

ADMINISTRATIVE POLICY MANUAL

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A

Accounting of Disclosures –

A log that is maintained for each patient that indicates the disclosures that have been made of his or her PHI.

Active Medical Record –

The active Medical Record consists of two parts: (1) the active record which is filed at the nurses' station/active record storage area and (2) the overflow files. (See also Medical Record.)

Administrative Tribunal –

A judge or group of judges who conduct hearings and exercise judgment over specific issues involving persons or things.

Administrative – connotes of or pertains to administration, especially management, as by managing or conducting, directing or superintending the execution, application, or conduct of persons or things.

Tribunal – is the seat of a judge; the place where he administers justice. The whole body of judges who compose a jurisdiction; a judicial court; the jurisdiction that the judges exercise.

Alternative Communication Means –

Information or communications delivered to patients by the Home Care Unlimited of El Paso in a manner different than the normal practice of the Home Care Unlimited of El Paso. For example, the patient may ask for delivery at an alternative address, phone number or post office box; or that discussion of PHI be limited when specified people are present.

Amend / Amendment –

An amendment to PHI will always be in the form of information *added to* the existing PHI. This additional information may contain items that substantially change the initial PHI, make parts of the initial PHI more precise, or show some of the original PHI to be incorrect. However, the original PHI is never altered. Changes are indicated by the addition of the amended information.

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Authorization –

A patient's statement of agreement to the use or disclosure of Protected Health Information to a third party.

B

Business Associate (BA) –

A person or organization that performs a function or an activity on behalf of the Home Care Unlimited of El Paso that involves the use or disclosure of Protected Health Information. A business associate might also be a person or entity that provides legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation or financial services involving the use or disclosure of PHI.

C

CMS – Centers for Medicare and Medicaid Services –

The agency formerly known as HCFA (Health Care Financing Administration) that regulates and enforces Federal Regulations for Medicare in Long Term Care and other health care entities.

Conditioned –

An authorization is “conditioned” if a patient cannot obtain treatment or service unless he or she signs that authorization.

Continuum of Care –

A range of services available to people in the community. They include supportive, rehabilitative, preventive and social services. They meet various levels of need or impairment.

Court Order –

An order issued from a competent court that requires a party to do or abstain from doing a specific act.

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Covered Entity –

A health care provider who transmits health care information using one of the transaction standards defined by the Department of Health and Human Services. An example of this would be billing Medicare and Medicaid electronically for services your Home Care Unlimited of El Paso provides to a patient.

D

De-Identification –

The process of converting individually identifiable information into information that no longer reveals the identity of the patient. Information may be de-identified by statistical de-identification or the safe harbor method of de-identification.

De-Identified Health Information –

Health information that does not identify an individual and does not contain information that can identify or link the information to the individual to whom the information belongs.

Department of Health and Human Services (HHS) –

The federal agency charged with the development, statement and implementation of the HIPAA Privacy Rule.

Designated Record Set –

Patient Medical Records and billing records maintained and used by the Home Care Unlimited of El Paso to make decisions about the patient. In this context a record is any item, collection, or grouping of information that contains Protected Health Information and is maintained, collected, used or disclosed by the Home Care Unlimited of El Paso . The Designated Record Set also includes billing information that may contain ICD-9-CM codes that represent health conditions of the patient and that are part of the patient’s Protected Health Information.

For access to the Designated Record Set, the State Operations Manual [SOM] (F153) allows the patient to “have access to all records pertaining to him or her including current clinical records.” The Guidance to Surveyors indicates that the term “records” includes “all records pertaining to the patient such as trust fund ledgers pertinent to the patient and contracts between the patient and the Home Care Unlimited of El Paso .”

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The SOM (F164) further defines personal records in the Guidance to Surveyors to include all types of records the Home Care Unlimited of El Paso might keep on a patient, whether they are medical, social, fund accounts, automated or other.

Directory Information –

The four pieces of information that are considered “Directory Information” include:

- Patient name
- Location in the Home Care Unlimited of El Paso (room/bed number)
- Condition described in general terms (e.g., "He is not feeling well." or "She is having a good day.")
- Religious affiliation (available only to members of the clergy)

Note: You would not want to post or display more than the patient’s name and room/bed number on your Home Care Unlimited of El Paso directory.

Disclosure –

To release, transfer, provide access to or divulge in any way a patient’s health information to individuals or entities outside your Home Care Unlimited of El Paso . (See also Use.)

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Routine Disclosure –Customary disclosures of PHI that the Home Care Unlimited of El Paso discloses on a regular basis.

Non-Routine Disclosure –Disclosures of PHI that are not usually disclosed by the Home Care Unlimited of El Paso .

E

F

Financial Records –

Admission, billing, and other financial information about a patient included as part of the Designated Record Set.

Fundraising –

An organized campaign by a private, non-profit or charitable organization designed to reach out to certain segments of the population or certain identified populations in an effort to raise monies for their organization or for a specific project or purpose espoused by their organization.

