

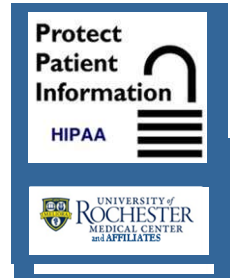
Johnson, Gregory M

From: HIPAA Highlights
Sent: Friday, July 30, 2021 3:03 PM
To: All URMCA Users
Subject: HIPAA Highlights, July, 2021

HIPAA HIGHLIGHTS

July 2021

Paper Document Errors - Do you have the right patient?



Imagine that you return home from an appointment at URMCA and Affiliates and realize the after visit summary (AVS) you are holding is not your own or you open up mail containing someone else's lab results or bill. **Would you wonder who walked away with your AVS or received your protected health information (PHI) in the mail?** Worse, imagine you are the other patient who received notice their PHI was inadvertently shared. **Would it shake your confidence in your healthcare provider's ability to protect your medical information?**

Paper document errors **are the most frequent HIPAA breaches of PHI at URMCA and Affiliates**, and they highlight the enormous responsibility of handling patient information. Examples include AVSs, lab results, lab requisitions, medications, itemized bills, statements of payment, referrals, and appointment or other letters. When misplaced or given out to the wrong patient, commonly used documents can have serious implications for the patient and our organization. Consider the results:

For your patient:

- Frustration, anger and embarrassment, possible missed appointments
- Loss of trust in URMCA and Affiliates to protect their private information and possible decision to seek care elsewhere.

For URMCA and Affiliates:

- Negative public perception (word travels fast through the community and social media)
- Approximately one to six hours of administrative time per incident trying to rectify the situation
- Potential government investigations that can result in fines exceeding a million dollars.

Clearly there is a lot at stake. So what can you do to help protect patient information?

Follow a standard process when managing these documents.

The [Patient Document Handoff Standard](#) outlines steps for in-person handoffs of paper documents that if followed, greatly reduce the chance of giving PHI to the wrong patient. Some steps are adaptable to mailed documents as well. These steps include:

- Always greet the patient upon entry & exit and obtain two patient identifiers, usually Name and Date of Birth.
- Ask patients with MyChart that do not require post procedure instructions if they would like to receive their AVS via their MyChart. If they agree, **you do not need to print** the AVS.
- Do not hand-off separate documents to the patient. Wait until all of the documents they require have been printed.
 - Do not staple or clip the documents together;
 - Do not place them underneath an object or other non-PHI documents.
- Always review each printed page for the two patient identifiers:
 - Highlight the identifiers if this is part of your department process.

- Always make eye contact with the patient during the handoff process. Involve the patient in the process. Ask them to review each page for accuracy of their demographics. If an error has been made, this is the time to correct it, not after the patient has left the area!

What process or other changes may help reduce errors in your department? Do you need to revisit the printer configuration, or how/where paper documents are stored or retrieved? Are there “environmental” changes that can increase staff focus? **Remember, patients rely on us to protect their information. You hold the key to making sure that happens.**

For additional information on any HIPAA-related topics, please refer to the URMS intranet site at <http://sites.mc.rochester.edu/departments/hipaa/> . For any questions regarding HIPAA, please contact your [Privacy Officer](#) or [HIPAA Security Official](#).