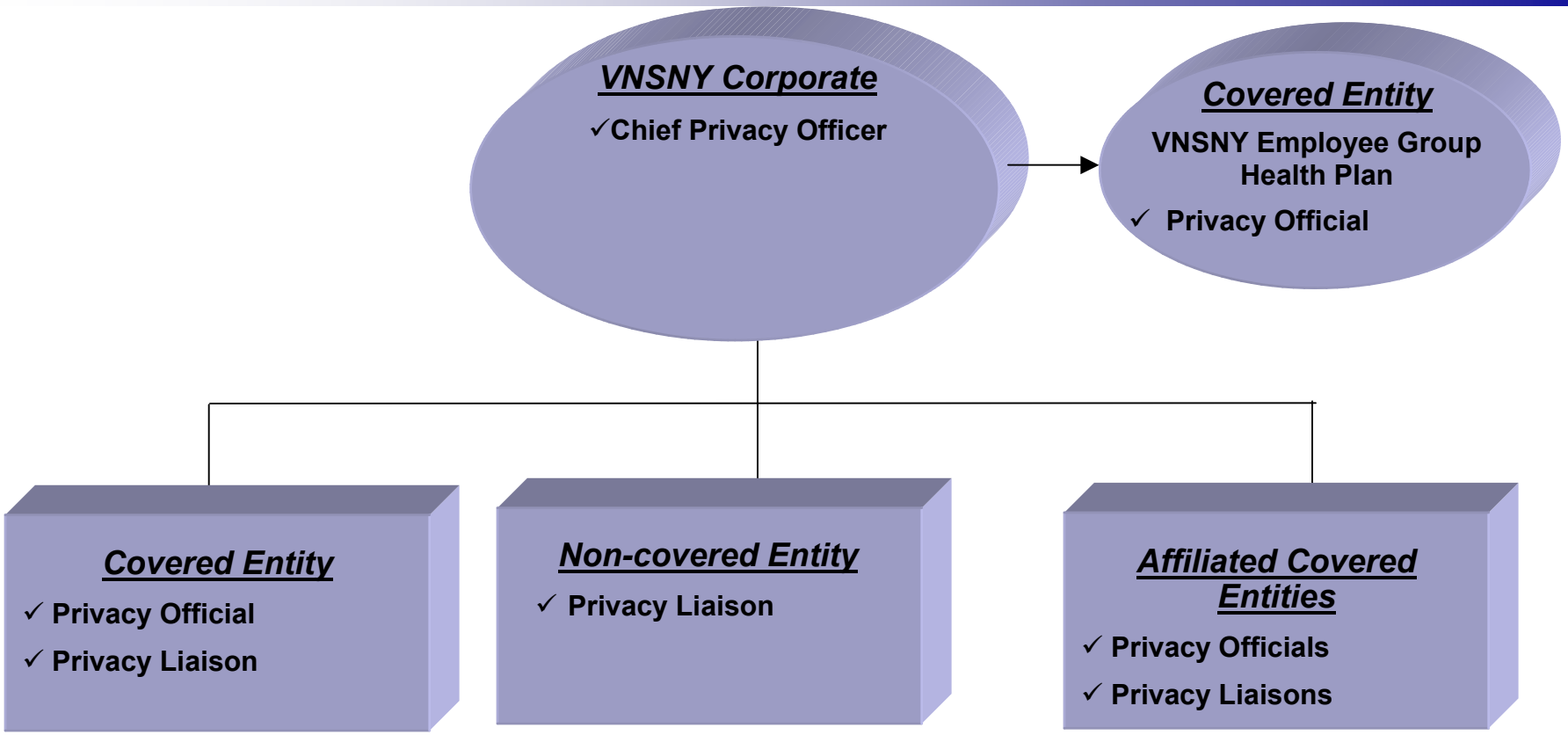
VNSNY has developed underlying principles in approaching privacy compliance that balance privacy concerns and reasonable business practices