G

H

Health Care Operations –

Any of the following activities of a Home Care Unlimited of El Paso :

1. Conducting quality assessment and improvement activities, provided that the obtaining of generalizable knowledge is not the primary purpose of any studies resulting from such activities; protocol development, case management and care coordination, contacting of health care providers and patients with information about treatment alternatives; and related functions that do not include treatment;

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2. Reviewing the competence or qualifications of health care professionals, evaluating employee and Home Care Unlimited of El Paso performance, conducting training programs under supervision to practice or improve skills, training of non-health care professionals, accreditation, certification, licensing or credentialing activities;
3. Conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs;
4. Business planning and development such as conducting cost-management and planning related analyses related to managing and operating Home Care Unlimited of El Paso;
5. Business management and general administrative activities of Home Care Unlimited of El Paso / campus, including, but not limited to:
 - Customer service
 - Resolution of internal grievances
 - Due diligence in connection with the sale or transfer of assets to a potential successor in interest
 - Creating de-identified health information, fundraising for the benefit of Home Care Unlimited of El Paso /campus and marketing for which an individual's authorization is not required.

Health Care Provider –

An entity that provides health care, service or supplies related to the health of an individual, e.g., medical, dental, physical therapy, or chiropractic clinics; hospitals, etc.

HIPAA –

Refers to the **Health Insurance Portability and Accountability Act** of 1996, in particular the portion of the Act known as Administrative Simplification (Subpart F) dealing with the privacy of individually identifiable health information.

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I

Individually Identifiable Health Information (IIHI) –

Any information, including demographic information, collected from an individual that:

1. Is created or received by a health care provider, health plan, employer or health care clearinghouse; and
2. Relates to the past, present or future physical or mental health or condition of an individual, and
 - a. Identifies the individual or
 - b. With respect to which there is reasonable basis to believe that the information can be used to identify the individual.

Institutional Review Board (IRB) –

In reference to a research project, a board that is designated to review and approve proposed research and the process by which the investigator intends to secure the informed authorization of participants.

L

Limited Data Set (LDS) –

A data set that includes elements such as dates of admission, discharge, birth and death as well as geographic information such as the five digit zip code and the individual's state, county, city or precinct but still excludes the other 16 elements that "de-identify" information. In addition, this limited data set can only be used if a covered entity enters into a "data use agreement" with the data recipient similar to the agreements entered into between covered entities and their business associates.

M

Marketing –

1. To provide information about a product or service that encourages recipients of the communication to purchase or use the product or service, unless the communication is made:

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- a. To describe a health-related product or service (or payment for such product or service) that is provided by or included in a plan of benefits of the covered entity making the communication, including communications about the entities participating in a health care provider network or health plan network; replacement of, or enhancement to, a health plan; and health-related products or services available only to a health plan enrollee that add values to, but are not part of, a plan of benefits;
 - b. For treatment of that individual; or
 - c. For case management or care coordination for the individual, or to direct or recommend alternative treatments, therapies, health care providers or settings of care to the individual.
2. An arrangement between a covered entity and any other entity whereby the covered entity discloses Protected Health Information to the other entity in exchange for direct or indirect remuneration, for the other entity or its affiliate to make a communication about its own product or service that encourages recipients of the communication to purchase or use that product or service.

Medical Record: -

The collection of documents, notes, forms, test results, etc. which collectively document the health care services provided to an individual in any aspect of health care delivery by a provider; individually identifiable data collected and used in documenting healthcare services rendered. The Medical Record includes records of care used by healthcare professionals while providing patient care services, for reviewing patient data, or documenting observations actions or instructions. The Medical Record is included as part of the Designated Record Set.

Minimum Necessary –

The least amount of Protected Health Information needed to achieve the intended purpose of the use or disclosure. Covered Entities are required to limit the amount of Protected Health Information it uses, discloses or requests to the minimum necessary to do the job.

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N

Notice of Privacy Practices –

A document required by HIPAA that provides the patient with information on how the Home Care Unlimited of El Paso generally uses a patient's Protected Health Information and what the patient's rights are under the Privacy Rule.

O

Office of Civil Rights –

The agency with the U.S. Department of Health and Human Services that has responsibility for enforcement of the HIPAA Privacy Rule. (www.usda.gov/cr/)

Opt Out –

To make a choice to be excluded from services, procedures or practices. Patient rights under HIPAA include many situations where the patient may request to be excluded from a service, procedure or practice. In most cases, the Home Care Unlimited of El Paso must comply or attempt to comply with the request to be excluded.

P

Payment –

The activities undertaken by a health care provider or payer to obtain reimbursement for the provision of health care.

