PRIVACY & COMPLIANCE

March 2020

Beth Israel Lahey Health
Winchester Hospital

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

1   "Time for the Moment of Truth... How many of you exceeded the speed limit on your way in this morning?"

Speed Limit analogy: When you drive on the highway, the government tells you what the maximum speed is that you can drive. You can choose whether to obey or not. If you exceed that limit, there is a chance that you will get a fine if you get caught.

Healthcare regulations require not only that you stay under the speed limit, they require a driver to have someone sitting next to you at all times to remind you what the speed limit is, tell you to slow down if you speed, and call the police if you don't slow down. For Reliant, that person is the Compliance Officer. If you get pulled over and there's no Compliance Officer in the car, you will get punished regardless of if you were speeding or not.

* Mission of the Compliance Department to ensure that Reliant is operating legally and ethically.
-Fallon
, 10/11/2018

Compliance Team

Winchester Hospital and
Winchester Physician Associates

Tara M. Sargent
- Director, Compliance and Privacy

Beth Israel Lahey Health System
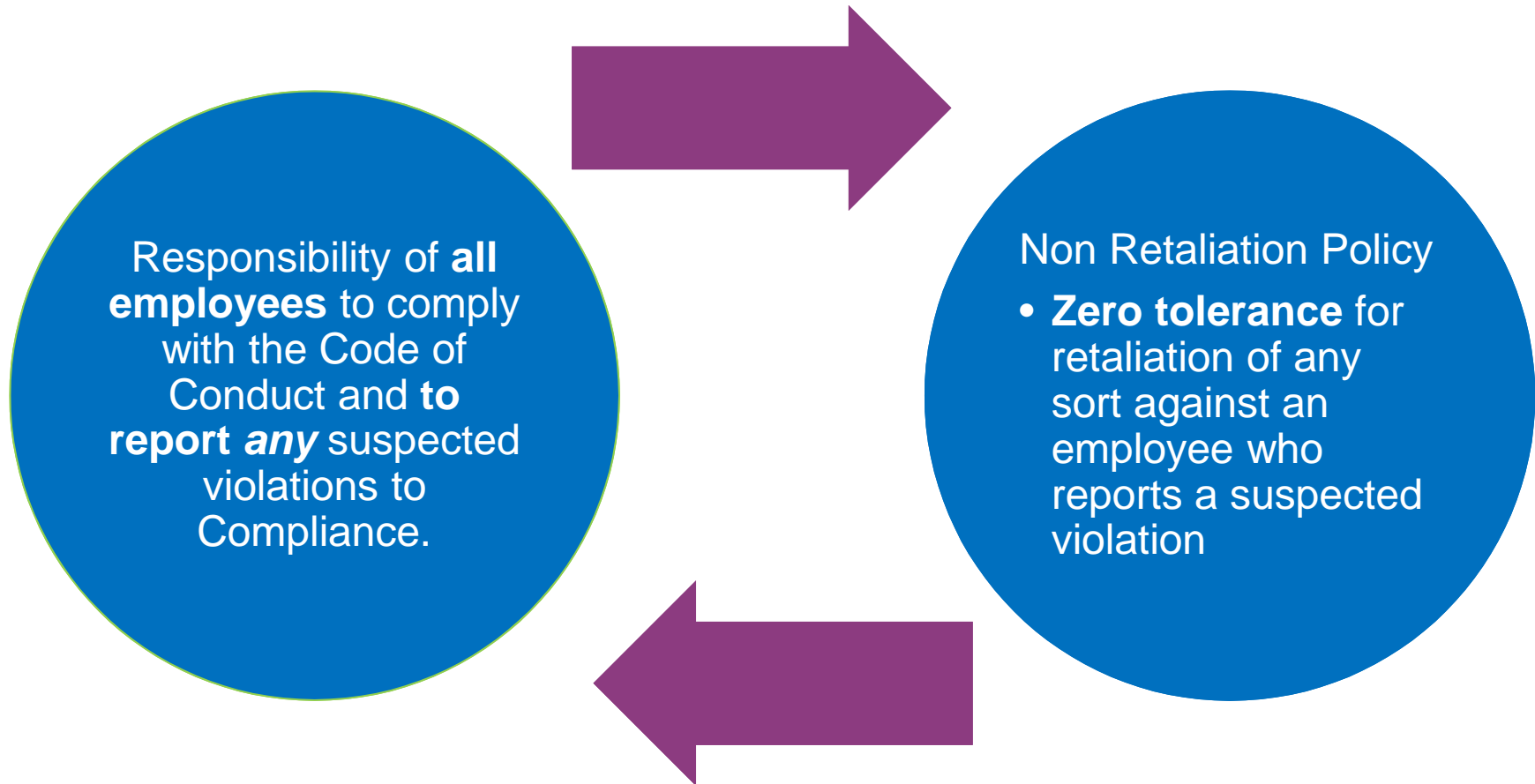
Christian Presley
- Director, Compliance and Privacy

Lori Dutcher
- Chief Compliance Officer

… and the most important member…

YOU!!!

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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

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.**

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.

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
DON'T:

✗ 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.** (P R O T E N U S - inappropriate use audits)

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

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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.

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

Winchester Hospital and Winchester Physician Associates
Tara.M.Sargent@Lahey.org
Direct Dial: 781-756-7078
EthicsLine: 1-855-392-5782

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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