

## Privacy 101

### What Patient Information Can We Share and How?

It's Tuesday afternoon. Dr. Rowland is seeing Maggie Underwood for pain in her chest. Dr. Rowland discovers that last month Maggie saw Dr. Smith in another town for the same problem. So, Dr. Rowland calls Dr. Smith and says "Hello, Dr. Smith, I am Dr. Rowland, I am treating Maggie Underwood, her social security number is 444-44-7654. Maggie is having pains in her chest and I wanted to call you and see if you could tell me what you found out about her when you saw her.

Under privacy regulations, what should Dr. Smith do?

- A. Hang up
- B. Ask for a release to be sent
- C. Answer Dr. Rowland's question

The answer is C. Under HIPAA, providers are allowed to share information for treatment, health care operations, and billing without a specific release. Instead of a specific release, the patient agrees to a general but limited release of information under HIPAA provisions in the privacy statement the patient signs.

Many people are surprised by this. Before HIPAA, providers had to get a specific release for about anything information they would share unless it was a life and death emergency. Many times these older restrictions caused harm or "hassle" to a patient's health care. In those days, people were actually being harmed because one provider could not talk to another provider, even to help the patient. The goal of HIPAA is to both protect patient privacy while at the same time allowing providers to communicate to help the patient.

How sure are we that HIPAA says this? Dr. Bill Braithwaite wrote the HIPAA law. When we started the concept of a data exchange here the partners wanted to be very careful about making sure we protected the privacy rights of every patient. So, we invited Dr. Braithwaite to come to Tahlequah and consult with us about privacy issues and data exchanges. He came and spent a day with us in March of 2005. He told us that what we are doing with the network is absolutely allowed under HIPAA, and in fact, the right for providers to share treatment information to help the patient was mentioned over 75 times in the HIPAA regulations.

There are many patient safeguards in the regulations. Patients can see their records, know what was done to them, modify or comment on them, withdraw the ability for the provider to share certain information, and are notified of all their patient rights when they start with a provider. The same is true in our data sharing system. Just because this is electronic sharing does not mean it is any different than sharing through discussion.

There are other laws and regulations that restrict information as well. These take place when a person may have AIDS, be in a drug rehabilitation facility, and in many specific areas defined by law. And each state has its own laws that may be more restrictive than HIPAA. The rules concerning the exchange of information is regulated in our new data sharing network by a forty page agreement. A lot of it comes from the experience in Indianapolis from a data system that is over fifteen years old and swaps almost one billion pieces of information every year. For additional security, only certified personnel with special passwords can see patient information. And there are levels of personnel. So, for example, a physician can see more patient information than a clerical person.

This may be a surprise to you, but electronic networks are much more protective of patient's right than paper records. In an electronic exchange, you always know who is receiving the information, exactly what was sent, and when it was viewed. No clerk has to move charts around, charts do not sit out on a desk, parts of records being pulled out of the charts (or never getting into charts) are not an issue, there is no handwriting to misread, and charts do not get lost. And they travel a light speed. No waiting!

Next time: How is the data held in a safe and secure manner?