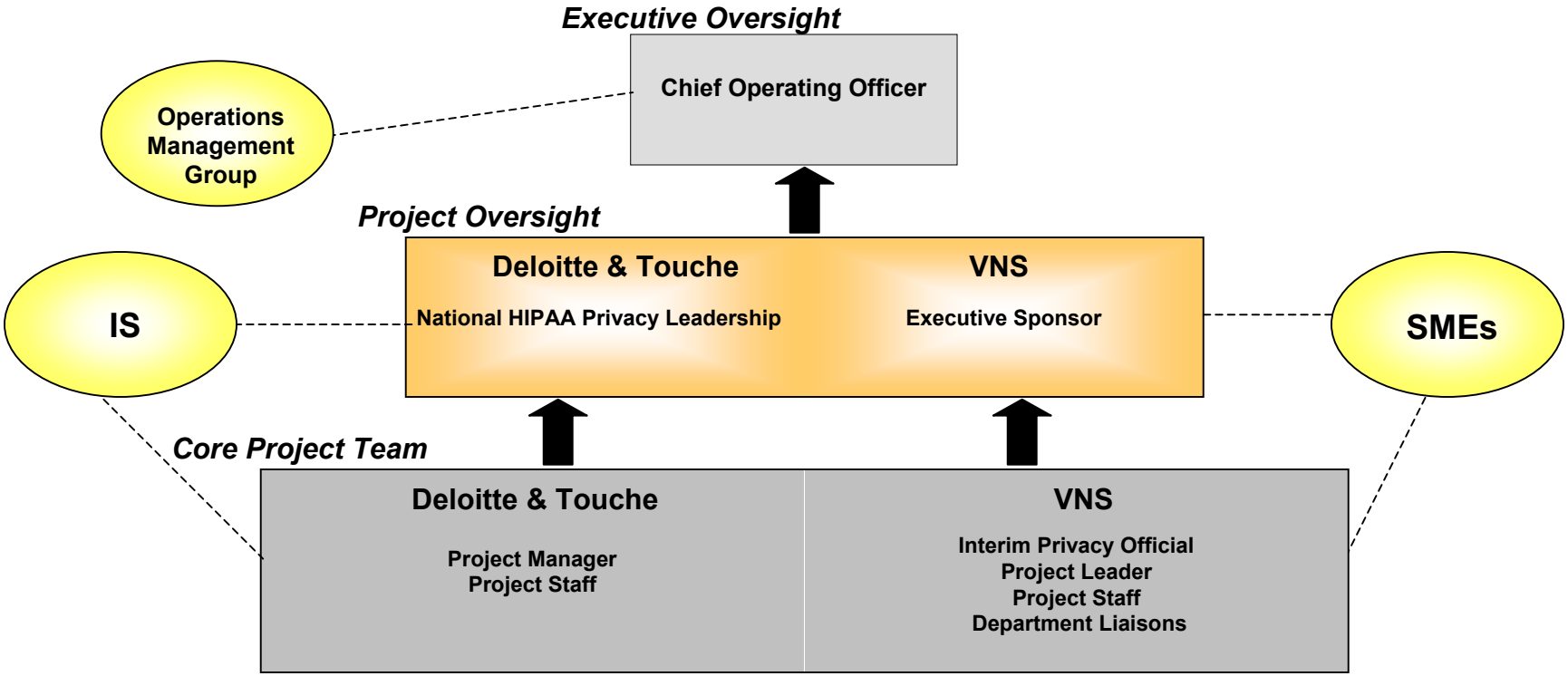
- Protect the privacy of our patient's PHI because it is and has been "the right thing to do" and now is regulated by law
- Maintain a "practical" business approach in the development of privacy solutions
- Develop business practices that are consistent with the HIPAA privacy requirements for safeguarding health information
- Build continuing compliance capability
- Delegate project task and activities to the department level, balancing centralization and decentralization of responsibilities
- Maintain the bridge between Security and TCI
- Adopt a broad approach to defining "TPO" and a practical approach to the Designated Record Set

VNSNY HIPAA Organizational Chart



Organizational Structure - Privacy Implementation Team

The Project Team was created to work with management, business units, Subject-Matter Experts (SMEs), and Information Systems (IS) to develop and implement VNS' Privacy Policies and Procedures



