

## Content Outline

### **A. Ethical, Legal, and Regulatory Issues (20-25% of questions)**

1. Define processes that support HIPAA security standards.
2. Recognize when the “Minimum necessary” standard must be applied to a records request.
3. Outline the advances that the Final Omnibus Rule made in relation to the HIPAA regulation.
4. Understand how to apply the satisfactory assurances process to subpoenas for records.
5. Understand how the state quash period impacts the process of subpoenas.
6. Understand jurisdiction between federal and state in regards to risk management.
7. Understand differences and similarities between federal and state regulations, and when to apply federal versus state regulations for releasing records.
8. Understand the roles of the Office of the National Coordinator for Health Information Technology (ONC) and the Office of Inspector General (OIG) in relation to information blocking.
9. Understand the exceptions to information blocking.
10. Understand what it means and actions to take when a request includes elements of electronic discovery (e-discovery).

### **B. ROI Practical Application (30-35% of questions)**

1. Identify the main points of the notice of privacy practices.
2. Identify what is contained in a designated record set and describe how to produce an accurate and complete copy.
3. Outline components of the medical record that are commonly requested (e.g., discharge summary, history and physical, provider notes, etc.).
4. Recognize deficiencies within a record to ensure the record is not inappropriately released.
5. Differentiate various rights and protections extended to the patient versus authorized recipients.
6. Describe the process for requesting an amendment to the medical record.
7. Describe the process for adhering to confidentiality processes in relation to ROI.
8. Understand methods of secure electronic transmission of PHI (e.g., emails, faxes, etc.).
9. Identify when sensitive information is in a record and apply appropriate restrictions.
10. Identify when special authorization is needed for the release of sensitive information.
11. Explain ways patients or their representatives can gain access to medical information.
12. Define the authority of the personal representative and identify specific situations where the representative can act on behalf of the patient.
13. Follow a process or method to ensure fulfillment of non-routine disclosures in accordance with regulatory guidance.
14. Apply retention and release policies in a variety of situations and understand when limiting factors apply.
15. Apply security rules and best practices that ensure protection of PHI in specific situations and environments.
16. Identify, validate, and describe how to process a request for restrictions on PHI.
17. Identify the required elements of an accounting of disclosures when requested by a patient.
18. Identify what the reportable disclosures are in relation to a patient request.

### **C. Department Management & Operations | Core HIM Functions (14-16% of questions)**

1. Outline the roles and responsibilities of the individuals involved with Health Information Management (HIM) and the revenue cycle.
2. Understand the process for chart completion to ensure timely processing of ROI requests.
3. Understand record retention and how it relates to release of information.
4. Differentiate between primary and secondary systems to understand how information is retrieved to perform a release.
5. Create a workflow to prioritize requests by requestor to ensure deadlines are met.
6. Design a quality assurance program to track release timeliness and accuracy.
7. Identify and correctly apply retention requirements of supporting documentation for a request.
8. Apply fee schedules per policies, rules, and other guidance.

### **D. Requestor Types (14-16% of questions)**

1. Define Treatment, Payment and Healthcare Operations (TPO) as it relates to Release of Information requests
2. Differentiate the types of requests that fall under TPO.
3. Differentiate requests for information that require/don't require authorization.
4. Identify the government organizations that interact with ROI functions.
5. Define the types of audits (internal and external) that result in a medical record request.
6. Define the required elements for compliant authorization for release of information.
7. Recognize the patient's right to direct the release of PHI to personal/legal representatives or other authorized recipients.
8. Demonstrate knowledge of State and Federal regulations related to subpoenas and other legal requests for information.

### **E. Customer Service for Patients and the Public (5-10% of questions)**

1. Apply communication techniques that allow for clear, concise directions regarding the patient request process.
2. Use language that is easily understood by individuals regardless of their understanding of the patient request process.
3. Assess the reactions and body language of individuals during a patient request process and respond appropriately.
4. Outline positive verbiage for permissible actions that express willingness to help within the confines of law and best practice.
5. Describe appropriate communication for authorization of sensitive information.
6. Identify situations where minors control access to their records.
7. Assess how minors' records are processed to ensure they are only provided to appropriate persons according to state requirements and in relation to how access is granted (i.e., portal access).
8. Understand how to address interactions with patients and public while adhering to ROI regulations and requirements.
9. Understand how to address interactions with law enforcement and the legal community while adhering to ROI regulations and requirements.

**F. Emerging Topics/Environmental Scanning (5-10% of questions)**

1. Explain the authority of Office for Civil Rights (OCR) as an enforcement agency for patient rights.
2. Review Office for Civil Rights (OCR) settlements, relate findings to current practice and apply lessons learned to facilitate timely and appropriate access to complete and accurate PHI.
3. Differentiate between a patient's right to receive versus their right to inspect.
4. Describe the conditions necessary for a patient to inspect their records on site.
5. Identify the process for assessing and reporting a data breach.
6. Identify best practices for protecting PHI and discussing authorized information with designated representatives.
7. Describe the integration of various data systems and identify the primary and secondary source systems (including legacy or "best of breed" systems).
8. Identify methods for data exchange with multiple media (e.g., patient portals, data banks, personal devices).
9. Identify appropriate methods of data exchanges when transferring PHI (APIs, HIEs, etc.).