Personal Representative –

Is the term used in the Privacy Rule to indicate the person who has authority under law to act on behalf of a patient. *For purposes of the Privacy Rule a Home Care Unlimited of El Paso must treat a personal representative as having the same rights as the patient unless there is a reasonable belief that the personal representative has subjected the patient to abuse or neglect, or treating the person as the personal representative could endanger the patient.*

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Policy –

A high-level over-all plan embracing the general principles and aims of an organization.

Pre-emption / Pre-empts –

Taking priority over or supercedes.

Privacy Breach –

A violation of one's responsibility to follow privacy policy and procedure that results in the patients' PHI being accessed by unauthorized persons.

Privacy Official –

The person in the Home Care Unlimited of El Paso who is the designated point of contact for HIPAA-related issues and whose position includes oversight of training related to HIPAA. May also be called the Privacy Representative or the HIPAA Point of Contact (HPOC).

Privacy Officer –

The person designated by the organization who is responsible for development and implementation of the HIPAA policies and procedures. The Privacy Officer serves as a resource to assist each Home Care Unlimited of El Paso's Privacy Official in implementing HIPAA policies and procedures. HIPAA requires that each covered entity appoint a Privacy Official

Privacy Rule –

Refers to the regulation issued by the Department of Health and Human Services entitled Standards for Privacy of Individually Identifiable Health Information that was published on December 28, 2000, and subsequently modified on August 14, 2002. The effective date for the Privacy Rule is April 14, 2003. In this Policy and Procedure Manual, "HIPAA" and "Privacy Rule" are used interchangeably.

Protected Health Information (PHI) –

Information that is a subset of health information, including demographic information, and:

1. Is created or received by a health-care provider, health plan, employer or health-care clearinghouse; and

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2. Relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and
 - a. That identifies the individual; or
 - b. There is a reasonable basis to believe the information can be used to identify the individual.

Psychotherapy Notes –

Notes that are recorded (in any medium) by a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a group, joint or family counseling session. Psychotherapy notes must be kept separate from the rest of the patient's Medical Record.

Q

Qualified Protective Order –

A legal command intended to protect a person or thing from an unfair or unjust action.

Order – a mandate, precept; a command or direction authoritatively given; a rule or regulation.

R

Re-Identification –

The process of converting de-identified health information back to individually identifiable health information. Re-identified health information does reveal the identity of the patient and must be treated as PHI under the HIPAA Privacy Rule.

Research –

A systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalized knowledge.

Patient –

As used in this Manual includes patient.

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Revoke –

To cancel or withdraw an authorization to release medical information.

Role Based Access –

Access to PHI based on the duties of employees. The Home Care Unlimited of El Paso will identify persons or classes of persons in its workforce who need access to PHI to carry out their duties and make a reasonable effort to limit access PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request.

S

Safeguarding –

To ensure safekeeping of Protected Health Information for the patient.

Security Officer –

A position mandated by the HIPAA. The responsibilities of this person are to oversee implementation of the requirements mandated by the Final Security regulation and any security requirements included in the other sections of the HIPAA regulation.

State Operations Manual (SOM) –

Federal Regulations that govern all Skilled Nursing Facilities that receive federal funding from Medicare and/or Medicaid.

Subpoena (2 Kinds) –

A process to cause a witness to appear and give testimony, commanding him to lay aside all pretenses and excuses, and appear before a court or magistrate therein named at a time therein mentioned to testify for the party named under a penalty thereof.

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Duces Tecum –A request for witnesses to appear and bring specified documents and other tangible items. The subpoena *duces tecum* requires the individual to appear in court with the requested documents, or simply turn over those documents to the court or to counsel requesting the documents.

General Subpoena (AKA Ad Testificandum) –A command to appear in court at a certain time and place to give testimony regarding a certain matter, for example, to testify that the record was kept in the normal course of business.

T

TPO –

(See Treatment, Payment and Operation.)

Treatment –

The provision, coordination or management of health care and related services by the Home Care Unlimited of El Paso , including the coordination or management of health care by the Home Care Unlimited of El Paso with a third party; consultation with other health care providers relating to a patient; or the referral of a patient for health care between the Home Care Unlimited of El Paso and another health care provider.

Treatment, Payment and Operations (TPO) –

The Privacy Rule allows sharing of information for purposes of treatment, payment and health care operations. Treatment includes use of patient information for providing continuing care. Payment includes sharing of information in order to bill for the care of the patient. Health care operations are certain administrative, financial, legal, and quality improvement activities that are necessary for your Home Care Unlimited of El Paso to run its business and to support the core functions of treatment and payment.

U

Use –

To share, apply, use, examine or analyze health information within the Home Care Unlimited of El Paso . (See also Disclosure).

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V

W

Whistleblower –

A person, usually a staff member, who reveals wrongdoing within an organization to the public, government agencies or to those in positions of authority.

Workforce –

Employees, volunteers, trainees and other persons whose conduct, in the performance of work for the Home Care Unlimited of El Paso , is under the direct control of the Home Care Unlimited of El Paso , whether or not they are paid. Members of the workforce are not business associates.