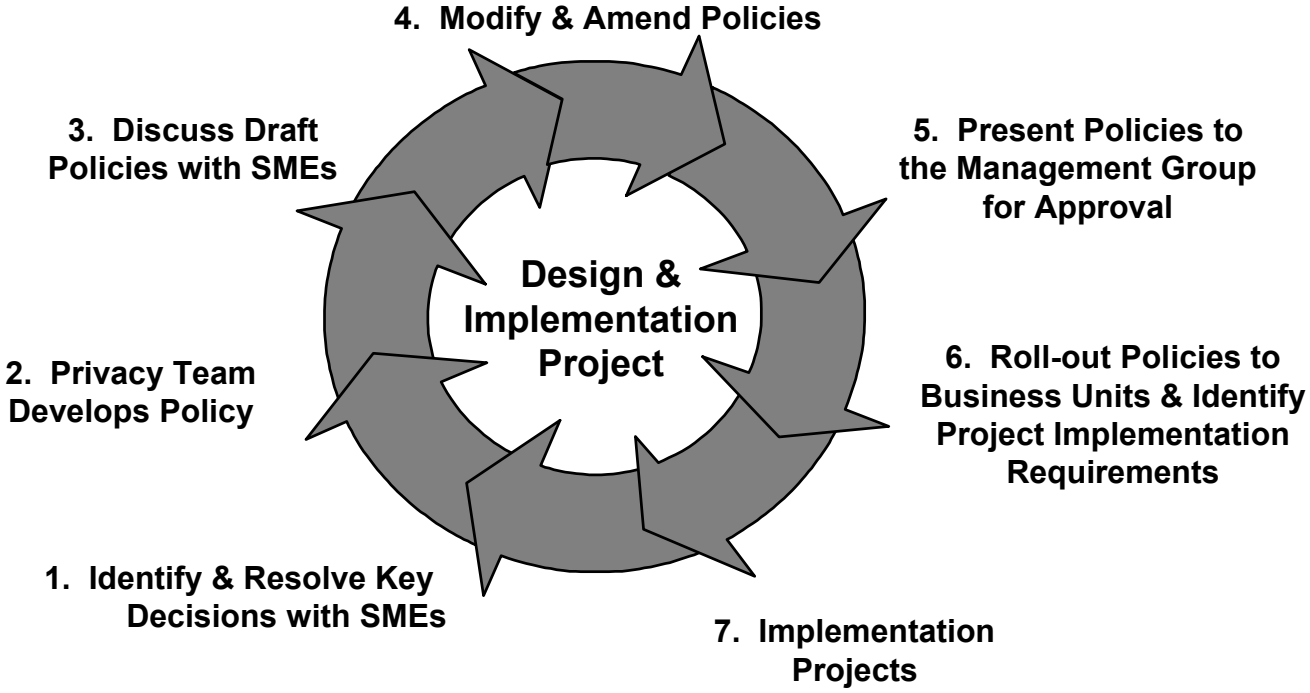
The core project team consists of 5 full-time and 3 part-time members

Approach and Methodology

Project Approach – Phase I

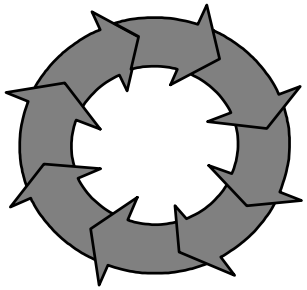
A cyclical approach is used for the implementation of the privacy regulations for VNSNY

- Identify and resolve key decisions VNS must make to guide the organization's privacy protocol
- Develop Corporate Privacy policies
- Identify VNS project implementation requirements
- Roll out approved policies to the business units for implementation
- Monitor progress with management group
- Provide guidance, support and direction to business unit implementation efforts (PMO approach)



Project Scope – Phase I

- **Policies were bundled into "like" groups**
- **Each group was addressed concurrently within the same "cycle"**



Group 1:

1. Complaints
2. Monitoring
3. Employee Training
4. Privacy Notice

Group 2:

1. Minimum Necessary
2. Verification of Identity & Authority
3. Disclosures
4. Permitted Disclosures
5. Public Good Disclosures
6. Research
7. Fundraising
8. Marketing
9. De-Identification
10. Limited Data Set
11. Authorizations
12. Disclosure Accounting

Group 3:

1. Restrictions on Use &/or Disclosure
2. Waiver Prohibition
3. Business Associates
4. Plan Sponsors
5. Policies & Procedures
6. Record Retention

Group 4:

