



HIPAA and Privacy Quick Reference

Guidelines and Tips for Securing Information

❖ What is Privacy?

- Privacy is the fundamental right to be free from unauthorized intrusion.
- Fundamental privacy rights include the right to
 - Access your own records.
 - Correct your own records.
 - Limit the types of information shared from your record.
 - Limit who can access your record.
 - File a complaint.

❖ HIPAA Rights:

- Your Records
 - Obtain an electronic or paper copy of your medical record.
 - Ask provider to correct your medical record.
- Confidentiality

- Request the provider communicate confidentially with you.
- Information Sharing Limits
 - Ask the provider to limit what information they use or share about you.
 - Ask the provider to share information with specific family, friends, or others.
 - Receive a list of everyone with whom the provider has shared your information.
- Privacy Notice
 - Receive a copy of the privacy notice explaining your rights.
- Personal Representation
 - Choose someone to act on your behalf.
- File a Complaint
 - File a complaint if you feel your rights have been violated.

❖ Personally Identifiable Information (PII)

- Information about a specific individual which can be used to identify that individual directly or indirectly, such as:
 - Demographics
 - Personal ID numbers (SSN, DL number, etc.)
 - Physical email address,
 - Personal characteristics (biometrics, pictures, etc.)

❖ Protected Health Information (PHI)

- *Health information* is any information relating to a patient's condition, provision of healthcare, or payment thereof.
- It becomes *Individually Identifiable Health Information* when identifiers (e.g. contact information, ID numbers, account numbers,

photographs, etc.) are included in the same record set as that health information.

- It becomes *Protected Health Information (PHI)* when it is transmitted or maintained in any form by Travis County.

❖ Non-Protected Information

- Information you personally receive outside of a client relationship is not protected under HIPAA. This includes conversations between coworkers about their own health or their families' health.
 - HIPAA only applies to healthcare providers, health plans, healthcare clearinghouses, and vendors with a contractual relationship to those businesses.
 - Therefore, sharing conversations about a coworker's medical condition, even if that conversation was in confidence, is not a HIPAA violation.
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Minimum Necessary

- The amount of information shared should be the least amount needed to fulfill a request. This is to help protect individuals' privacy.
 - When sharing or requesting a person's health information, consider what is really needed to complete the task – and what is not.
- Before responding to a record request, carefully consider what information the requestor really needs for their purposes.

❖ Consent

- Generally, no health information should be shared unless the patient has given their express consent. This applies to
 - whom their information can be shared with.
 - the specific type of information shared.
 - the format by which it is shared (email, voicemail, phone, etc.).

❖ Authorization

- Anyone with whom you share a patient's medical information must
 - have a legitimate need for it, and

- be authorized to receive it.
- Even when sharing within Travis County. Whether sharing from one Department to another or between coworkers in the same division, the recipient must have
 - a proper business need,
 - authorization to access the information, and
 - consent from the individual to receive such information.
- Always contact your Travis County Compliance and Privacy Office for guidance if you are unsure whether a piece of information can be shared.

❖ Reporting

- Mishandled information could be as simple as a fax or email containing PHI sent to the wrong recipient. Most PHI violations result from these types of simple human errors as employees go about their day.
- Whether the incident is a well-meaning error, or as egregious as intentional identity theft, all occurrences should be reported to a supervisor or the Compliance and Privacy Office at
 - Privacy@traviscountytexas.gov
 - Hotline - (512) 854-1114

- [Travis County Incident/Complaint Form.](#)

❖ Penalty

- Individuals can be held liable and penalized for damages resulting from privacy failures.
- The penalties for HIPAA violations include civil monetary penalties from approximately \$140 to \$69,000 per record involved.
- Criminal penalties can also be imposed for intentional violations, leading to fines and potential imprisonment. These penalties can be charged against the organization and against you personally.

❖ Snooping

- Snooping is an attempt to learn information that is not intended to be visible or shared.
- Snoopers could be a client's family members, partners or ex-partners, members of the media who are curious about someone's condition, and others. That curiosity may be from genuine concern or from general nosiness. Neither overrules someone's right to privacy.

- HIPAA rules expressly require that anyone accessing a client's PHI must have
 - A legitimate business reason for accessing the information, and
 - Authorization – either from the client or by virtue of their healthcare relationship - to receive the information.

❖ **Phishing**

- Phishing is an attempt to fraudulently obtain sensitive or confidential data from you by someone through posing as a legitimate institution or person.
- Phishers can contact you through email, text, or phone appearing legitimate at first glance. Messages often offer something that seems too good to pass up such as a surprise gift or unexpected refund or have a sense of urgency such as a package on hold. Messages frequently contain attachments or hyperlinks

to pages that can also look legitimate but are designed to steal or record your data.

- If you receive any such messages
 - Do not forward or reply to the message
 - Do not click any links or attachments
 - Do not immediately volunteer any requested information
 - Report the email to Travis County Information Security.
 - Delete the email.

❖ **Training**

- Travis County requires that employees who handle or encounter PHI complete a HIPAA training course through SAP. annually
- The annually required training appears in your Learning Assignments section of SAP.

- Additional resources can also be found on the Compliance and Privacy intranet site and Travis County's [LinkedIn Learning module](#).

If you have any questions about what is protected information, what information you are allowed to share, and who you are allowed to share it with contact your supervisor or the Compliance and Privacy Office.

❖ **Compliance and Privacy Office**

- Privacy@traviscountytexas.gov
- **Hotline** - (512) 854-1114
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❖ **Compliance and Privacy Office Website and Resources**

