Achieving Continuous HIPAA Compliance

Tips & Tricks

Gary Swindon RiskWatch, Inc.

Achieving Compliance

- Compliance Rules & Characteristics
- > The Keys to Achieving Compliance Goals
- The Other Interested Groups
- Steps to Creating a Common Focus-for Superior Results
- Sleeping Well at Night-or: 'Do You Know Where Your Data Is?'
- Compliance as a Way of Life

Compliance Rules & Characteristics

- Rule #1: If you believe that you can achieve compliance once-for all time; you are doomed and YOU WILL FAIL!
 - Decide to change your mindset now and the mindset of those around you
 - Be willing to look beyond HIPAA compliance and those who have been 'blessed' with Privacy & Security duties as a result

Get to Know the 'Rules'

Regulation	HIPAA	SOX	GLBA
Regular Risk Assessment	Explicitly Required	Implicitly Required (Section 404)	Explicitly Required
Quantitative Vs Qualitative	Quantitative Implied	Quantitative Implied	Quantitative Implied
Regular Audit Required	Yes Non- financial Compliance*	Yes	Yes

HIPAA Security Rule

Governing Standards Safeguards Principles Addressable Administrative Cost Required Technical Capability Physical •Resources Suitability Documentation Risk Management

Regular Evaluations

HIPAA Privacy Rule

Governing Principles

Exceptions

Standards

- -Protection
- -Notice
- -Consent
- -Patient Best

Interest

- -Treatment
- -Payment
- -Operations
- -Legal

-Need to

Know

-Minimum

Necessary

HIPAA Transactions & Code Sets Rule

Governing Principles



-Standard
Data Formats
-No Vendor
Unique Items

Transactions

- -270/271 Elig.
- -276/277 Status
- -278 Review
- -820 Payroll
- -834 Enrollmnt.
- -835 Advice
- -837 Claim

Standards



- -ICD-9-M
- -NDC
- **-CPT-4**
- -ADA

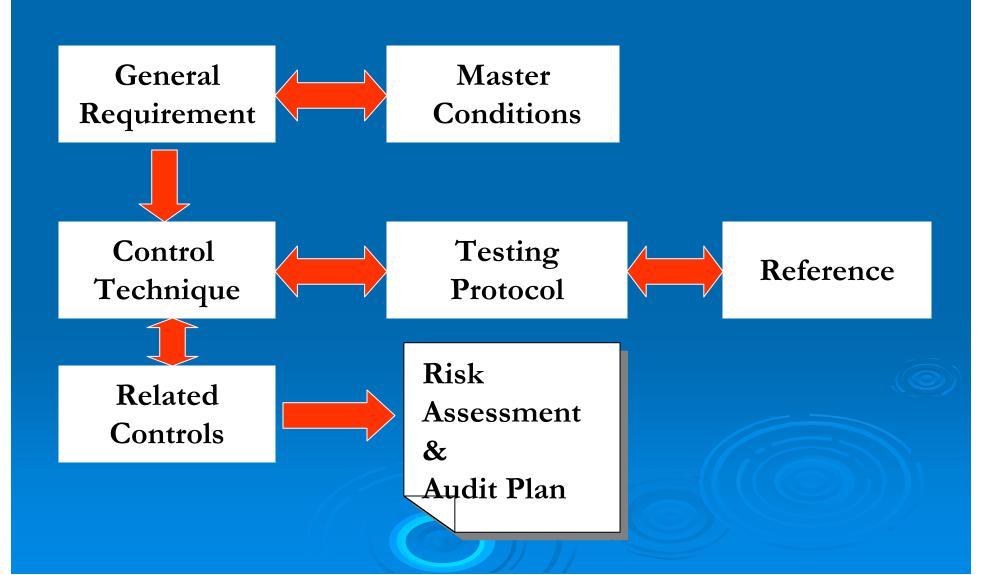
Compliance Rules & Characteristics-Continued

- Rule #2: Continuous compliance is a process not a destination.
 - Starting and stopping a program only breeds confusion w/o lasting beneficial results
 - Remember that processes also require measurement; like all good stories they have a beginning, a middle and an end for clearly defined goals

'The' Compliance Process

Risk Assessment **Audit** Governance Replicate Assets Testing Sustain Threats Measurement Maintain Vulnerabilities Scorekeeping Losses (Business Controls Process) (Safeguards)

Building Controls-The Process



Compliance Rules & Characteristics-Continued

- Rule #3: If you believe that you can do it by yourself you need clinical help.
 - It truly does not matter how effective you are in your job-you are one person
 - You can be a beacon, a guide, and a focal point but; others will determine your success

Compliance Rules & Characteristics-Continued

- > Rule #4: Checklists are not compliance.
 - The most critical aspect of continuous compliance is risk assessment; without it you are flying blind (paragraph 164.308 requires both risk assessment and risk management)
 - You need a stable base from which to measure your success

