

Health Insurance Portability and Accountability Act (HIPAA) of 1996

HIPAA is a federal law imposed on all health care organizations. Title II of HIPAA deals specifically with the privacy and security of patient health information that is stored, collected by, or transmitted between providers.

Protected Health Information (PHI)

Protected health information or PHI is any information in the medical record (or designated record set) that can be used to identify an individual and that was created, used, or disclosed in the course of providing a health care service such as diagnosis or treatment. PHI includes, but is not limited to: Names, Geographic location, Phone Numbers, Social security numbers, Health plan beneficiary numbers, Account numbers, Device identifiers, and full face photographic images.

Minimum Necessary

Minimum necessary is determined on a need-to-know basis, and is limited to the health information required to accomplish the intended purpose of the use or disclosures or request. CHI Saint Joseph Health workforce members may not access either through out information systems or paper chart the medical and/or demographic information of family members, friends, or other individuals for personal or other non-work-related purposes, even if written or oral patient authorization has been given.

Handling PHI – Send Secure. Store Secure. Shred Secure. Be Secure.

Send Secure. When faxing PHI, use a coversheet. When emailing PHI, use #secure# in the subject to encrypt the email. Store Secure. Keep PHI turned over when unattended. Keep files cabinets and limit access rooms locked.

Shred Secure. Dispose of PHI in approved Cintas shred bins, not trash receptacles or recycle bins. Be Secure. Speak softly when discussing PHI. Keep medical records and other documents out of public view.

Reporting Privacy Violations

Contact your Division Privacy Officer with any questions or concerns about HIPAA Privacy:

Jared Sommers, MPH, CHC
Division Director Corporate Responsibility Officer
Office Phone: 859-313-4718
jared.sommers@commonspirit.org

Protecting Patient Privacy

The privacy of our patients before, during and after their visit to any CHI Saint Joseph Health facility is highly important. Safeguarding patient privacy is a fundamental duty of all staff, contractors, volunteers and vendors of CHI Saint Joseph Health.

PRIVACY DOs

- Do remember that PHI is any information that can be used to identify a patient
- Do remember that PHI is confidential and should not be discussed with individuals or acquaintances outside of CHI Saint Joseph Health and/or are not involved in the patient's care
- Do speak quietly when discussing PHI with authorized individuals
- Do ask patients if it is okay to discuss their PHI when visitors are present
- Do dispose of PHI in approved Cintas shred bins
- Do use a fax coversheet when sending PHI via fax
- Do use #secure# in the subject line when sending PHI via email
- Do log off or lock your computer when away from your workstation
- Do contact your Department Sponsor or the Privacy Officer with any questions or concerns

PRIVACY DON'Ts

- Don't attempt to view or gain access to the medical information of family or friends
- Don't share PHI with individuals or acquaintances outside of CHI Saint Joseph Health and/or are not involved in the patient's care
- Don't post or discuss PHI on social media sites (i.e. Facebook, Twitter, Instagram, Tumblr)
- Don't take pictures or video of patients and/or staff members of CHI Saint Joseph Health
- Don't throw PHI away in the trash receptacle or recycle bin – use an approved Cintas shred bin
- Don't leave PHI lying in public view – turn over or put away unattended PHI
- Don't leave information about a patient on voicemail or an answering machine
- Don't use mobile devices (i.e. cell phones) to send PHI
- Don't discuss PHI in public areas where others can overhear