1. Access to Records
2. Amendment of Records
3. Designated Record Set

Phase I Project Timeline

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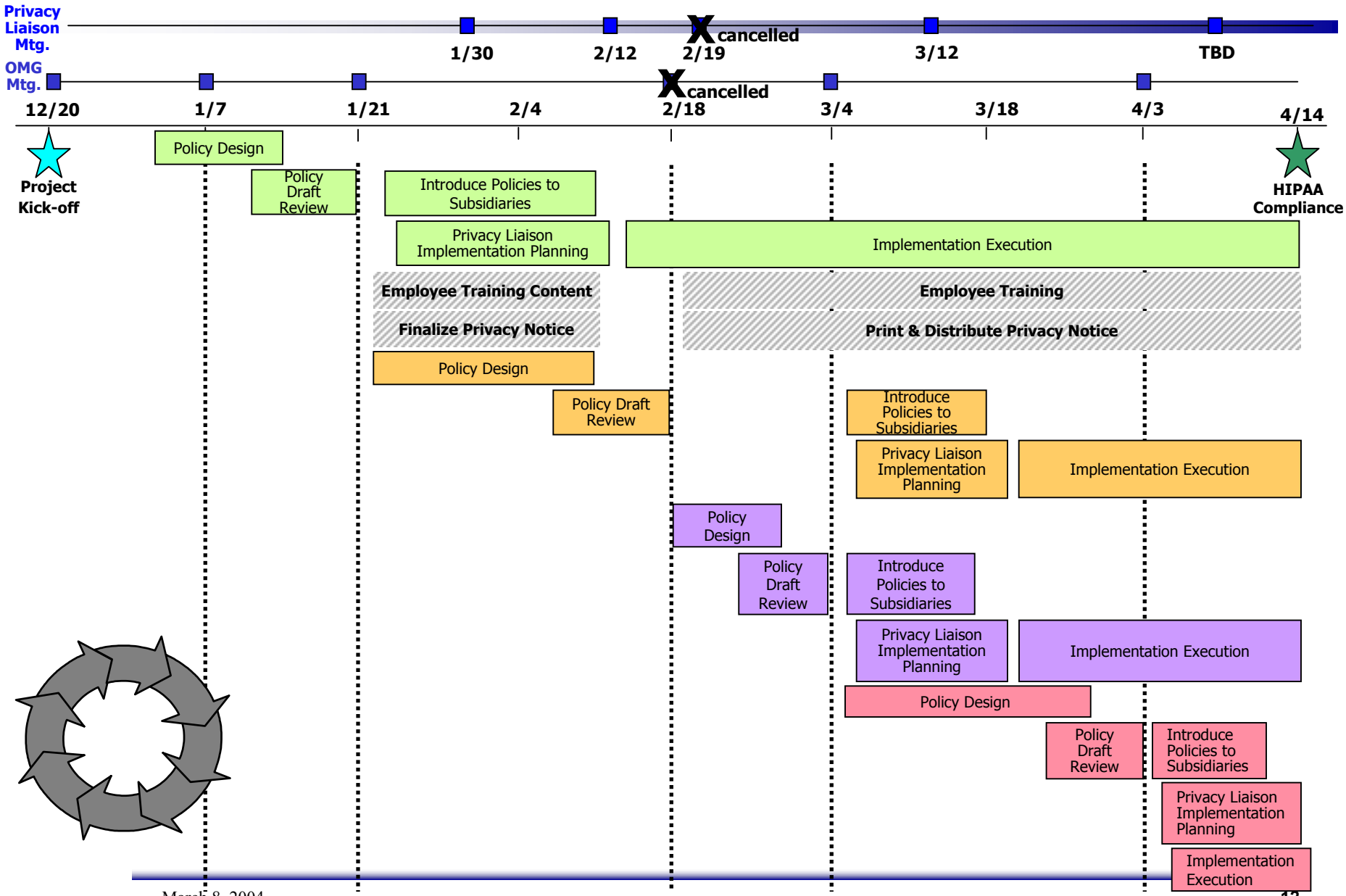

Phase I Dashboard (sample)

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Implementation progress is monitored at the corporate, subsidiary and business unit level

B *Completed*

Y *Delay likely*

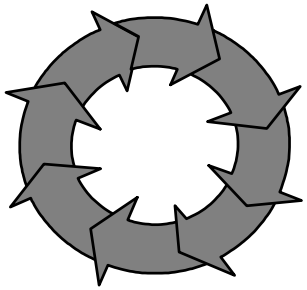
G *On-schedule*

R *Behind Schedule*

(A) Privacy Policy	(B) Approval of Policy		(C) Introduce Policy to Subsidiaries		(D) Implementation Plan Developed		(E) Implementation Initiated		(F) Implementation Complete	
	Target Date	Status	Target Date	Status	Target Date	Status	Target Date	Status	Target Date	Status
GROUP 1 Policys										
Designation of Entity Status	12/20/202	B	N/A		N/A		N/A		N/A	
Privacy Office *(Designation of Privacy Official/Liaison)*	1/7/2003	B	N/A		N/A		N/A		N/A	
Privacy Notice	1/21/2003	B	1/31/2003	B	2/12/2003	B	2/12/2003	B	4/14/2003	B
Employee Training	1/21/2003	B	1/31/2003	B	2/12/2003	B	2/12/2003	B	4/14/2003	B
Complaint Process	1/21/2003	B	1/31/2003	B	2/12/2002	B	2/12/2002	B	4/14/2003	B
Monitoring	1/21/2003	B	1/31/2003	B	2/12/2003	B	2/12/2003	B	4/14/2003	B

Project Scope – Phase II

- **Projects were bundled into project threads**
- **Each group was addressed concurrently within the same "cycle"**



Disclosure Implementation Projects:

1. Routine and Non-Routine Disclosure Process
2. Authorization
3. Disclosure Tracking

Individual Rights Projects:

1. Access and Amendment of Records
2. Confidential Communications and Restrictions
3. Designated Record Set

Relationships With Third Parties Project:

1. Business Associate Agreements

Minimum Necessary Use & Disclosure Project:

