

HIPAA Q&A

Please refer to the HIPAA Privacy Rule Policy and the HIPAA Notice of Privacy Practices for more detailed information.

Q: What is HIPAA?

A: HIPAA is the Health Insurance Portability and Accountability Act. The HIPAA Privacy Rule policy became effective on April 14, 2003. Georgia Perimeter College maintains personal health care information about its employees, their dependents, patients and others. The College fully supports and complies with all Federal and State statutes and rules regarding the use, maintenance, transfer and disposition of health records and information. The College, its employees and students are committed to protecting the privacy and confidentiality of this information. Georgia Perimeter College will make reasonable effort to limit use and disclosure of protected health information (PHI). This principle does not apply to the following:

- disclosure for treatment
- disclosures required by law
- uses and disclosures required by the privacy rule

Q. What is PHI?

A: Protected Healthcare Information is defined as any individually identifiable information regarding an employee's medical/dental history, mental or physical condition or treatment.

Q: What are some examples of PHI?

A: Some examples of PHI include an employee's name, address, telephone and/or fax number, electronic mail address, social security number, or other identification number, date of birth, date of treatment, treatment records, enrollment and claims records.

Q: How does GPC use employee PHI?

A: GPC receives, uses and discloses an employee's PHI to administer an employee's benefit plan and to provide dental/wellness treatment through the Dental Hygiene Clinic, the Student health center and wellness programs, or as permitted or required by law. Any other disclosure of an employee's PHI is prohibited. Authorization from the employee must be obtained to use or disclose PHI that is requested for reasons other than treatment, payment or operations (TPO), or in order to comply with the law.

We use administrative, technical and physical safeguards to maintain the privacy of PHI, and we must limit the use and/or disclosure of PHI to the minimum amount necessary to accomplish the purpose of the use and/or disclosure.

Q: Who may be required to access PHI?

A: Any employee involved in the processing of healthcare Federal spending account claims or health insurance claims and any employee or student involved in wellness programming, the operation of the Student Health Center or the operation of the Dental Hygiene Clinic may be required to access PHI. Access to PHI will be allowed for the purpose of processing claims and for obtaining the health information required to safely provide medical treatment and care to clinic patients and participants in wellness program activities.

Q: Why must our department and our employees comply with the HIPAA Privacy Rule?

A: The department and departmental employees must comply with the HIPAA Privacy Rule because of access to or disclosure of PHI for treatment, payment and/or operations (TPO). The College fully supports and complies with all Federal and State statutes and rules regarding the use, maintenance, transfer and disposition of health records and information. The College, its employees and students are committed to protecting the privacy and confidentiality of this information.

Q: What kinds of changes or modifications of practices will our department have to make to comply with the Privacy Rule?

A: Departments are required to lock files, use passwords on computers that contain PHI and determine the minimum PHI information that needs to be included in order to do treatment, payment and/or operations and to respond to other requests which require authorization. Departments must modify their practices to include these things. Authorization from the employee must be obtained to use or disclose PHI that is requested for reasons other than treatment, payment and/or operations or in order to comply with the law.

Q: What are the permitted uses and disclosures of an employee's PHI?

A: We are permitted to use or disclose PHI with an employee's prior authorization for the following purposes: disclosure to the employee, uses and/or disclosures for purposes of health care treatment, payment of claims/billing of premiums, and other health care operations, third parties that perform services for GPC in the administration of employee benefits. These parties are required by law to sign a contract agreeing to protect the confidentiality of employee PHI.

We are also permitted to use and/or disclose of an employee's PHI to comply with a valid authorization, to notify or assist in notifying a family member/another person or a personal representative of the employee's condition, to assist in disaster relief efforts, to report victims of abuse, neglect, domestic violence, for purposes of health oversight by government agencies/judicial/administrative or other law enforcement purposes, information about decedents to coroners, medical examiners and funeral directors, for research purpose, to avert serious threat to health or safety, for specialized government functions such as military and veteran's activities, for workers compensation purposes, and for use in creating summary information that can no longer be traced to an employee.

Additionally, with certain restrictions, we are permitted to use or disclose employee PHI for underwriting. We are also permitted to incidentally use and/or disclose employee PHI during the course

of a permitted use and/or disclosure, but we must attempt to keep incidental uses or disclosures to a minimum.

NOTE: Non-routine disclosure of PHI will be limited to the amount of PHI necessary to accomplish the purpose of the disclosure.

De-identified PHI which has had personal information removed may be used for any purpose.

Before disclosing PHI, the identity of the person requesting the PHI and the authority of that person to have that access will be verified.

