

# HIPAA Privacy for Pharma

Audioconference 5/29/2002

# **Faculty**

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## Audioconference Agenda

- 1:00 pm Introduction
- 1:05 pm Overview (Bill)
- 1:10 pm Update on Privacy and the Impact on the Pharmaceutical Sector (Bill)
- 1:20 pm Impact of HIPAA on Clinical Research (Julie)
- 1:40 pm Business Associates and other Legal Issues (Kevin)
- 1:55 pm The Privacy Officers Perspective (Jean Paul)
- 2:10 pm Questions for the Panel
- 2:30 pm Adjournment

## Overview of Audioconference

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Agenda and Faculty Materials posted on: <a href="https://www.HIPAAAudioconferences.com">www.HIPAAAudioconferences.com</a>

Problems? Get materials by E-mailing: webmaster@HIPAASummit.com

CME credits in 17 categories: complete application and evaluation forms from CE page.

# **Update on HIPAA Privacy**



# HIPAA Requirements for Privacy

"Standards with respect to the privacy of individually identifiable health information ..."

- Final Rule published 12/28/2000
- Guidance issued 7/6/01.
- Compliance required 4/14/2003.
- Modifications proposed in NPRM 3/27/02.
  - Proposals decrease administrative burden on providers.
  - No change in compliance date.
  - Final rule with modifications expected by October 2002.

# 5 Principles of Fair Info Practices

#### **Openness**

 Existence and purpose of record-keeping systems must be publicly known.

#### **Individual Participation**

- Individual right to see records and assure quality of information.
  - accurate, complete, and timely.

#### **Security**

 Reasonable safeguards for confidentiality, integrity, and availability of information.

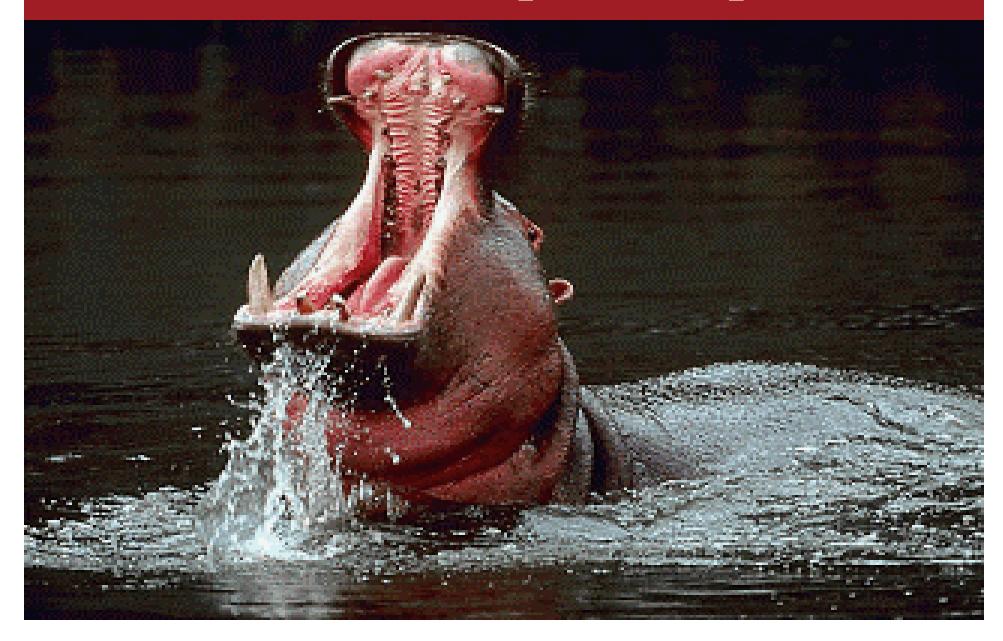
#### **Accountability**

Violations result in reasonable penalties and mitigation.

#### **Limits** on Collection, Use, and Disclosure of Information:

- Collected only with knowledge and permission of subject.
- Used only in ways relevant to the purpose for which the data was collected.
- Disclosed only with permission of subject or legal authority.

# Rule #1: Don't surprise the patient!!!



# **Key Points in Privacy Rules**

## Required disclosures are limited to:

- Disclosures to the individual who is the subject of information.
- Disclosures to OCR to determine compliance.