1. Minimum Necessary Access

Phase II Project Time Line

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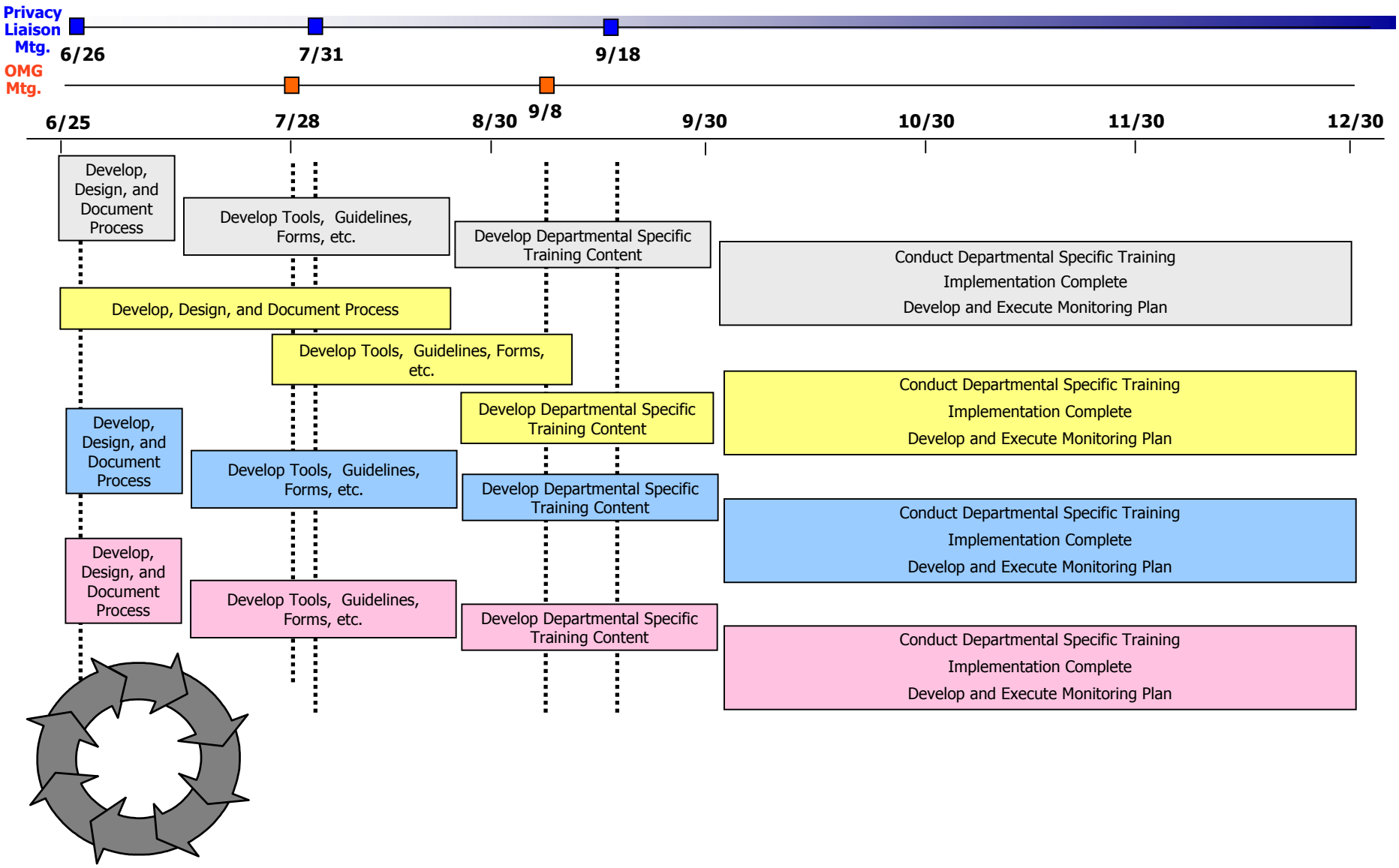

Phase II Dashboard (sample)

