PRIVACY & COMPLIANCE

March 2020

Beth Israel Lahey Health
Lahey Hospital & Medical Center

Compliance = Doing the Right Thing

◉ **Compliance is...**

- **Behaving ethically**

- **Following the law**

◉ **Code of Conduct:** *Integrity at Work*

- List of ethical standards that *ALL* employees must follow

◉ **Culture of Compliance:** Federal government mandates compliance programs for health care organizations

Compliance Team

Lahey Hospital & Medical Center

Tara M. Sargent
- Director, Compliance and Privacy

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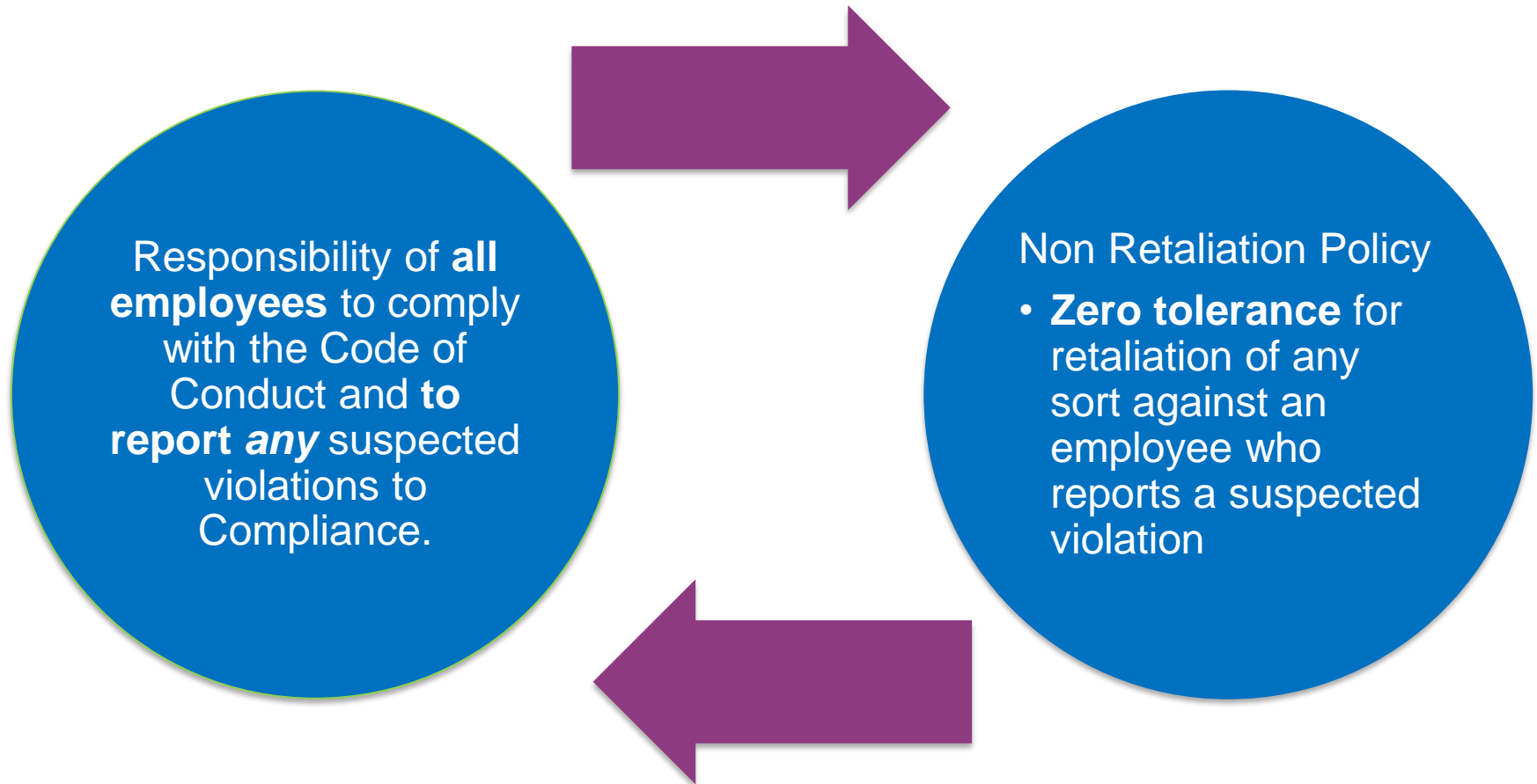
Christian Presley
- Director, Compliance and Privacy

Lori Dutcher
- Chief Compliance Officer

… and the most important member…

YOU!!!

Speaking Up

Responsibility of **all employees** to comply with the Code of Conduct and **to report** *any* suspected violations to Compliance.

Non Retaliation Policy
- **Zero tolerance** for retaliation of any sort against an employee who reports a suspected violation

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When To Speak Up?

Call Compliance immediately if…

You think an employee or vendor is doing something unethical, illegal or improper.	**You are not comfortable with action that you think may not be in the best interest of our patients.**	**You disagree with how a provider is billing for services.**	**A patient voices concerns about a privacy issue.**
Ex. Stealing (work time, hospital resources, patient property)	**Ex. Not providing an assistive device to a patient who needs one**	**Ex. Billing for care not provided**	**Ex. Patient receives another patient's medical information in the mail**

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HIPAA

- Goal: Protect the privacy and security of our patients' Protected Health Information (PHI).

