Maintaining HIPAA Compliance for Practices and Clinics:

Let’s Make This Easy

By: Stanley E. Adams III, PE, CEO, of ICS Medtech, LLC

Everyone is in the Same Boat...
The specter of HIPAA compliance continues to haunt practice managers and physicians. The rules and regulations continue to change. There is greater specificity in the requirements and the consequences. The effort to achieve and maintain compliance is time consuming. No compliance manager can contribute the time required to effectively address HIPAA compliance mandates. The technology analysis requirements to meet the published audit protocol require specialized resources to achieve and maintain compliance. A successful process requires highly technical and regulatory proficient process managers. The internal IT staff can gather data but an auditor will not accept an in-house analysis of these systems and processes. The risk to the physicians and the practice is far too great. This process has to be followed correctly.

Half Measures Offer No Protection...
To meet the criteria stated in the compliance regulations, complete documentation and analysis of the technology network and security measures are required. Some service providers take the position of addressing only the process and procedure requirements. They state the requirements as if that will be enough for a federal auditor to accept HIPAA compliance. The published protocol by CMS, the audit agency for OCR, clearly states that the evidence that policies and procedures are followed as well as technical standards are consistently practiced is a basic requirement. It is important to be sure that a comprehensive service is provided that addresses the complete audit protocol and maintains audit readiness at all times. Any funds spent on half measures are wasted.

Time Constraints Will Mandate the Service...
Obtaining and maintaining HIPAA audit readiness is a time consuming process. A new critical factor addressing audit readiness comes in the latest published audit protocol from CMS that states in general, the practice will have 10 days from the day a letter of inquiry for Meaningful Use is sent to provide all of the required documentation. This includes an annual assessment. There is now no choice but to have all of this documentation electronically stored so it can be transmitted to CMS on short notice. What are the consequences of not providing all of the required documents and analysis within the timeframe? The auditor is likely to show up at the door of the practice.

What About Training?...
The regulations have a certain ambiguity with regards to training requirements. The most commonly accepted standard is that each staff member must have 1 hour of HIPAA training each year. The certification of this training is a required part of the audit readiness documentation. Training is not expensive. It can all be completed online. There is no need for onsite training or multi-hour training courses. This may be the easiest part of the compliance regulations to achieve.

Understand the Cost...
Once the process is standardized and made easy the obvious concern becomes, at what cost? No one wants to consider a pay by the hour cost model. This is a standardized process and it can be priced at a standard cost based on the size of the practice. The total cost should be stated up front for the annual assessment and for ongoing documentation management. The cost should reflect the full effort to address all of the CMS published audit protocol points and to manage the process for continuous audit readiness.

Cyber Security Insurance...
Cyber Security Insurance alone will not protect the practice from an audit or the punitive damages resulting from an audit. Most of these policies require complete annual assessments before the policy is accepted or to avoid denial of coverage for important provisions. Any insurance policy that is provided without the risk mitigation of a complete assessment will have very limited coverage.

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Check the sub limits within the policy. Understand what security measures are required to maintain the policy in force. Half measures will not meet the assessment requirements that the insurance industry has applied to Cyber Security Insurance policies. The lack of a complete assessment may not be reflected in higher premiums for a basic policy but it will cause certain coverage within the policy to be denied at the time of a claim. Please read the requirements within the policy. A lack of audit readiness will also make it impossible to qualify for more comprehensive policies. Be aware of the actual limits for Cyber Security coverage imbedded in other policies. You will be surprised. What will $50,000 of Cyber Security coverage do for you after a breach?

Myths and Legends...
Following misinformation is the easiest way to find your practice unprepared for a HIPAA inquiry, much less an audit. How do you know who to believe? Simply apply logic. For example, hosted services and cloud services are available for everything from your EMR to your E-mail to your telephone system. Apply logic and you will quickly see that two of these make sense and one does not. EMR and E-mail can be hosted in HIPAA compliant certified hosting services that can be verified. What about hosted voice and more importantly voice mail service? You will have an audit finding for hosted voice and voice mail services because there is no way to demonstrate in your assessment that HIPAA compliance exist for these services. Obtaining a Business Associate Agreement from a service provider when it is not logical to believe that they are compliant does not reduce audit exposure. This is just one example to consider when deciding if the service proposed makes sense for a HIPAA covered entity. Another issue that must be addressed with pure logic is denial that a particular type of practice is not subject to HIPAA inquiry or audit or is unlikely to be audited. It is a terrible day when a letter of inquiry is received from CMS, no assessment has been completed and all of the documentation requested is not electronically available to meet the 10 day deadline. Myths and legends lead to misinformation and denial which lead to audits and penalties. Realistic assessment of the situation is the best way to put forth the right amount of effort and to achieve the desired results.

Let’s Make This Easy...
It is obvious that a standardized, automated, complete process is needed, where the actual work is completed by the audit readiness provider with minimal input from the practice manager and the practice staff. This third party analysis team should also collect and maintain all of the required analysis, evidence, documents, and training certifications in a HIPAA compliant, offsite, storage facility. This is the process that provides the needed service. This is the process that can meet the time requirement. Let’s make this easy and move on with the actual practice of patient care.