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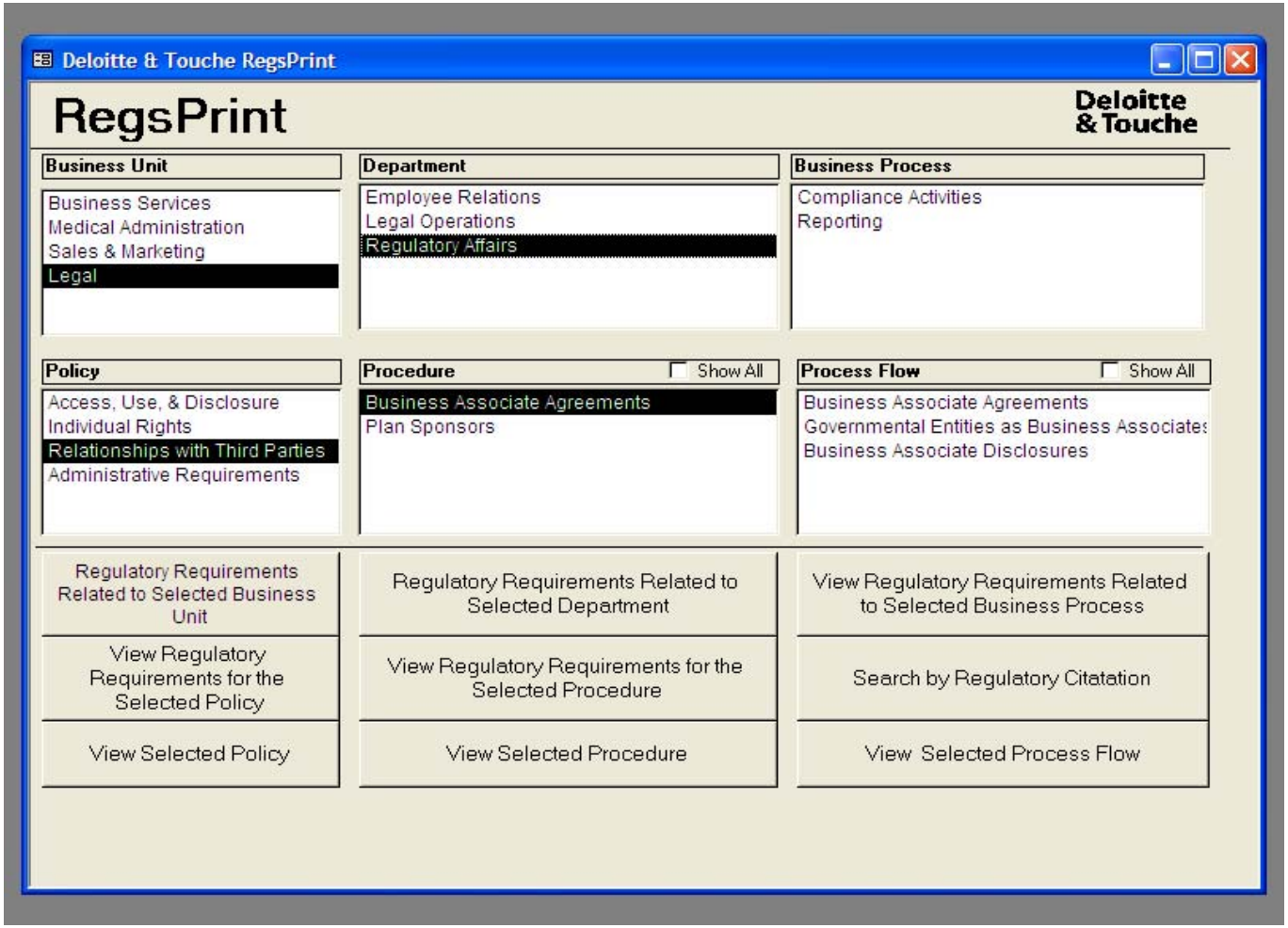
B — Completed
Y — Delay likely
Crosses Security
G — On-schedule
R — Behind Schedule

(A) Implementation Activities	(B) Develop, Design and Document Process		(C) Develop Tools, Guidelines, Forms, etc.		(D) Develop Departmental Specific Training Content		(E) Conduct Departmental Specific Training		(F) Initial Implementation Complete	
	Target Date	Status	Target Date	Status	Target Date	Status	Target Date	Status	Target Date	Status
Disclosure Implementation Projects										
Routine & Non Routine Disclosure Process	7/25/2003	B	8/22/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Authorization	7/25/2003	B	8/22/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Disclosure Tracking	7/25/2003	B	8/22/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Individual Rights Projects										
Access and Amendment of Records	7/25/2003	B	8/22/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Confidential Communications and Restrictions	8/22/2003	B	9/12/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Designated Record Set	N/A	N/A	8/22/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Relationships with third Parties										
Business Associate Agreements	7/25/2003	B	8/22/2003	B	9/30/2003	B	12/30/2003	B	2/16/2004	G
Minimum Necessary Use and Disclosure										
(l) Minimum Necessary Access*	7/25/2003	Y	8/22/2003	Y	9/30/2003	Y	12/30/2003	B	2/16/2004	G

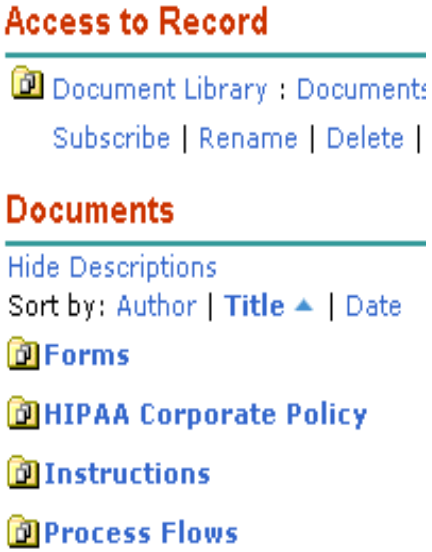
RegsPrint

- ✓Compliance management tool
- ✓Identifies operational “touch points” to compliance risk elements