All other uses and disclosures in the Rule are <u>permissive</u>; i.e., information may be used <u>only</u> if specifically allowed in the rules.

Covered entities can provide greater protections if they want (for competitive edge).

## **Uses and Disclosures Allowed:**

For Treatment, Payment, & Healthcare Operations (TPO) under prior written consent.

Pursuant to and in compliance with a written, revocable authorization.

For directory and involvement in care purposes

 where individual has the opportunity to agree to or prohibit or restrict the use or disclosure.

For specific listed and controlled purposes generally in the public interest

 required by law, public health, abuse, oversight, law enforcement, threats, research, ...

# Individual's Rights

#### Individuals have the right to:

- A written notice of information practices from health plans and providers.
- Inspect and obtain a copy of their PHI.
- Obtain an accounting of disclosures.
- Amend their records.
- Request restrictions on uses and disclosures.
- Accommodation of reasonable communication requests.
- Complain to the covered entity and to HHS.

# **Administrative Requirements**

Flexible & scalable.

Good structure for privacy program.

Covered entities are required to:

- Designate a privacy official.
- Develop policies and procedures (P&P)
  - including for receiving requests for restrictions & complaints.
- Provide privacy training on those P&P to its workforce.
- Develop a system of sanctions for employees who violate the entity's policies.
- Meet documentation requirements.

# **Privacy NPRM Proposed Modifications**

A. Uses and Disclosures for Treatment, Payment, and Health Care Operations

#### 1. Consent

- 2. Disclosures for treatment, payment, or health care operations of another entity
- B. Notice of Privacy Practices for Protected Health Information
- C. Minimum Necessary and Oral Communications
- D. Business Associates
- E. Uses and Disclosures of Protected Health Information for Marketing
- F. Parents as Personal Representatives of Unemancipated Minors
- G. Uses and Disclosures for Research Purposes
  - 1. Institutional Review Board (IRB) or Privacy Board Approval of a Waiver of Authorization
  - 2. Research Authorizations
  - 3. Research Transition Provisions
- H. Uses and Disclosures For Which Authorization Is Required
- I. <u>De-Identification</u> of Protected Health Information
- J. Technical Corrections and Other Clarifications

# General Impact of HIPAA Privacy

#### **No Single Standard for Privacy**

- HIPAA preempts or supercedes all "contrary" state laws.
- **Exceptions:** 
  - HHS determination that State law accomplishes social responsibilities (fraud & abuse, industry oversight, health & safety).
  - Public health reporting.
  - State privacy law that has:
    - More restrictive use/disclosure rules.
    - Greater rights for individuals.
- HIPAA is a national floor for privacy.
- Different privacy environment in each state.
  - No ERISA preemption

#### May Exacerbate Liability

- HIPAA raises industry's "standard of care" in tort claims.
- New contractual and consumer protection theories based on
  - the terms of HIPAA,
  - Gramm-Leach-Bliley and
  - internet notices, policies, procedures, and authorizations.
- HIPAA increases awareness, media coverage and enforcement of a complex patchwork of laws, rules and standards.
  - forces everyone to get control of their channels through which individual health information flows.

# Impact on Pharmaceutical Sector

#### Availability of Information for Research

- New rules for clinical research, IRBs, de-identification
- Fear of liability may limit willingness of information providers

## Pharmacy Benefit Manager (Clearinghouse or BA)

Limits on what can be done with PHI

## Limits on Information for Marketing to Patients

 Patients may have to be told when communications are remunerated.

## Employer Health Benefit Plans (ERISA)

May need to make changes as HIPAA covered entities

## Resources

#### Administrative Simplification Web Site:

- http://aspe.hhs.gov/admnsimp/
  - posting of law, process, regulations, and comments.
- instructions to join Listserv to receive e-mail notification of events related to HIPAA regulations.
- submission of rule interpretation questions.

#### National Committee on Vital and Health Statistics

ncvhs.hhs.gov

#### Centers for Medicare and Medicaid Services

www.cms.hhs.gov/hipaa/

## Workgroup on Electronic Data Interchange

- www.wedi.org
- snip.wedi.org

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