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Your Right to Healthcare Privacy and Information

Every time we visit a doctor or pick up a prescription, we are asked to sign a form or computer screen that includes a rather lengthy explanation of our privacy rights with regard to our health information.

Although many of us may not bother to read the printed material, all healthcare providers are required to protect the individual's privacy in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Prior to that, different states regulated the use and disclosure of patient records in different ways. HIPAA was the result of Congress's recognition of the need for uniform, national privacy standards, especially in light of the growing use of electronic transactions between hospitals, physicians, pharmacies, and insurance providers. It took several years before the rules of HIPAA were finalized, but now "all medical records and other individually identifiable health information used or disclosed by a covered entity in any form, whether electronically, on paper, or orally, are covered," according to the U.S. Department of Health and Human Services.

During the past 50 years, two new trends in the delivery of health services have emerged: the arrival of managed care, followed by the increasing role of the individual in making his or her own healthcare decisions. This latest trend is known as consumer-powered healthcare. By changing the role of individuals from patients to consumers, it is believed the public will demand better healthcare information and patient safety, and will act to stem the rising cost of healthcare.

The passage of HIPAA with its final regulations enhances the role of patient as consumer by providing individuals new rights in understanding and controlling how individual health information is used. These new rights include:

- the requirement that health care providers and health plans explain to patients, in writing, how that plan or provider may use their health information and the ways in which that information can be disclosed;
- the right to see and get copies of health records, to amend those records, and to obtain a history of all "non-routine" disclosures of their health information.
- the requirement that patients must give their consent before any information concerning treatment, payment, or other healthcare operations can be shared between any healthcare entities; further, a separate consent must be given by the patient to allow disclosure of any information for non-healthcare or non-routine purposes;
- the right to file a formal complaint with a provider or health plan, or with the Department of Health and Human Services, if the regulations governing disclosure are violated.

While HIPAA protects the individual's privacy in health care matters, there are times when it is not feasible to adhere to the disclosure rules. Examples include times of emergency, identification of a deceased person, when the public health is threatened, during limited law enforcement activities, or when the national defense or security is in jeopardy.

By providing the assurance that health information will be protected uniformly throughout the country, the HIPAA regulations now in place should promote higher quality of care. Modern technology opens the door to the creation of electronic health records (EHRs), which allow the individual to compile all their health information in one lifelong electronic record. The individual will be able to enter all health information, including medical conditions, names and contact information for all doctors and providers, prescriptions and dosages, laboratory tests and results, allergies, health information, and insurance plans and identification numbers. He or she also will be able to enter, update, and delete information as conditions change, and only the individual will decide who may have access to that information (for example, the primary care provider). Such electronic records would allow doctors to have the complete picture of the patient's health, reducing the risk of medical errors and the possibility of duplication of tests and other services.

While a number of issues remain to be resolved, the American Health Information Community (AHIC), formed in October 2005, takes its mission to "advance efforts for most Americans to have electronic health records within 10 years" seriously. If access, security, and liability concerns can be resolved, EHRs have the potential to improve health services, reduce duplication of services and costly medical errors, and reduce unnecessary healthcare costs. Fewer errors should lead to fewer lawsuits, and medical malpractice rates could diminish, further contributing to reining in healthcare costs.

The week of April 9-15 has been named Health Information Privacy and Security Week by the American Health Information Management Association (AHIMA) to raise public awareness about the importance of protecting, the "privacy, confidentiality, and security of personal health information." To learn more about your privacy rights with regard to healthcare, contact AHIMA at www.ahima.org or the U.S. Department of Health and Human Services at www.aspe.hhs.gov (1-202-690-6343). For additional information about this or other public health issues, contact the Central Connecticut Health District at www.ccthd.org (860-721-2824).