

Chiropractic Office Managers

July 13, 2011

WOW! OCR Steps Up HIPAA Enforcement thanks to HITECH Rules

I have been helping doctors respond to OCR (Office of Civil Rights) investigations. They are coming up often and doctors, you must get compliant now. It is not easy to go back and make it all up after the fact. Especially if they ask your staff, “Were you trained?” “Did you know there are personal sanctions for noncompliance?”

You, doctors, are responsible for what your CA’s and other professionals say and do concerning your patients protected health information.

The three most important things that you must do are:

- Have **written policies and procedures** on the HIPAA Privacy and HIPAA Security Laws.
- Train your staff on those written policies and procedures. They must sign an agreement stating they understand their responsibilities and the **sanctions for their non-compliance**.
- Document your compliance and maintain documentation for 6 years. (Audit trails)

READ the following NEWS RELEASE from Health and Human Services, Office of Civil Rights. You may not take care of celebrities but it does not matter how famous any one is, their privacy is protected and you are legally bound to do so.

I have highlighted the comments that you must understand. You are considered a “Covered Entity” if you transmit or store protected health information electronically.

Related Article: **HIPAA Violations and Enforcement**

http://www.iccom.org/index_files/articles.html

Are you compliant? Check and see yourself.

HIPAA Privacy Checklist http://www.iccom.org/index_files/HIPAAprivacychecklist.html

HIPAA Security Checklist http://www.iccom.org/index_files/Page1541.html

Get compliant now! http://www.iccom.org/index_files/ICCOMProducts.html

News Release

FOR IMMEDIATE RELEASE

July 7, 2011

Contact: HHS Press Office

(202) 690-6343

University of California settles HIPAA Privacy and Security case involving UCLA Health System facilities

UCLAHS to improve policies and procedures to better safeguard patient information

Following an investigation by the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR), the University of California at Los Angeles Health System (UCLAHS) has agreed to settle potential violations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy and Security Rules for \$865,500 and has committed to a corrective action plan aimed at remedying gaps in its compliance with the rules.

The resolution agreement resolves two separate complaints filed with OCR on behalf of two celebrity patients who received care at UCLAHS. The complaints alleged that UCLAHS employees repeatedly and without permissible reason looked at the electronic protected health information of these patients. OCR's investigation into the complaints revealed that from 2005-2008, unauthorized employees repeatedly looked at the electronic protected health information of numerous other UCLAHS patients.

Through policies and procedures, entities covered under HIPAA must reasonably restrict access to patient information to only those employees with a valid reason to view the information and must sanction any employee who is found to have violated these policies.

“Covered entities are responsible for the actions of their employees. This is why it is vital that trainings and meaningful policies and procedures, including audit trails, become part of the everyday operations of any health care provider,” said OCR Director Georgina Verdugo. “Employees must clearly understand that casual review for personal interest of patients’ protected health information is unacceptable and against the law.”

The corrective action plan requires UCLAHS to implement Privacy and Security policies and procedures approved by OCR, to conduct regular and robust trainings for all UCLAHS employees who use protected health information, to sanction offending employees, and to designate an independent monitor who will assess UCLAHS compliance with the plan over 3

years.

“Covered entities need to realize that HIPAA privacy protections are real and OCR vigorously enforces those protections. Entities will be held accountable for employees who access protected health information to satisfy their own personal curiosity,” said Director Verdugo.

HHS OCR enforces the HIPAA Privacy and Security Rules. The Privacy Rule gives people rights over their protected health information and sets rules and limits on uses and disclosures of that health information. The Security Rule protects health information in electronic form by requiring entities covered by HIPAA to implement physical, technical and administrative safeguards to ensure that people’s electronic protected health information remains private and secure.

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Visit my website and buy your compliance needs, Red Flags Rule: Identity Theft Prevention Manual or the HIPAA Privacy and HIPAA Security Policies and Procedures manual, as well as, the HIPAA HITECH updates for 2010.

Are You HIPAA Compliant?

http://www.iccom.org/index_files/ICCOMProducts.html

email me with any questions you may have: [\(click here to email me\)](#)