

Design Document

Training Title: Protected Health Information- Security and Patient Rights

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| Business Goal and Problem | <p>Wickfield Dental collects patient healthcare information, as well as payment data, in order to facilitate dental care. This information is stored in the Wickfield Dental's health management system, and may be shared electronically to submit claims, complete eligibility requests for services, deliver pre-determination treatment plans to the patient, make claim status inquiries, and complete treatment authorization requests. Wickfield Dental needs to adhere to HIPAA privacy regulations so patient personal health information is handled securely to avoid any violations and breaches from occurring.</p> <p>Due to a HIPAA violation complaint that was filed against Wickfield Dental, Dr. Wickfield's legal advisor and HIPAA Privacy Officer directed that everyone on the dental team at Wickfield Dental to complete a HIPAA training about protected health information to equip each employee with the necessary knowledge to protect sensitive patient health information and understand patient rights.</p> |
| Target Audience | <p>Employees at Wickfield Dental will complete the Protected Health Information: Security and Patient Rights training to ensure their patients' individual health information is properly protected and patient rights are respected and fulfilled.</p> <p>Members of the dental team include the dental office manager, 1 dental office receptionist, 3 dental hygienists, 1 dental assistant, and Dr. Wickfield, the dentist.</p> <p>Current employees at Wickfield Dental have degrees related to their expertise within the practice (i.e. dentistry, dental hygiene, and business). Wickfield Dental is a fairly new practice, although all employees do have prior job experience in other dental practices.</p> |
| Learning Objectives | <p>Terminal LOs:</p> <ul style="list-style-type: none">• Execute the appropriate precautions to protect patient information.• Request the patient's signature on the HIPAA Notice of Privacy Practices and Authorization forms upon patient intake.• Fulfill a patient's request regarding patient rights related to HIPAA guidelines. <p>Enabling LOs:</p> <ul style="list-style-type: none">• Identify what is considered personal health information under HIPAA.• Complete the appropriate precautions to safeguard personal health information.• Determine the forms that need to be completed upon patient intake and which forms require a copy to be distributed to the patient. |

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| | <ul style="list-style-type: none"> • Explain what the patient's rights are regarding HIPAA. |
| Training Recommendation | <p>Delivery Method: eLearning training using Articulate Storyline</p> <p>Approach:</p> <ul style="list-style-type: none"> • Mini-scenarios • Applicable examples of PHI, security protocols, and patient requests directly correlated to a dental practice • Performance-based assessment |
| Training Time | 30 minutes |
| Deliverables | <ul style="list-style-type: none"> • Storyboard • Articulate 360 Storyline source file • SCORM file |
| Training Outline | <ul style="list-style-type: none"> • Introduction: Learning Objectives • Protected Health Information (PHI) <ul style="list-style-type: none"> ◦ HIPAA Privacy Rule <ul style="list-style-type: none"> ■ Purpose of HIPAA ◦ Types of Protected Health Information <ul style="list-style-type: none"> ■ Medical and Dental Records ■ Provisions of Health ■ Payment Information ■ Common Identifiers ■ Dental Specific PHI Examples ■ PHI Knowledge Check • Security <ul style="list-style-type: none"> ◦ Patient Intake Forms <ul style="list-style-type: none"> ■ Authorization form <ul style="list-style-type: none"> • Obtains consent for the use and disclosure of PHI ■ Notice of Privacy Practices (NPP) <ul style="list-style-type: none"> • Patient acknowledges that he or she has received the HIPAA privacy notices ■ HIPAA Compliance Rules <ul style="list-style-type: none"> • Informs the patient about his or her rights and privacy protections related to PHI ■ Patient Intake Forms Knowledge Check ◦ Protocols During Patient Care <ul style="list-style-type: none"> ■ Secure Conversations |

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| | <ul style="list-style-type: none"> <ul style="list-style-type: none"> • Discuss patient information in secure locations like patient rooms or a private office ■ Patient Consent <ul style="list-style-type: none"> • Obtain patient consent before sharing information with family or friends ■ Storing Documents <ul style="list-style-type: none"> • Documents and files need to be stored in secure locations, and not left out in the open • Computers and electronic devices need to be logged out and shut down ■ Using Minimum Necessary Standard <ul style="list-style-type: none"> • Avoid sharing any unnecessary details or sharing more than what is required ■ Security Protocols Scenario using Dentist and Dental Hygienist Avatars • Patient Rights <ul style="list-style-type: none"> ○ 3 Areas of Patient Rights <ul style="list-style-type: none"> ■ Patient Access ■ Patient Authorization ■ PHI Breaches or Violations ○ Action Steps for Patient Requests <ul style="list-style-type: none"> ■ Release of Records <ol style="list-style-type: none"> 1. Request the patient to complete the Release of Records form 2. Send the letter of request to the specified entity ■ Disclosure Authorization Form <ol style="list-style-type: none"> 1. Listen to the patient to understand the purpose of the request 2. Request the patient to complete the Disclosure Authorization form 3. Document the request by keeping a copy in the patient's file 4. Follow up with the patient ■ Reporting a Violation Request <ol style="list-style-type: none"> 1. Notify the HIPAA privacy officer of the dental practice 2. Ensure the HIPAA privacy officer helps the patient file a complaint with the Office for Civil Rights ■ Patient Rights Scenario using Dental Receptionist and Patient Avatars • Final Evaluation |
| Assessment Plan | <p>Level 2 Assessment:</p> <ul style="list-style-type: none"> • 2 ungraded knowledge checks <ul style="list-style-type: none"> ○ Protected health information ○ Patient intake forms • Graded Quiz <ul style="list-style-type: none"> ○ 5 questions ○ Passing rate of 80%. Learners must receive a passing score to complete training. ○ Multiple-choice and multiple-select ○ Scenario-based questions about protecting PHI, requesting patient signatures on patient intake forms, and responding to patient requests. <p>Level 3 Assessment:</p> <ul style="list-style-type: none"> • 1 hour observation of each employee completed by Wickfield Dental's HIPAA Privacy Officer 1 week upon completion of the training course. HIPAA Privacy Officer will have a checklist for using security protocols, |

patient intake forms, and responding to patient requests.

- Interview with Wickfield Dental's HIPAA Privacy Officer after all employees have completed the training course, and all observations have taken place. This will likely occur within 4-6 weeks of the training course being delivered.