

HIPAA Facts: The Truth Behind HIPAA Myths

With all of the regulations and rules in HIPAA, many practices are confused and perhaps a little hesitant about compliance. Many consultants, lawyers and even associations portray HIPAA as complex and intimidating. We hear some pretty outrageous myths about HIPAA compliance.

MYTH #1

“We heard that we can’t talk to other doctors about a patient’s care without an authorization.”

THE TRUTH

Not true. Doctors, other healthcare providers, and their administrative staff may converse with patients, the patient’s personal representatives, a payer or another physician involved in the patient’s care about the care or about payment issues. HIPAA does say, however, that you should take care to minimize any non-essential disclosure by 1) only discussing items relevant and necessary for the patient’s well-being or your payment, and 2) keeping your voice moderated to minimize others overhearing these private conversations.

Authorizations are for those times, such as forwarding medical records to a patient’s school or employer, when you need to disclose specific patient information for other than treatment, payment or health care operations purposes. Under these circumstances you will need to obtain a patient’s written authorization.

MYTH #2

“My friend told me that we have to use beepers/a take-a-number system/a waiting room seating chart to call patients in from the waiting room.”

THE TRUTH

Some of the wildest rumors we have heard have been around this very issue. However, none of these are true! Health and Human Services (HHS) has specifically clarified that patients may be called from the waiting room by the usual salutation, including first and last name.

Again, you will want to limit any treatment or payment-related discussions around other patients, relying instead on the time you have in the operator or using paper forms to collect information rather than verbal questions.

MYTH #3

“Someone said we couldn’t use sign-in sheets or had to use special peel-off labels on our sign-ins.”

THE TRUTH

Not true. HHS has ruled that healthcare providers may use regular sign-in sheets, so long as the information contained on them is the minimum possible. What this means to you is that your sign-in sheet should have a place for the patient’s name, which provider they are there to see (if there is more than one provider), and perhaps a check box for change of address, change of health status and/or change of insurance. However, you should not include the treatment they are there for. In the case of the latter three items, you will want to make change of address, medical history and change of insurance forms available separately as needed.

MYTH #4

“We heard that it is going to cost a lot of money to comply with HIPAA. We can’t afford it!”

THE TRUTH

For a small provider office, HIPAA compliance does not have to cost much money at all. While larger health systems, hospitals and insurance companies are spending millions on compliance, much of their spending is going towards updating their computer systems to ensure they can comply with HIPAA’s transactional compliance standards. You, instead, will likely rely on your software vendor or clearinghouse for assistance.

For a small practice, two things are true:

- The regulations specifically recognize that small practices have special needs. HIPAA is scalable and smaller practices are, therefore, being held to a different, less rigorous standard for things like separation of duties and security of information. Certain issues, like providing patient rights, are universal however and will be applied consistently.
- HIPAA requires reasonable protection of patient information. What is ‘reasonable’? Well, the regulations provide some direction, but leave considerable latitude in the implementation specifics so that each provider is responsible for considering and deciding, in their professional opinion, what is appropriate and in keeping with the regulations in their particular practice setting.

Meeting HIPAA regulations cost-effectively means applying creative solutions to HIPAA requirements. The regulations specifically say that you do not have to change your physical office space to meet HIPAA requirements, but that you must do the best you with what you have. Knowing and following the rules is the first step; knowing how to apply them is equally important. Using some of the numerous creative, low-cost approaches to HIPAA compliance means that HIPAA does not have to cost you much at all.

“There were a lot of false rumors going around about what we would have to do to become compliant and I really enjoyed hearing what was required. It cleared up everything for me. I came away from the seminar feeling less anxious. [I told the office that] it wasn’t going to be as much of a transition period that we thought it was going to be. We were thinking that we would have to lock down our charts, rearrange our scheduling and confirming techniques and ... we’re okay. It really helped!”

A satisfied HIPAA*Now!* customer, Hoover, AL



Agent 77’s HIPAA*Now!* Toolkit gives you the straight answers on everything related to HIPAA — what you need to do, when you need to do it, how to go about it, and what it will take to be compliant.

The HIPAA*Now!* Toolkit is easy to understand and provides the practical advice you need to understand how to approach HIPAA creatively and cost-effectively — all at an affordable price.

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