Q: How will GPC safeguard PHI?

A: Georgia Perimeter College will make reasonable effort to protect PHI by prohibiting access to files containing PHI by anyone other than those identified as needing access to PHI. Doors to departments or file cabinets with those records will **remain locked when they are unattended**. Passwords will be required to access PHI that is housed on computers. PHI will be shredded before disposal.

Q: What are the consequences to an employee or student who violates the HIPAA Privacy Rule and or GPC Privacy Practices?

A: All employees and students with access to PHI who do not comply with privacy policies and procedures will be subject to disciplinary action up to and including termination of employment or expulsion from school.

Q: What examples of Treatment, Payment or Healthcare Operations (TPO) are there?

A: Such activities may include but are not limited to submitting enrollment information and premiums to health care providers, providing customer service, resolving grievances and providing information to other providers.

Uses or disclosures for treatment:

GPC may use or disclose PHI to determine eligibility for services requested by an employee's health care provider.

Uses and or disclosures for payment:

GPC may use and disclose PHI to remit premium payments on an employee's behalf.

Use and/or disclosure of PHI for health care operations:

GPC may use and disclose PHI to audit files for compliance with policies.

Q: How will PHI be used for Health Care Federal Spending Arrangement claims disclosures?

A: PHI will be used by those who process claims to determine the validity of a claim only. Disclosure or discussion of PHI for any other purpose is prohibited.

Q: How will PHI be used by the Dental Hygiene Clinic and the Student Health Center?

A: PHI will be used by Dental Hygiene Clinic and Student Health Center personnel and students to determine appropriate treatment and safety precautions for each patient. PHI may be disclosed to a patient's personal physician, dentist, or other health care provider for the purpose of treating a specific concern identified by Dental Hygiene Clinic and Student Health Center personnel.

Q: How will PHI be used by wellness programs?

A: PHI will be used by wellness personnel and students and wellness program contractors only to determine appropriate screening regimens, treatments and safety precautions for each patient. PHI may be disclosed to a patient's personal physician or other health care provider for the purpose of treating a specific health concern identified by students, contractors or wellness program personnel.

AUTHORIZATION

Q: What disclosures can GPC make with an employee's authorization?

A: GPC will not use or disclose PHI without an employee's prior authorization. Authorization must be specific and must contain the following:

- a specific description of the information to be disclosed
- the name or class of persons authorized to make the requested use or disclosure
- the name or class of persons to whom the use or disclosure may be made
- a description of each purpose of the requested
- the expiration date of the disclosure
- signature of the authorizing party and date. If the authorizing party is a representative of the affected individual, the scope of the authorizing authority must be included.

Q: What disclosures must GPC make without an authorization?

A: We are required to disclose PHI to an employee or an employee's authorized personal representative (with certain exceptions), when required by the US Secretary of Health and Human Services to investigate or determine our compliance with law, and when otherwise required by law. GPC must disclose PHI without an employee's prior authorization in response to the following:

- Court order
- Order of a board, commission, or administrative agency for purposes of adjudication pursuant to its lawful activity
- Subpoena in a civil action
- Investigative subpoena of a government board, commission, or agency
- Subpoena in an arbitration
- Law enforcement search warrant
- Coroner's request during investigations

INDIVIDUAL RIGHTS

An individual has the right to do the following with respect to his/her PHI:

- Request an inspection of and obtain a copy of his/her PHI
- Request alternative means of communication
- Request restricted use and disclosure of PHI for treatment, payment and health care operations.
- File a complaint
- Request an amendment of PHI
- Access individual PHI
- Access disclosures of PHI
- Request a six-year accounting of disclosures made of an individual's PHI upon written request

Georgia Perimeter College will not coerce individuals to sign consent and authorization forms and will not require individuals to waive their privacy rights. The College will not retaliate against an individual for any right granted by the privacy rules or for filing a complaint, participating in an investigation or opposing any unlawful act related to the Privacy Rule.

Q: How are complaints regarding PHI handled?

A: An employee may complain to us or the US Secretary of health and Human Services if he/she believes that GPC has violated his/her privacy rights. An employee may file a complaint with us by notifying GPC at the address listed at the end of the Notice of Privacy Practices. GPC will not retaliate against an employee for filing a complaint.

Q: Who should employees contact for additional information?

A: Employees may contact GPC at the address and telephone number listed below for further information about the complaint process or any other HIPAA information.

Privacy Officer/Patrice Masterson
Georgia Perimeter College
3251 Panthersville Road
Decatur, Ga. 30034
678/891-2783
Patrice.Masterson@gpc.edu