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Current Policy: Topic Selection

Sharnet Alexander, Celine Ali-Hassan, Jonathan Schellhorn, Brandee Spector

Health Care Policy: The Past and the Future HCS/455

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Elaine Bobo



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As a team, **research** and **identify** a health care policy topic.

**Review** the following choices or obtain approval from your faculty for a different topic. Faculty approval must be obtained at least 3 days in advance of your assignment due date.

* Medicare
* Medicaid
* Health care reform policy [e.g., Patient Protection and Affordable Care Act (PPACA)]
* HIPAA
* HITECH
* Or faculty-approved topic

*Note:* As you consider a topic, review the Week Five assignment requirements to ensure the policy selected can be used to satisfy those requirements.

**Complete** the following chart with research your group has identified for the policy selected. Research information that needs to be identified for the policy is listed on the left. Your group will insert research it has found regarding the prompt on the left. To prevent plagiarism, record all information and research in your own words.

**Policy selected:**

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| **Research Prompt** | **Information your group identified using the policy selected** |
| Year policy was created | The HIPAA policy was created August 21, 1996. |
| Identify the various stakeholders involved in the creation of this policy. | The stakeholders involved in creating the HIPAA policy are patients, families, caregivers, health care professionals, health care facilities, researchers, payers, purchasers, employers, vendors, suppliers, distributors, consultants, policy makers and legislators (Peterson & et., al, 2015). |
| Select a level of government (federal, state, or local) and discuss the role and function it had in the process of implementing the policy. | The federal government had a vital role in the process of the HIPAA policy. The HIPAA policy was introduced to Congress, thoroughly discussed upon which changes were made to improve upon health and safety measured and passed onto the President for signature into law 1996 (Nass, Levit, & Gostin, 2009). |
| Why was the policy created? | HIPAA was created to make an improvement in the health care system but mostly the portability and accountability of health insurance coverage. It was a drive to help the health care system move to a more computerized system for patient medical records. While there are many reasons for the creation of this law which includes preventing abuse, fraud and waste by moving to a computerized system, the need for paper records were eliminated. There are many protocols in the Law of HIPPA and the main one includes the act of patient protection. The violation of HIPPA is considered a crime. |
| Why is the policy important to health care? | HIPAA is important because it acts as a safeguard in the health care industry. It ensures providers with health plans and patients with a sense of security with their information. HIPAA is one of the main policies in health care that cannot be forgotten. Information in health care has always been sensitive. With HIPAA laws in place, the requirement for documents to be kept safe is a top priority. Organizations have no choice but to enforce these requirements. Having limited access to patient information narrows down the possibility of fraud occurring and stolen documents for false claims. |
| What stakeholders are impacted by this policy (e.g., health care consumers, medical staff, etc.)? | The stakeholders that have been impacted by the Health Insurance Portability Accountability Act are patients, health care providers and the administrative staff, healthcare clearinghouses, health insurance companies, and health care organizations (Health and Human Services, 2020). |
| In your opinion:  Is the policy effective?  Is it meeting the needs of the population as intended?  How has the effectiveness of the policy been verified? | The Health Insurance Portability and Accountability Act (HIPAA) is effective in ensuring security for health care information. Additionally, the policy creates structures that enforce the protection of health care information. As a current policy, HIPAA’s role also sets structures that provide employees with health care as they shift from one job to the next.  A keen analysis of the situation indicates that HIPAA is serving the needs of the targeted population in the sense that it has continually protected healthcare information (Krager & Krager, 2016). The policy also ensures that any institution that handles medical information electronically complies with the set demands to ensure security. In this way, all the information in the electronic systems is secured from cybercriminals.  HIPAA is a policy that has been in existence since 1968. Throughout this time, HIPAA’s efficiency has been verified in numerous ways to enhance the security of the healthcare information involved. According to Harold and Beaver (2014), one of the ways to ensure HIPAA is useful is to identify deficiencies. The identification process requires documentation for future references and follow-ups. However, for timely identification to take place, all the stakeholders involved need having the relevant information about the policy. In the process, the involved players will note the problems and document them. In this way, there is a development of strategies that reduce the occurrence of the challenges and thus secure the medical data. |
| Discuss the health and societal issues that had an impact on the development of the health care policy. | The development of HIPAA was a result of employees losing health coverage when they were between employments. Therefore, the health of the people is one of the impacts that triggered the creation of the policy. The social risks involved when sensitive medical information is leaked one of the potential effects that led to the existence of HIPAA. The attempt to protect the safety of the people’s medical information led to the necessity of developing a structure that seeks the interests of the involved players. Developing HIPAA essentially provided the healthcare industry with an opportunity to provide medical information within secured infrastructure. |

### References

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