In March of this year, the Department of Health and Human Services (DHHS) enhanced the Privacy and Security Rules of HIPAA/HITECH with the HIPAA Omnibus Final Rule. It enhances standards for improving privacy protections and security safeguards of protected health information (PHI).

The Omnibus changes provide increased protection and control of PHI. It expands many of the requirements to business associates that receive PHI. Business associates of covered entities have reported some of the largest data breaches to DHHS and penalties have increased for HIPAA noncompliance based on the level of negligence with a maximum penalty of $1.5 million per violation. The changes also strengthen the HITECH Breach Notification requirements by clarifying when breaches of unsecured health information must be reported to HHS.

Individual patient rights have been expanded. Patients can now request a copy of their electronic medical record in an electronic form. Also, when individuals pay by cash they can instruct their provider not to share information about their treatment with their health plan.

Additionally, the Omnibus rule sets new limits on how information is used and disclosed for marketing and fundraising purposes. It prohibits the sale of an individuals’ health information without their permission. It also streamlines the ability for individuals to authorize the use of their health information for research purposes and makes it easier for parents to give permission to share proof of a child’s immunization with a school.

The Omnibus Final Rule became effective March 26, 2013. Covered entities and business associates must comply with applicable requirements by September 23, 2013. All changes will be in place at our SLUCare facilities on September 16, 2013.

**Practice Management Staff (PMO)**  Scheduling, Billing, Registration, A/R Staff
✓ Will follow a workflow that ensures disclosure restricted services “paid out of pocket” will NOT be sent to health plans
✓ Will present an updated Notice of Privacy Practices (NPP) to new patients

**Health Information Management (HIM)**  ROI (Correspondence)
✓ Will follow a workflow that ensures disclosure restricted services “paid out of pocket” will NOT be sent to health plans
✓ Will be allowed to release a decedent’s record to a family member or individual involved in the patient’s care or payment for care
✓ Will be allowed to release a patient’s immunization record to school without a written authorization
✓ Will provide access to electronic records in electronic form

**Development Staff**
✓ Will be allowed to use additional categories of PHI for fundraising

**IRB-Researchers**
✓ Will be allowed to use a compound authorization and authorizations that include future research

**All Staff**
✓ Report unauthorized use or disclosure of PHI to Information Security Officer, Privacy Officer, or Compliance Office. Incidents will be evaluated using a four factor risk assessment process to determine breach notification requirements.
Compliance Education Sessions:

**General HIPAA Session**
September 12, 2013
3:00 – 4:00 pm
Learning Resource Center
Room 105

**Billers Meeting**
Compliance Update Part II: Clinical Trials, Inpatient Services and Timely Topics
September 17, 2013
10:00 – 11:30 am
Learning Resource Center (LRC)
Auditorium C

**Coding Clinic**
Inpatient Documentation, Coding, and Charge Capture
September 19, 2013
7:30 – 8:30 am
8th Floor Fitch Conference Room
SLU Hospital, Bordley Tower

September 24, 2013
5:00 – 6:00 pm
7th Floor Hanlon Conference Room
SLU Hospital, Bordley Tower

Saint Louis University Hospital
Inpatient Charge Capture GO LIVE Schedule

**September 16, 2013**
- Surgery
- Neurosurgery
- Dermatology

**October 2, 2013**
- Ophthalmology
- Otolaryngology
- Orthopedics