

Case Study: Burnsville Family Physicians

HIPAAAnswers™ jump-starts the Privacy compliance program at Burnsville Family Physicians

For Polly Edwards, HIPAA compliance felt like a moving target — the deeper she pried into the law, the more provisions she encountered that seemed to apply to her employer, Burnsville Family Physicians.

As the clinic's Administrative Director, Ms. Edwards launched its privacy compliance program in the spring of 2002. It didn't take her long to realize the magnitude of the task that lay ahead, or that her options were limited. Dedicate substantial staff time to develop HIPAA expertise from the ground up, or hire a consultant? Either way, the potential costs seemed onerous.

Enter HIPAAAnswers™ ...

Through her own research, Ms. Edwards found several computer-based guides that claimed they could help an organization achieve compliance. But only HIPAAAnswers™, truly met her clinic's needs.

Clinic Profile

Burnsville Family Physicians is a general family practice clinic located in a Minneapolis suburb. Eight administrative staff support six doctors and eight nurses. The clinic offers a typical range of services for its size, with additional specialized services available from contract providers who operate directly out of the clinic. The clinic's doctors maintain staff privileges at a local hospital and its primary payer relationships are established through two independent physician associations.

But Burnsville is different from other clinics in one way — it was willing to embrace change. Realizing HIPAA wasn't going away, Ms. Edwards proactively bought HIPAAAnswers™ and assigned staff to start working toward compliance.

Getting Started:
Applicability

HIPAAAnswers™ was developed for busy administrators who don't have time to debate their HIPAA compliance options. Users start off with a series of questions to determine specifically which HIPAA requirements apply to the organization.

Most of the questions are straight-forward — they can be answered by a clinic administrator without pause for reflection. Some questions, however, may require research or consultation with the clinic's attorney.

HIPAAAnswers™ first determines an organization's "covered entity" type. Burnsville was deemed a "provider." The ensuing questions determined, among other things, that the clinic:

- v processes workers' compensation claims;
- v is not part or an "organized healthcare arrangement;" and
- v does not disclose medical information for research purposes.

This exercise took Burnsville about an hour to complete, required no additional help from an attorney or consultant and yielded 60 HIPAA requirements deemed applicable to the clinic.

Step 1: Educate

HIPAAAnswers™ recommends that users review the Educate section before launching into the compliance process. It provides users with an understanding of the "big picture" with a straight-forward HIPAA summary.

At Burnsville, Ms. Edwards reviewed this HIPAA overview document on her own, and then distributed it to other senior staff. She will review the document again when providing training to staff that will have specific responsibilities under HIPAA.

Step 2: Assess

One of the most valuable features of HIPAAAnswers™ is the requirements index. Organizations can use it to establish a concise understanding of what is needed for compliance. The Index

illustrates the full scope of applicable requirements and how they're organized into related groupings, or "requirement types."

The index was also designed to allow users to "jump around" between requirements, as they learn the application and determine an order of implementation that makes sense for them.

Users can return to the index frequently to check the status of a particular requirement or to remind themselves of the project's scope. The index is accessible from the Plan and Implement sections of the application as well (steps 3 and 4).

In addition to the index, the Assess section features a question and answer section that walks the user through each requirement in the index to determine the extent to which the organization is already in compliance.

At Burnsville, they started by answering "no" to all of the Assess questions to postpone decisions about whether they were fully compliant with each requirement until they had been through the entire program.

Step 3: Plan

Having assessed its needs, HIPAAAnswers™ then guides an organization through a series of strategies and activities for completing each requirement.

The Plan section offers one of HIPAAAnswers™' most popular features: the document templates.

Organizations use the HIPAAAnswers™ templates to develop their own documents — policies, procedures, contracts, forms and event tracking documents. During implementation, users can consolidate these various documents to develop a policy set that makes sense.

In many cases, organizations will also combine their HIPAA-related practices with general policies and procedures they already have in place. The consolidated information will also need to account for State laws, which in some cases pre-empt HIPAA. Here, an attorney's assistance may be necessary.

