



COMPLIANCE E-NEWS

Breach Prevention

Critical for Compliance

What is a Data Breach?

Key Definitions

Protected Health Information (PHI): is individually identifiable health information that is transmitted or maintained in any form or medium by a health care provider, health plan, or health care clearinghouse.

Personal Information: is an individual's first name or first initial and last name, in combination with any one or more of the following: social security number; driver's license number; or financial account number, credit or debit card number, in combination with any required security code, access code or password.

Breach of PHI: A breach of protected health information (PHI) is defined by federal law and regulation to mean the acquisition, access, use, or disclosure of PHI in a manner not permitted under the Privacy Rule of HIPAA which poses a significant risk of financial, reputational, or other harm to the individual.

Breach of Personal Information: Missouri Statute defines "breach of security" or "breach" as unauthorized access to and unauthorized acquisition of personal information maintained in computerized form by a person that compromises the security, confidentiality, or integrity of the personal information.

Federal and State laws and regulations define breach notification requirements associated with unauthorized use or disclosure of Protected Health Information (PHI) or Personal Information. Each event that involves breach of individually identifiable PHI or Personal Information must be evaluated for application of the applicable regulatory notification requirements.



Prevent Data Breach

WHAT SHOULD I DO?

A recent study by Price Waterhouse Coopers found that only 5% of data breaches are caused by malicious cyber-attacks, almost 55% are linked to human error, and 44% are due to third-party handling of data.

Tips for Preventing a Breach

- Destroy unnecessary patient information – shred documents, delete electronic files
- Verify the number and recipient of a fax before sending
- Limit the printing of PHI or Personal Information
- Verify that all pages of printed documents belong to the patient or intended recipient before presenting
- Limit the use of email containing PHI or Personal Information
- Verify the recipient's address before sending an email
- NEVER use email for transmitting of PHI outside of SLU unless encrypted
- Do NOT store patient information on portable devices unless encrypted
- Log-off or secure your computer when away from your workstation.
- Lock laptop computers and other portable devices in secure location when not in use.

Know or Suspect a Breach Incident

WHAT SHOULD I DO?

If you know of or suspect a breach of protected health information (PHI) or personal information, it is your obligation to report the incident to the Privacy Officer, Ron Rawson, or your supervisor for reporting to the Compliance Office. (977-5545)

The Privacy Officer will initiate a follow-up investigation with appropriate management to document and review details of the incident. Assessment of the incident will result in recommendations to mitigate harm along with actions of applicable breach notification and reporting requirements.

Please see the following page for more Compliance Education Opportunities

Compliance Academy Schedule of Classes Fall 2011

2011 Annual Compliance Update

Registration not required (Mandatory completion by 12/31/11)

November 22	8:30 – 9:30 a.m.	Cardinal Glennon Hospital, <i>Hussman Room, First Floor</i>
November 28	12:00 – 1:00 p.m.	Learning Resource Center, <i>Room #110</i>

Health Insurance Portability & Accountability Act (HIPAA) General Session

Registration not required

November 17	3:00 – 4:00 p.m.	Compliance Academy Classroom, <i>Schwitalla Hall M229H</i>
December 15	3:00 – 4:00 p.m.	Compliance Academy Classroom, <i>Schwitalla Hall M229H</i>

Special Topics in Documentation, Coding and Reimbursement

Registration Required

Preventive Medicine Services – Medicare Annual Wellness Visits, Preventive Services (physicals, new and established patient preventive visits), Screening Diagnostics, Preventive Services and E & M Visits at the Same Session

November 17	8:30 – 9:30 a.m.	Learning Resource Center (LRC), <i>Room 110</i>
-------------	------------------	---

Compliance Topics in Billing, Coding and Reimbursement (Billers Meeting)

Registration not required

November 15	10:00- 11:30 a.m.	Learning Resource Center (LRC), <i>Auditorium C</i>
-------------	-------------------	---

Topic: Preventive Services AAPC CEU's: 1.5