# HIPAA Enforcement Rule

Aimee Wall Health Directors' Legal Conference Institute of Government April 20, 2006

## Refresher Course

- Congress passed HIPAA in 1996
- Various HIPAA rules adopted establishing national standards
  - Transactions and code sets (October 2002)
  - Privacy (April 2003)
  - Security (April 2005)
  - Identifiers
    - Employer (July 2004)
    - Provider (May 2007)
  - Claims attachments (Proposed 9/05)

<sup>\*</sup> With the exception of the claims attachments rule, dates in parentheses are the compliance dates

### Enforcement Rule

- o Timeline
  - Interim final rule published April 2003; sunset March 2006
  - Final rule published February 2006; effective March 16, 2006
- Addresses US DHHS standards and procedures related to <u>civil</u> enforcement of all HIPAA rules
  - US DOJ will handle <u>criminal</u> enforcement

#### Good News and Bad News

- Bad news: US DHHS now has a strong framework in place to enforce the rules
- Good news: US DHHS is sending a clear message to covered entities
  - "...encouraging voluntary compliance is the most effective and quickest way of obtaining compliance in most cases."

#### • • Two possible routes

- Complaint
  - Anyone may file a complaint
  - Must be filed within 180 days of when the complainant knew or should have known of the violation <u>unless</u> DHHS waives time limit for good cause
- Compliance review
  - US DHHS may conduct compliance reviews at any time; not complaint driven

## If your local health department is investigated...

- US DHHS will contact local health department (LHD) in writing describing the reason for the investigation
- LHD must cooperate with US DHHS requests for records and reports
- US DHHS may subpoena records or witnesses
- Interviews will be sworn; recorded and transcribed

#### • • What will happen?

- LHD must permit access to facilities and records (including PHI) during normal business hours
  - If exigent circumstances exist, LHD must permit access at any time and without notice
- If an investigation reveals noncompliance, US DHHS will try to resolve through informal means, which may include
  - Demonstrated compliance or
  - Corrective action plan

### • • What will happen?

- If resolved informally, US DHHS will inform the LHD and the complainant (if any) in writing
- If <u>not</u> resolved informally, US DHHS will provide the LHD with an opportunity to submit evidence of
  - Mitigating factors
  - Affirmative defenses
    - Punishable as a criminal offense;
    - Did not know of the violation and, by exercising reasonable diligence, would not have known; or
    - Due to reasonable cause and not willful neglect and corrected within a time period approved by US DHHS

#### • • • What will happen?

- If US DHHS decides to impose a fine, it will send dept a <u>notice of proposed</u> <u>determination</u>
  - NPD will outline the amount of the fine and explain the basis for the fine
  - NPD will explain that LHD has a right to a hearing if requested within 90 days
- US DHHS may settle the case and compromise the penalty at any time

#### • • What will happen?

o If no hearing requested, penalty imposed

- NO RIGHT TO APPEAL
- Public notification
- Can withhold federal funds
- If hearing requested, a federal ALJ will review
  - Prehearing conference(s) with ALJ and parties
  - Document discovery but no witness depositions

#### • • • What will happen?

- ALJ may affirm, increase or reduce the penalty
- Either party may appeal to the Departmental Appeals Board
- May file for judicial review



CE = Covered entity

ALJ = Administrative Law Judge

DAB = Departmental Appeals Board

#### Vicarious Liability for Agents

- LHD will be liable for violations based on the act or omission of any <u>agent</u> acting within scope of her agency unless
  - Agent is a BA;
  - LHD complied with BA requirements; and
  - LHD did not know of a pattern of activity or practice of the BA and failed to act.

#### • • Who is an Agent?

- Workforce member: employees, volunteers, trainees, or others whose conduct in the performance of work for a covered entity is under the direct control of the entity, whether or not they are paid by the entity
- Presumption that any workforce member is an agent
- Governed by federal common law of agency (not state law)

#### Who is an Agent?

- Employee?
  - Yes, workforce member
- Volunteer?
  - Yes, workforce member
- o Student or trainee?
  - Yes, workforce member
- Independent contractor?
  - Depends on whether "direct control"
  - If not, business associate

#### • • Calculating the fine

- Up to \$100 per violation and up to \$25,000 for violations of an identical requirement or prohibition in a calendar year
- Will <u>not</u> count a general requirement and a specific requirement
  - Example
    - General: Valid authorization required...
    - Specific: Expiration date or event required for an authorization to be valid

### • • Calculating the fine

 Will <u>not</u> count overlapping in same subpart

- Example
  - 164.502: Authorization required as provided in 164.508
  - 164.508: Authorization required when...Will count consequential
- Will count if requirements in different subparts (e.g., privacy, security)

#### • • Calculating the fine

• Will count consequential violations

- Example
  - Must conduct security risk analysis
  - Must use the analysis to implement a security risk management plan; steps in the plan follow from the analysis
  - Failure to do analysis could result in violations of both requirements

#### Calculating the fine

#### Number of violations

 Depends on the nature of the requirement or prohibition violated

#### Continuing violations counted in days

- "Some provisions embody a requirement or prohibition that is of an ongoing nature or for which timeliness is an element of compliance"
- Examples
  - Failing to adopt policies and procedures
  - Failing to provide access within the required time period

### Calculating the fine

- Will consider
  - Nature of the violation
  - Circumstances, including
    - Time period of violation
    - Whether violation caused physical or financial harm
    - Whether violation hindered or facilitated individual's ability to obtain health care
  - Degree of culpability
  - History of prior (administrative simplification) violations
  - Financial condition of the covered entity
  - Other matters as justice may require