Burnsville fit its original 60 requirements into a total of 17 policies. The policies roughly correlated to the "requirement type" groupings illustrated in the requirement index. For example, the 20 requirements regarding disclosures were combined into a single "Disclosure Policy."

Step 4: Implement

The Implement section provides a project management tool for creating implementation notes, assigning status to any requirement, and assigning task start and end dates. Scheduled tasks appear in a calendar. Users may also create custom tasks that address the specific needs of their organizations. Printable reports make it possible to distribute task assignments to staff members who do not have login access to HIPAAAnswers™.

Step 5: Update

HIPAAAnswers™ evolves as the regulations change with new legislation or court actions.

As the Burnsville project was in full swing, modifications to the Privacy Rule were adopted (August 2002). In response, the requirement set within HIPAAAnswers™ was updated. The clinic simply stepped through the new requirements, comparing the modified documents with those already created, and modified the policies they'd created using the previous requirement set.

Lessons learned

The lessons learned by Burnsville employees while using HIPAAAnswers™ are instructive for other organizations still wading toward compliance. Among them:

- v Understand what Privacy compliance looks like. Once compliant, an organization will have created and implemented a set of policies; created and implemented procedures to reflect those policies; and provided appropriate training to all staff as to their responsibilities for abiding by those policies and procedures.

The documentation of the above three activities is a formal requirement under HIPAA. If audited or challenged by another covered entity to demonstrate that you are in compliance, you should have this information available in paper or electronic form.

v Complete a few simple requirements first. When administrators get their hands dirty in the regulations and start making progress toward compliance, the job will feel less daunting.

Take the complaint requirement.

Most service organizations have a simple policy in place that describes how complaints will be received and processed. HIPAA adds very little substance. It imposes formalities, like making sure the complaint policy and procedures are written down, ensuring complaint receipt and resolution are documented; and making sure staff is trained to process complaints and can explain it to those who want to complain.

By incorporating this information into the existing complaint policy and procedures, an organization completes a HIPAA requirement. During this process, it will also assign – and document the assignment – of a Complaint Contact and a second HIPAA requirement is complete. The organization can't go much further without assigning – and documenting the assignment – of a Privacy Official responsible for document creation and policy enforcement. That would be a third HIPAA requirement completed.

Administrators will have to learn the general requirements for documentation of policies and procedures throughout that process. If they capture this information in a policy template that completes yet another HIPAA requirement.

v Get to know some of the major concepts. Organizations that understand some basic truths about HIPAA will make progress faster. HIPAAAnswers™ provides several documents in the Educate section that address some of these concepts. The elements are also defined in the application's glossary, they are:

-Protected health information (PHI) – PHI is the nut within the shell that is the HIPAA Privacy Rule. It is, simply, individually identifiable patient information that is maintained in any format or media. The Privacy Regulation's purpose is to define appropriate use of this information, and impose guidelines to ensure that usage standards are not violated.

-Safeguarding PHI – The actual amount of text dedicated within the Regulation to this specific topic is very limited, but its intent resonates. In short, covered entities are expected to take "reasonable steps" to ensure that protected health information is not inappropriately used or disclosed. Much of the Regulation is dedicated to explaining how to do that.

But the Regulation can't cover every aspect of an organization's business practices. That's why the concept of safeguarding should be constantly reconsidered. Should you lock that medical records file cabinet? The Regulation itself says nothing of the sort; but your understanding of the safeguarding principal likely will lead you to do just that.

-Preemption – HIPAA's roots are in existing state laws, so many of the practices it introduces are not new. While introducing some intra-state uniformity to privacy practices, HIPAA has also imposed some tighter restrictions. Still, HIPAA does recognize that some states' laws are even more stringent than HIPAA's. Where that's true, HIPAA requires that the state law take precedence.

Contact Information

For more information on HIPAAAnswers, visit the company online at www.hipaanswers.com, email sales@hipaanswers.com, or call us toll-free at 1-866-326-6785.