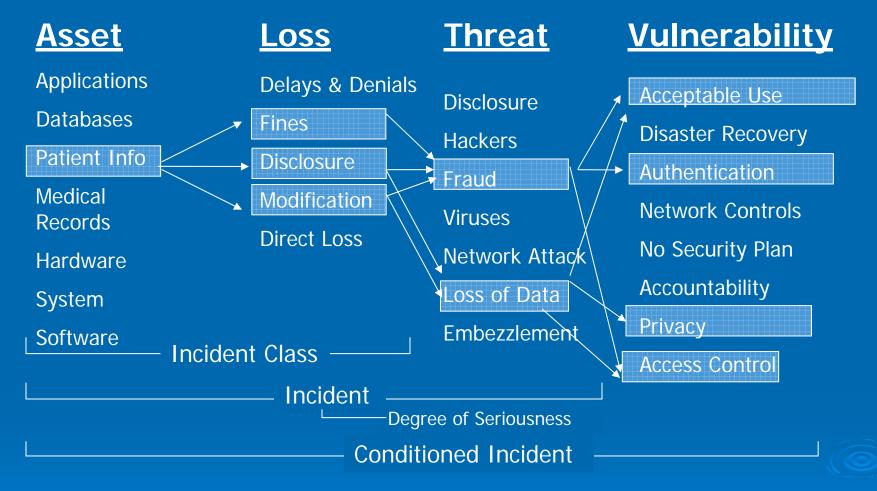
The Keys to Achieving Compliance Goals

- > As the song says: 'Get a plan Stan'
 - Document your goals and expected outcomes
 - Pay attention to the baseline HIPAA rules: but don't neglect other laws etc.
 - Identify those who will gain and lose from the effort
 - Get senior management buy in
 - Document the financial and organizational impacts from your efforts

The Keys to Achieving Compliance Goals-Continued

- > Perform a good risk assessment:
 - Ideally, it should be quantitative not qualitative
 - The results should provide things you need:
 - Identify weaknesses, threats, & exposures
 - Identify mitigation efforts
 - Identify potential costs of mitigation
 - Identify the level of risk that the organization is willing to accept
- Provide a stable 'baseline' from which to measure the impact of your efforts

The 'Links'



Risk = Asset # Loss # Threat # Vulnerability

The Keys to Achieving Compliance Goals-Continued

- Tie the desired outcomes to the efforts of others-where should help come from?
- > Get resources committed to the process:
 - Management Support
 - People
 - Money
- Provide feedback and measurement

The Other Interested Groups

- Remember that there are others with a goal set similar to yours-and they can help:
 - Internal Audit
 - Information Security
 - Privacy Group
 - Patient Care Advocates/Patient Care Coordinators
 - Human Resources
 - Health Information Management
 - EDI Support Group/Activity

Steps to Creating a Common Focus-for Superior Results

- > Committees can help do the work
 - Standing Committees: Privacy, Security & Policy
 - Involve senior directors/managers-NOT VPs
 - Don't forget the clinical side
- Useful education focused on the common goals
 - Training, Education, Awareness; who gets what & when; home vs work PCs etc.
 - Remember HIPAA says everyone gets educated; there are no exceptions

- Establish a HIPAA Privacy & Security Liaison Program:
 - Management level people
 - All areas of operations including food service
 - Assigned as an additional duty
 - Conducts quick checks on departments
 - No set schedule but set goals for the number of assessments
 - Collect the results and report them

- Participate in awareness events or become the catalyst for them:
 - AHIMA and others have a National Week declared for healthcare related activities
 - Combine observances such as Compliance Week etc. into a once a year activity
 - Set up a booth or table near cafeterias; give away prizes for completing compliance puzzles
 - Give away candy or key chains etc. ask questions at random on HIPAA issues

- Start a voluntary HIPAA assessment/evaluation program:
 - No blame activities; blame kills participation
 - Business units can request the Privacy & Information Security Officer do a walk through
 - Educational support for on the spot corrections
 - Include 'Dumpster Diving' activities (sometimes called the latex glove approach)

- Tie the compliance program to the internal audit program:
 - The common basis for both should be the risk assessment process
 - Formalizes critical compliance monitoring as one more set of 'eyes & ears'
- Create & publish a Compliance Bulletin:
 - Privacy, Security, Compliance & Internal Audit news and tips: make it a resource for everyone

Sleeping Well at Night-or: 'Do You Know Where Your Data Is?'

- Acknowledge that most of your information is on or stored in a computer:
 - Technical evaluation of the IS/IT risk is also necessary
 - Tie the technical security manager to the Corporate Information Security Officer at least on a dotted line
 - Require regular monitoring and reporting on the technical risks to your information

Sleeping Well at Night-or: 'Do You Know Where Your Data Is?'

- Organize for success: (if possible)
 - Move Privacy, Security, Compliance & Internal Audit into the same organization
 - Have the organization report to the audit/or management committees of your board
 - Require quarterly reporting on all compliance activity to the full board
 - Give the organization its own legal counsel independent of any corporate legal group

Compliance as a Way of Life

> Remember:

- Your organization's size does not matter when it comes to compliance
- You can have a continuous compliance program but you have to work at it
- You cannot have an effective program without good risk assessments
- You have to be willing to try new ideas and you have to support them

Questions?

gswindon@riskwatch.com

410-224-4773 x-121