

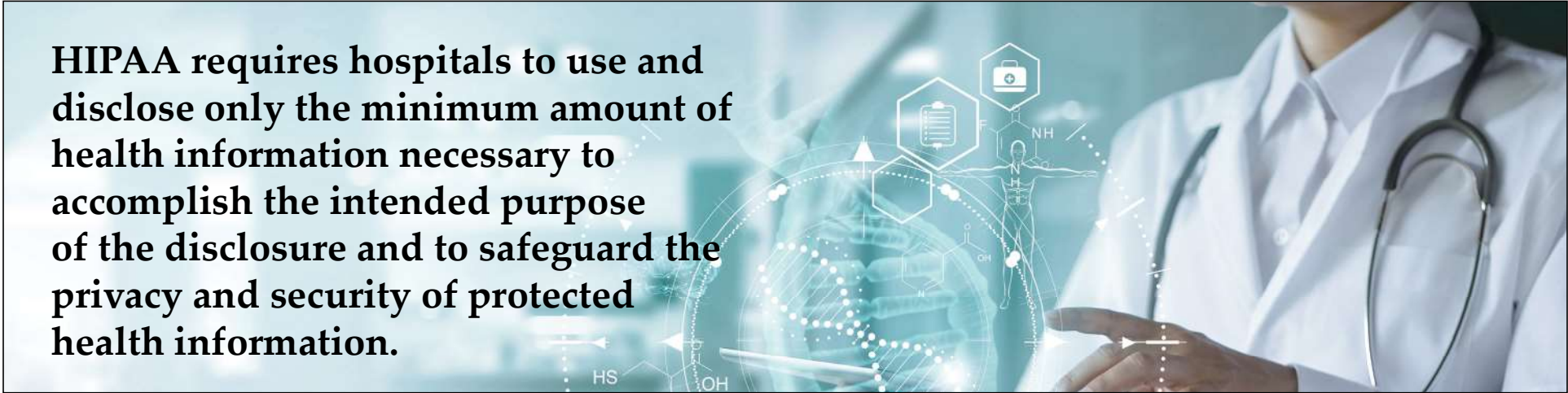
# Health Information

## HIPAA and the HITECH Act

The Health Insurance Portability and Accountability Act (HIPAA) is a federal law passed in 1996 that, among other things, included new laws regarding the privacy and security of health care data and eventually led to the development of extensive rules that govern how “covered entities,” including hospitals, use and disclose a patient’s health information. For example, a hospital may use or disclose a patient’s health information to enable providers to treat the patient, to obtain payment for services and for certain operations of a hospital, such as its quality and patient safety initiatives.

HIPAA requires hospitals to use and disclose only the minimum amount of health information necessary to accomplish the intended purpose of the disclosure and to safeguard the privacy and security of protected health information. HIPAA also limits the amount of money that hospitals and other providers may charge patients for copies of their medical records and creates new rights for patients, such as the right to request restrictions on how their health information is used and disclosed and the right to receive an account from hospitals of certain types of disclosures of their health information.

In 2009, Congress passed the Health Information Technology for Economic and Clinical Health (HITECH) Act, which significantly expanded the HIPAA privacy and security requirements. For example, the HITECH Act requires hospitals to inform patients when there is a security breach involving their unsecured health information and more directly regulates subcontractors that handle protected health information (“business associates”). In 2013, the U.S. Department of Health and Human Services (HHS) announced a final rule that implemented and strengthened a number of provisions of the HITECH Act, including clarifying requirements for business associates, increasing penalties for noncompliance, and clarifying when breaches of unsecured health information must be reported to HHS.



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## Electronic Health Records (EHR)

An Electronic Health Record (EHR) is an electronic version of a patient's medical history that is maintained by the provider over time. It may include all key administrative clinical data relevant to that person's care under a particular provider, including demographics, progress notes, problems, medications and other treatments, vital signs, past medical history, immunizations, laboratory data and radiology reports. The EHR automates access to information and has the potential to streamline the clinician's workflow. The EHR also has the ability to support other care-related activities, directly or indirectly, through various interfaces, including evidence-based decision support, quality management and outcomes reporting.

EHRs are the next step in the continued progress of health care that can strengthen the relationship between patients and clinicians. The data, and the timeliness and availability of it, will enable providers to make better decisions and provide better care. For example, the EHR can improve patient care by:

- Making health information available;
- Reducing duplication of tests and delays in treatment;
- Ensuring patients are well-informed to make better decisions; and
- Reducing medical errors by improving the accuracy and clarity of medical records.<sup>98</sup>

In one of its many provisions, the HITECH Act made federal incentive payments available to doctors and hospitals when they adopt EHRs and demonstrate use that can improve quality, safety and effectiveness of care. These funds were first available to eligible providers serving Medicare and Medicaid patients in September 2011 and will continue through 2021. As of October 2018, Medicare had paid Georgia hospitals more than \$681 million and Medicaid had paid Georgia hospitals more than \$320 million in incentive payments for EHR adoption.<sup>99</sup>

Many hospitals will use these payments to help cover the cost of their investment in EHR technology and its meaningful use. As of 2015, hospitals that are not meaningful users of EHR technology are subject to reductions in their Medicare payments.

## Georgia Health Information Exchange

A Health Information Exchange (HIE) allows physicians, nurses, certain qualified health care professionals and patients to securely access and share a patient's electronic health record. In Georgia, the Georgia Health Information Network (GaHIN) serves with the Georgia Department of Community Health (DCH) and the Georgia Health Information Technology Extension Center (GA-HITEC) in a public-private collaborative to enable Georgia's statewide health information exchange. The statewide HIE interconnects regional area HIEs, large integrated health systems, payers, wellness partners, state agencies and other health care organizations. The state HIE serves as the vehicle for data sharing across state lines through the Nationwide Health Information Network (NwHIN). The meaningful use of EHRs, patient engagement, as well as patient safety and quality improvements are key to a successful state HIE.