



Remote Access to Medical Records Frequently Asked Questions

Q: Is it a HIPAA violation for Peoples Health to have remote access to patients' medical records?

A: HIPAA allows covered entities—such as Peoples Health and healthcare providers—to use and disclose protected health information for treatment, payment and healthcare operations purposes.

Per the U.S. Department of Health and Human Services website at <https://www.hhs.gov>:

The HIPAA Privacy Rule permits a provider to disclose protected health information to a health plan for the quality-related health care operations of the health plan, provided that the health plan has or had a relationship with the individual who is the subject of the information, and the protected health information requested pertains to the relationship. See 45 CFR 164.506(c)(4). Thus, a provider may disclose protected health information to a health plan for the plan's Health Plan Employer Data and Information Set (HEDIS) purposes, so long as the period for which information is needed overlaps with the period for which the individual is or was enrolled in the health plan.

Refer to <http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/index.html> and <https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/disclosures-treatment-payment-health-care-operations/index.html> for additional information about HIPAA requirements.

Q: For what purposes would Peoples Health need access to patients' medical records and why?

A: Peoples Health requires access to the medical records of its plan members to carry out various healthcare operations and payment activities. Those activities include, without limitation, conducting quality assessment and improvement activities, including outcomes evaluation and development of clinical guidelines, case management and care coordination, and medical necessity and utilization review.

For example:

- The **quality department** routinely audits electronic medical record (EMR) and paper medical record systems to obtain information to close care gaps related to quality, HEDIS and star measures for patients who are noncompliant in identified measures or audits. The information gathered is used to close gaps in care and provide timely information to providers regarding performance related to the audit metrics.
- The **coding department** identifies patients whose records show they were coded for a specific chronic condition in the past but the records do not show that the condition was coded in the current year. A patient's chronic conditions must be

documented, coded and reported each year to ensure proper risk adjustment reimbursement.

- The **medical management department** reviews inpatient and observation admissions, utilization management and ongoing patient clinical information to coordinate care plans and discharge planning with the facility's case management department; as well as assists in coordination of care, assessing patient educational needs, chart preparation, medication reconciliation, medication adherence and ambulatory setting activities (i.e., emergency room utilization, physician and specialist visits).

Q: Must a patient give permission for Peoples Health to access his or her records?

A: No. A patient's authorization is not required for Peoples Health to access and use the patient's protected health information for payment and healthcare operations purposes.

Q: Does Peoples Health access the information of patients who are not Peoples Health plan members?

A: No. Peoples Health employees are trained to only access the files and records of Peoples Health plan members and are instructed to access and use only the minimum necessary protected health information of a member to accomplish the intended purpose of the use.