Benefits of HIPAA compliance:

- ❖ **Patients trust and communicate openly with health care providers.**
- ❖ **Reduce risk of fines and harm to Winchester's reputation.**

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HIPAA

PHI - Any information that relates to the past, present, or future healthcare of an individual *and* identifies that individual.

Includes: (but not limited to)

- Name
- Date of Service
- Email
- Phone #
- Medical / Clinical Information
- Photos
- Medical Record #
- Any other identifying code, number, picture, etc.

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How do we promote HIPAA compliance?

Policies & Processes

Education & Training

Investigation, Auditing & Enforcement

HIPAA Policies:

- *PHI Security & Protection* – Details how to protect PHI
  - Don't leave PHI in non-secure location
  - Employees responsible for disposing of PHI in shredding bins
- *Corrective Action Policy* – Details disciplinary process
  - Verbal counseling
  - Written warning
  - Termination

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HIPAA Privacy Do's & Don'ts

DO:

✓ Ask yourself, "Do I need to know this to do my job?" before looking at protected health information.

✓ Close exam room doors when caring for patients or discussing their health concerns.

✓ Follow Winchester Hospital policy for disposing of PHI and patient information – make sure to place all paper containing PHI in a Shred-It bin.

✓ Tell your supervisor / compliance if you see patient information in an open trash container.

✓ Turn computer screens so patients and other individuals can't see information on the screen.

✓ Double-check e-mail addresses and fax numbers before sending patient information.

✓ Request 2 identifiers (name & DOB) to verify a patient's identity before disclosing PHI.

✓ Report **ALL** privacy concerns to your supervisor or privacy officer.

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HIPAA Privacy Do's & Don'ts
<u>DON'T:</u>

✗ Talk about patients in public places, such as elevators, hallways or cafeteria lines.

✗ Allow faxes or printed e-mails containing PHI to lie around the office.

✗ Leave Epic open while you leave the room to care for another patient.

✗ Keep materials that connect patients' names with their conditions out in the open where anyone can see them.

✗ Leave phone messages containing sensitive patient information on answering machines or voicemail systems.

✗ **Go into patient medical records unless you have a clinical or business need to do so.**   (PROTENUS - inappropriate use audits)

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IT Security Best Practices

- *All* Winchester Hospital and Winchester Physician Associates colleagues have the responsibility to protect the organization's electronic information and information systems from unauthorized access, use, disclosure, disruption, modification, or destruction.

- Users are expected to follow security policies and exercise responsible, ethical behavior when using our computer network facilities, equipment, and applications.

- If you have questions please reach out to IT Security at ITSecurity@Lahey.org

IT Security Do's & Don'ts

DON'T:

✗ Choose computer passwords that can be easily guessed (such as your last name or your birth date).

✗ Share your computer account name or password with ***anyone***.

✗ Open email attachments or click on web links without first verifying the sender. These "phishing" attempts are a serious threat to our networks and resources.

✗ Dispose of electronic media that may contain ePHI into the normal trash. Call the Support Desk and ask Desktop Services to come take it away.

✗ Use email other than Gmail (Hotmail, Yahoo!, etc.) for Winchester Hospital and WPA business.

✗ Use any unapproved data storage platforms (Box, OneDrive, pCloud, etc.) for Winchester Hospital and WPA business. Use only Dropbox OR Google Drive

✗ Do not leave your workstation or other devices unlocked when not in use.

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IT Security Do's & Don'ts

_DO:_

✓ Report **_all_** computer viruses, suspicious activity, or lost/stolen devices to the IS Support Center **immediately**.

✓ Encrypt **_all_** electronic PHI stored on any media.

  ✓ Only approved encrypted USB drives can be used to store PHI.

  ✓ Emails with PHI must also be encrypted: add **@encrypt** anywhere in the subject line to encrypt the email as well as its attachments.

✓ Only use approved software that is licensed for use by Winchester Hospital and/or Lahey.

✓ Remember physical security: Never leave mobile devices or laptops in places where they are not secure.

✓ Go to IT Security page on MassNet or email ITSecurity@lahey.org with any questions.

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Compliance / HIPAA Question?
CALL US ! !

Tara M. Sargent
Director, Compliance and Privacy

Lahey Hospital & Medical Center
Tara.M.Sargent@Lahey.org
Direct Dial: 781-744-9653
EthicsLine: 1-855-392-5782

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How to Reach Compliance?

- **Compliance Hotline: 855-392-5782**

  - *Anonymous reporting option 24/7/365*

- **Hotline Website**: *www.laheyhealth.ethicspoint.com*

- **Compliance Intranet Site (MassNet):**

  http://massshare/sites/corp_comp/Pages/Home.aspx

- *Privacy@Lahey.org*

  SPEAK UP – COMPLIANCE WILL BE THERE WHEN YOU DO!

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Have a Safety Concern?

- **Mail: The Office of Quality and Patient Safety, The Joint Commission**

    One Renaissance Blvd., Oakbrook Terrace, IL 60181

- **Web:** *www.jointcommission.org*

- **Fax: 603-792-5636**

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