About the Author: Stan Adams is the CEO of ICS Medtech, LLC. which is a subsidiary of ICS Inc., a technology systems integrator in Alabama since 2006. ICS Medtech combines technology expertise as well as federal regulatory audit experience to provide healthcare clients reliable professional services. Contact the ICS Medtech Help Desk at 205-423-6940 or email at stanadams@ipdvv.com for additional information.

IN MEMORIAM
The JCMS wants to acknowledge the recent passing of the following JCMS members:

AUBREY THOMAS BAUGH JR., M.D.
MAY 7, 2015

ELIZABETH G. DOWDY, M.D.
MAY 20, 2015

WILLIAM HENRY TAYLOR, JR., M.D.
SEPTEMBER 21, 2015
James C. Grotting, M.D., has been named the new President of The American Society for Aesthetic Plastic Surgery - the leading national organization comprised of over 2,600 board-certified plastic surgeons that specialize in aesthetic surgery of the face and body. New officials were elected for the 2015/2016 term on May 17, 2015, at The Aesthetic Meeting in Montreal, PQ, Canada.

Dr. Grotting is currently a clinical professor of plastic surgery at the University of Alabama at Birmingham and the University of Wisconsin-Madison, and operates a private practice in Birmingham, AL. Dr. Grotting is also a senior examiner and director of the American Board of Plastic Surgery and a fellow of the American College of Surgeons. In addition to being President of ASAPS, he has served as chair of the Society’s Education Commission, serves on multiple Society committees and is a board member of the Aesthetic Surgery Education and Research Foundation (ASERF), the nonprofit research and education arm of ASAPS. He serves on numerous editorial boards and is the author of five major textbooks in the specialty of plastic surgery. Dr. Grotting has provided free plastic surgery for children with facial deformities in developing countries, through Operation Smile, since 1987.

Dr. Grotting’s tenure as President will revolve around expanding aesthetic fellowships available to plastic surgery residents, improving aesthetic education for members and within ASAPS’ educational offerings, improving relationships within the national and global plastic surgery community, and continuing to emphasize the importance of patient safety in aesthetic plastic surgery.

In the News

Upcoming Events

Oct. 19  Executive Committee Meeting – 5:30 p.m.

Oct. 20  The Wayne Finley 811 Breakfast Meeting – Richard Blackwell, M.D., will speak on “Three Decades of Advances in Reproductive Endocrinology and Infertility” at 8:30 a.m. in the JCMS Board Room

Nov. 3   JCMS Annual Social Event – The Club from 6:00 p.m. to 8:00 p.m.

Nov. 16  Foundation Trust Meeting – 5:00 p.m.
          Executive Committee Meeting – 5:30 p.m.
          Board of Directors Meeting – 6:30 p.m.

Nov. 17  The Wayne Finley 811 Breakfast Meeting – Carden Johnston, M.D., will speak on “Emergency Care for Children” at 8:30 a.m. in the JCMS Board Room

Dec. 15  The Wayne Finley 811 Breakfast Meeting – Panelists Alan Siegal, M.D., Robert Kreisberg, M.D., and Clifton Meador, M.D., will speak on the “History of Endocrinology at UAB” at 8:30 a.m. in the JCMS Board Room

Dec. 21  Executive Committee Meeting – 5:30 p.m.

Contact Juanita Pruitt at 933-8601 or jpruitt@jcmsalabama.org for more information regarding any of the above events.
The Jefferson County Medical Society Invites You to Attend its Annual Social Meeting To Have the Opportunity to Spend Time With Your Colleagues

THIS YEAR’S EVENT WILL BE HELD AT

THE CLUB IN THE GLEN IRIS STATEROOMS

TUESDAY, NOVEMBER 3, 2015
6:00 – 8:00 P.M.
COCKTAILS & HEAVY HORS D’OEUVRES

6:30 P.M. – BRIEF ANNUAL BUSINESS MEETING
INTRODUCTION OF 2015 SCHOLARSHIP RECIPIENTS

THIS YEAR’S EVENT IS SPONSORED BY

PROASSURANCE

PLEASE CALL THE JEFFERSON COUNTY MEDICAL SOCIETY AT 205-933-8601 FOR RESERVATIONS

DEADLINE FOR RESERVATIONS: WEDNESDAY, OCTOBER 28, 2015

Due to guarantee requirements at The Club, we will not be able to accept reservations after that time. Cancellations must also be received by October 28 to avoid charges for your reservation.

Thank you for your understanding.
SCHOLARSHIP UPDATE

We would like to Congratulate the 2015 JCMS Medical School Scholarship Recipients

William Clinton Erwin
James Blake Hammock
Kelsey Caitlin Real
Siamak Mohammad Zaki Yazdi
Chenhang Zou

Lose or break your pager?
We will replace it that day!!

Alpha and numeric replacement pagers are available 24/7. We are here when you need us!
Call Mary Whitehead at (205) 933-8601.

Please visit us at jeffersoncountymedicalfoundationtrust.org for more information about our paging services as well as our other services.
ProAssurance.com
Medical professional liability insurance specialists providing a single-source solution
ProAssurance.com

When you need it.

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