Virtual Project Office

- In an effort to keep the organization informed and involved on HIPAA news and pertinent information, the HIPAA Privacy Team developed the VNS HIPAA Virtual Project Office (VPO)
- The VPO is part of the VNS Intranet Portal that functions as an online project office. All HIPAA related documentation is posted on this site for employee accessibility



Practical Example - Disclosures

Disclosure Implementation Summary Work Plan

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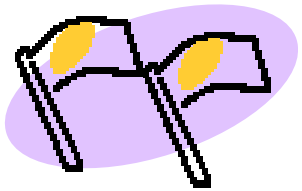
- Develop list of routine disclosures typical of day to day business activity
- Analyze disclosures based upon Privacy requirements
- Develop Non routine Disclosure Review Process
- Develop Disclosure Authorization Process
- Develop Disclosure Tracking Process
- Develop Guidelines, summary documents to be used by managers and employees
- Develop and implement Technical Solutions
- Conduct Procedure Specific Training

HIPAA Flag and HIPAA Tab

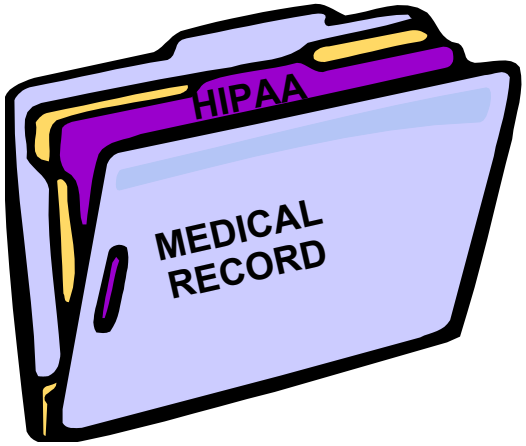
- The HIPAA Flag and HIPAA Tab concepts were developed to assist VNSNY staff with a tool to track, and monitor the required elements of the HIPAA Privacy law

- The following "HIPAA flags" were created for compliance:
  - H1: Restrictions and Confidential Communications
  - H2: Designation of a Personal Representative
  - H3: Authorization
  - H4: Disclosure Tracking
  - H5: Disclosure Accounting
  - H6: Request for Access to Record
  - H7: Request for Amendment to Record
  - H8: Marketing OPT Out – (This field will only be used by the marketing and fundraising department)

