Section 12

Privacy

Introduction

HPSM is committed to helping protect the privacy and integrity of our members' Protected Health Information or "PHI". As a Covered Entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), you have an obligation and responsibility to protect your patient's and our member's PHI.

This section of the Provider Manual seeks to guide providers and other plan partners to secure HPSM's members PHI as well as identifying and reporting privacy incidents to HPSM.

Definitions

Privacy Incident is a situation where an individual or organization has suspicion or reason to believe protected health information (PHI) may have been lost, sent in an unencrypted format, or otherwise provided to an individual or organization that does not have a right to review or receive the PHI.

Incidents can affect one or more plan members.

Examples of Privacy Incidents

Privacy incidents may be unintentional and accidental or they may be intentional. The release of PHI in may be in a variety of formats: oral, written and electronic. The list below is not considered exhaustive. Potential incidents should always be reported to HPSM.

PHI sent to the wrong individual/organization

Examples include sending a fax to the wrong number or mailing PHI to the wrong address/individual.

PHI left unencrypted

Examples include PHI that is accessed electronically or sent to an unauthorized individual by email, and the PHI is not encrypted or otherwise unreadable.

Theft

Examples include PHI that is stolen due to the theft of an unencrypted or unprotected laptop or desktop; theft of hard drives or other media with PHI that is not encrypted, or theft of paper PHI.

Privacy and Security Safeguards

HPSM has adopted many safeguards to ensure our Members' PHI is properly used, disclosed, and safeguarded and we want to take this opportunity to remind you of some common areas of focus:

- Protect your computer passwords. Do not share passwords with your assistant, co-workers or family members. Do not let anyone else use your password. Do keep your passwords absolutely secret and confidential.
- Secure your laptop at all times. Sign off the laptop when you are not using it. Install encryption software on your laptops in case it is lost or stolen.
- Confirm that you are using the correct fax number before you fax any PHI.
- Protect your paper medical records and do not leave any PHI in publically accessible areas. Keep documents containing PHI in secured location such as locked file cabinets or rooms.
- Shred any PHI in appropriate receptacles and do not throw any PHI in the regular trashcans.
- Make sure any electronic media with PHI is disposed of properly including CDs, Thumb Drives, and Hard Drives in laptops, printers, and copier machines.
- The list of privacy and security practices are not exhaustive. If you have any questions or need more information, please contact HPSM's Privacy Officer at the number below.

Reporting Privacy Incidents

If you suspect or know about a privacy incident involving HPSM members PHI, you must report it to HPSM and we'll investigate. Your actions can help mitigate the potential negative impact of the incident on the member(s).

To report suspected privacy incidents, you can contact HPSM in one of these ways:

- **Phone:** 650-616-0050
- **Fax:** 650-829-2050
- **E-mail:** compliance@hpsm.org
- **Mail:** Health Plan of San Mateo

  Attn: Compliance Department

  801 Gateway Blvd., Suite 100

  South San Francisco, CA 94080
- **Compliance Hotline:** 800-826-6762

You may remain anonymous if you prefer by calling the Compliance Hotline.

All information received or discovered by the HPSM's Compliance Department is treated as confidential, and the results of investigations is shared only with persons having a legitimate reason to receive the information (e.g., state and federal authorities, HPSM legal counsel, HPSM clinical reviewers and/or senior management).

You can also report potential breaches of PHI to the following agencies, depending on the program affected.

Resources

Office of Civil Rights Regional Office

http://www.hhs.gov/ocr/filing-with-ocr/index.html

Michael Leoz, Regional Manager
Office for Civil Rights
U.S. Department of Health and Human Services
90 7th Street, Suite 4-100
San Francisco, CA 94103

Customer Response Center: (800) 368-1019

Fax: (202) 619-3818
TDD: (800) 537-7697

Email: ocrmail@hhs.gov

HIPAA FAQs for Professionals

http://www.hhs.gov/hipaa/for-professionals/faq

DHCS Office of HIPAA Compliance – Information Protection Unit

http://www.dhcs.ca.gov/formsandpubs/laws/priv/Pages/default.aspx