

Chapter-15

A STUDY ON HIPAA COMPLIANCE IN HEALTH IT COMPANY AND ITS APPLICATION TO PHI

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DOI: <https://doi.org/10.52458/978-8197040863.2024.eb.ch-15>

Ch.Id:- IIHMR/NSP/EB/RHP/2024/Ch-15

INTRODUCTION

The HIPAA Security Rule, formerly known as the Standards for Security of Individually Identifiable Health Information, is a crucial component in regulating and setting nationwide standards for safeguarding patient health information. It enforces protocols to ensure the protection of sensitive health data at a national level. Additionally, the HIPAA Security Rule incorporates the Security Standards for the Protection of Electronic Protected Health Information, outlining precise measures for securing electronic patient data [1].

The HIPAA Enforcement Rule also holds a substantial significance by offering guidelines for inquiries related to breaches of HIPAA compliance. This regulation creates the framework for addressing and rectifying situations where entities governed by HIPAA fall short of complying with its stipulations [2].

Protected Health Information (PHI) refers to any identifiable information that can be used to identify a patient or client associated with an entity governed by HIPAA. Examples of PHI include names, addresses, phone numbers, Social Security numbers, medical records, financial information, and full-face photographs, among other particulars. PHI that is transmitted, stored, or accessed electronically falls under the regulatory purview of HIPAA and is termed electronic protected health information (e-PHI). The HIPAA Security Rule, an extension of HIPAA guidance, specifically regulates e-PHI, addressing the complexities brought about by advancements in medical technology [3].

RESEARCH OBJECTIVES

1. To comprehend PHI in a Health IT company.
2. To ascertain when HIPAA rules applied to PHI.
3. To comprehend restrictions on the release of PHI.
4. To identify methods for safeguarding PHI.
5. To establish measures for maintaining workplace HIPAA compliance.

6. To comprehend patients' rights in HIPAA compliance.

RESEARCH METHODOLOGY

The research took the form of a Descriptive Cross-Sectional study and was carried out within a Health IT Company. The study lasted for four weeks, during which primary data was gathered through in-depth interviews and consultations, amounting to a total of 10 in-depth interviews. To be more specific, four interviews were held with managers from the compliance team, three interviews with members of the training team, and three interviews with virtual scribes.

RESULTS & DISCUSSION

Patients possessed the right to request that providers contacted them or transmitted their Protected Health Information (PHI) through alternative means of communication or at an alternative location. They also retained the right to inspect copies of their own PHI records. However, certain restrictions applied, and patients did not have the right to access psychotherapy notes, information collected for legal proceedings, or data that could pose harm. Additionally, patients could request a list of all disclosures of their PHI, excluding those for Treatment, Payment, or Operations (TPO), for which they had not given explicit authorization. Furthermore, patients could request modifications to their PHI, and if they had previously authorized the release of their PHI to a third party, they had the right to revoke that authorization at any time, requiring a written "Revocation of Authorization" form. Lastly, patients could assert their right to impose special privacy restrictions on their PHI by submitting a written request.

CONCLUSION

The regulations were implemented as a multi-layered approach to improve the health insurance framework. HIPAA had a broad impact, influencing almost everyone involved in healthcare, whether on the giving or receiving end of medical services. It assisted individuals covered by group insurance through employers and organizations, as well as those who were self-insured through employers. HIPAA had implications for healthcare workers across all levels, from the janitorial

staff to physicians, in how they approached patient care. Additionally, it had significant effects on insurance companies, healthcare providers, and, most importantly, the patients.

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