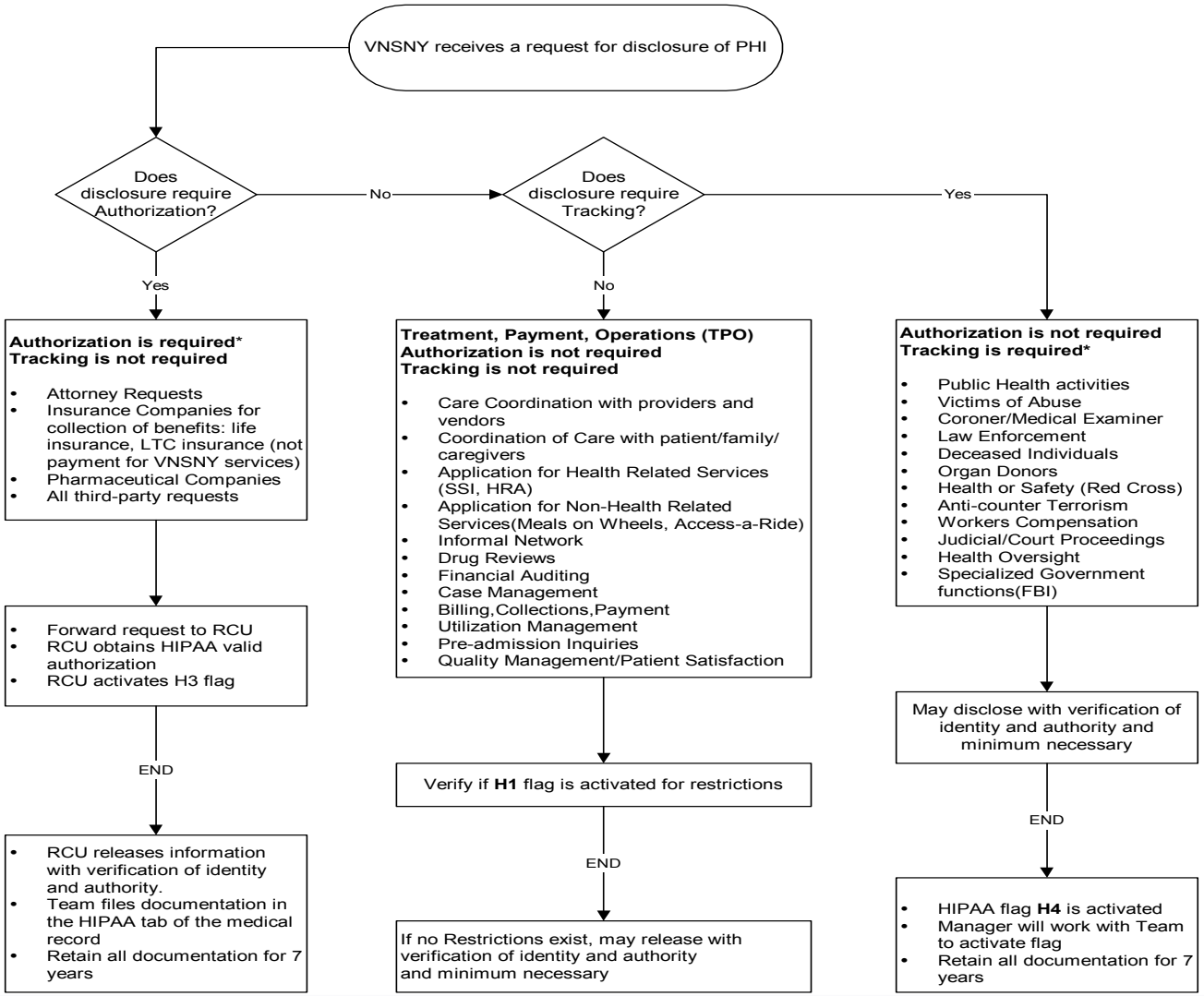


HIPAA Flag and HIPAA Tab

- A “HIPAA tab” has been developed to be inserted in the patient’s medical and billing record
- The HIPAA tab will contain all HIPAA related correspondence and forms for any patient that exercises one of their individual rights, or if VNSNY discloses PHI



Disclosure Guidelines for Management (sample)



Patient Rights Guidelines for Managers (sample)

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Patient Right	Definition	Individuals Responsible	HIPAA Flag
Restrictions & Confidential Communication	Patients have the right to restrict who VNSNY can disclose their information to Patients have the right to request to receive communication in an alternate matter	Privacy Official is responsible for reviewing and processing all requests Patients need to submit their requests in writing to the Privacy Official Privacy Official will work with the manager to determine if request will be approved or denied	**H1** **Manager will work with team to activate flag** Team will be responsible for filing all written documentation in the HIPAA Tab
Disclosure Accounting	Patients have the right to request an accounting of their disclosures	Manager or supervisor will be responsible for reviewing request Manager or supervisor will work with the team to determine what disclosures have been made Manager or supervisor will be responsible for completing a letter to be sent to the patient, responding to their request	**H5** **Manager will work with team to activate flag** Team will be responsible for filing all written documentation in the HIPAA Tab
Access To Record	Patients have the right to request access to their record or PHI	Regional Compliance Unit will be responsible for reviewing and processing request Patients need to submit their request in writing to the Regional Compliance Unit	**H6** **Regional Compliance Unit will be responsible for activating flag.** Team will be responsible for filing all written documentation in the HIPAA Tab

Implementation Challenges

Privacy Implementation Challenges - Internal

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I. CULTURAL SHIFT
- RAISING AWARENESS OF ALL STAFF, ESPECIALLY NON-CLINICAL, CUSTOMER SERVICE STAFF
  - Minimum Necessary
  - Handling Family Member Inquiries
- KEEPING PATIENT INFORMATION PRIVATE IN THE COMMUNITY
  - Nurses and therapists carrying patient information
  - Patient information in the patient's home
- Lack of standardization in a large decentralized organization

II. MEDICAL RECORDS
- What is treatment, payment, and operations (TPO), and what is not?
- Disclosure
  - Disclosure Tracking
- Verification and/or authorization

Privacy Implementation Challenges - External

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III. BUSINESS ASSOCIATES

- Who are VNSNY business associates?
- When is VNSNY a business associate?
- Define BA relationships
- Developing and centralizing contract management database
- Incorporating workload with no additional resources

IV. SHARING INFORMATION FOR REFERRING PATIENTS FOR HOME CARE

- Clarifying when this is a provider to provider relationship
- Concerns and fears in the marketplace and community

Privacy Implementation Challenges - External

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V. BUSINESS CONSIDERATIONS

- Tendency for many trading partners to “disrupt” operation
  - “Deer in the headlights” affect
  - Lack of understanding of the Privacy rule
  - Requires additional resources to conduct operations

Contact Information

Visiting Nurse Service Of New York
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Please feel free to contact us for further discussion

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Questions ?

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