

HIPAA Privacy Reminders for Emergency Dispatchers

- 1. HIPAA applies to covered entities.** Covered entities include health plans, healthcare providers and healthcare clearinghouses.
 - In general, dispatch centers, police departments, and fire departments are not covered entities.
 - However, a dispatch agency would likely be a covered entity under HIPAA if it provides healthcare services and engages in certain electronic transactions such as billing for its healthcare services.
 - A dispatch entity that is part of ambulance services, hospitals, or other healthcare providers might also be a covered entity.¹

- 2. HIPAA requires covered entities to safeguard individuals' protected health information (PHI).** PHI means any of the 18 individual identifiers (such as name, address, date of birth, phone number, driver's license) coupled with health information, which is created, received, maintained or transmitted by a covered entity, electronically or otherwise, which relates to:
 - The individual's past, present, or future physical or mental health or condition,
 - The provision of healthcare to the individual, or
 - The past, present, or future payment for the provision of healthcare to the individual;and which identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual.

- 3. HIPAA permits the use and disclosure of PHI for treatment, operations, and payment purposes, without the individual's authorization.** For example:
 - An EMS dispatcher obtains and discloses PHI to alert first responders of the medical needs of the individual requiring assistance.
 - So that first responders can take extra precautions to protect themselves, an EMS dispatcher notifies them that the individual in need of emergency healthcare has tested positive for COVID-19.
 - The ambulance service's own dispatch center discloses PHI to bill Medicaid for services provided.

- 4. Covered entities are permitted to disclose without an individual's authorization in other limited circumstances.** These circumstances are nuanced (limiting the PHI that may be disclosed and to whom) and likely require direction from supervisors. Examples of permissible disclosures include:
 - For certain public health activities, such as reporting instances of child abuse or neglect
 - About adult victims of abuse, neglect or domestic violence, to the extent required by law
 - To law enforcement for the purpose of identifying or locating a suspect, fugitive, material witness, or missing person

¹ Even if the dispatch center is not a covered entity under HIPAA, state privacy rules and other federal requirements might apply.

5. **When disclosing information for reasons other than providing healthcare treatment, HIPAA's minimum necessary standard applies.** Minimum necessary means only disclosing the information needed for the intended purpose. For example:
 - A 911 call center may ask screening questions of all callers to identify potential COVID-19 cases. So that police officers being dispatched to the scene can protect themselves, the call center may inform them of the name, address, and screening results of the person who may be encountered.²

6. **Disclosing PHI without having a business reason violates privacy requirements.**
 - A 911 dispatcher in Georgia was fired for taking a photo of the dispatch screen detailing caller's name, address and medical complaint and posting it on social media.
 - Speaking to the media about a caller's condition, without the caller's consent, violates HIPAA and possibly state privacy laws.
 - Discussing PHI related to interesting calls with friends and family members who do not have a business reason to know can result in civil or criminal penalties.

7. **HIPAA requires the use of reasonable safeguards.** For example:
 - Protect your passwords and do not let others sign in under your credentials.
 - Keep computer screens protected from onlookers.
 - Only discuss PHI with individuals who have a business reason to know.
 - Place PHI in a HIPAA-compliant shredding bin.
 - Report incidents of inappropriate use or disclosure of PHI to your supervisor.

8. **Covered entities must notify individuals of a breach of their PHI.** Breach means any impermissible acquisition, access, use, or disclosure of unsecured PHI that compromises the security or privacy of the PHI. Within 60 days of discovering the breach, covered entities provide written notice to affected individuals of the breach, including information required by law.

² Office for Civil Rights. COVID-19 and HIPAA: Disclosures to law enforcement, paramedics, other first responders and public health authorities.