

PHI Data Flow Worksheet

A Formal Approach for Data and Process Mapping

Efficiently and effectively reengineering administrative procedures to meet HIPAA standards requires identifying and documenting the data flow of protected health information (PHI).

The primary goal of documenting the data flow of protected health information is to identify the methods in which data is created, reviewed, modified, transferred, received, disclosed, and maintained during course of business.

Mapping the Flow of PHI	
Tasks	General Process
Identify how PHI is used/disclosed for "treatment, payment and health care operations."	Map internal data flow according to payment, treatment, and healthcare operations.
Identify relationships with other covered entities.	Map flow of data to and from other covered entities, such as health plans and clearinghouses
Identify relationships with business associates.	Map flow of PHI to and from business associates.
Identify how PHI is captured.	Map points where PHI enters the organization.
Technical infrastructure	Identify computer systems, software, and network systems used in the capturing, storage, and transmission of PHI.

Workforce Level Patient Data Questionnaire

As part of our HIPAA compliance efforts we are tracking the flow of protected health information throughout the organization. Please help us by completing this questionnaire and returning it to the Privacy Officer. If you have any questions while completing this questionnaire please contact the Privacy Officer. Thank you.

Date: _____

Name and telephone number of person completing this questionnaire:

PROTECTED HEALTH INFORMATION

Protected health information consists of any information that is individually identifiable to a patient. Please check any of the activities that you perform while carrying out the functions of your job:

- Creating new protected health information in electronic or paper-based records
- Modifying protected health information created by others
- Reviewing protected health information created by others
- Transferring protected health information to another individual or department within the organization
- Receiving protected health information from another individual or department within the organization
- Disclosing protected health information to persons or entities outside the organization
- Maintaining protected health information in electronic or paper-based records

Please complete the applicable sections below for each of the functions checked.

CREATING NEW PROTECTED HEALTH INFORMATION

Please list any protected health information created while performing the functions of your job.

Please describe how protected health information is created, including the source of the information.

MODIFYING PROTECTED HEALTH INFORMATION

Please describe how protected health information is modified, including the reasons for making the modifications.

REVIEWING PROTECTED HEALTH INFORMATION

Please describe the reason for reviewing protected health information.

TRANSFERRING PROTECTED HEALTH INFORMATION

To which individuals or departments in the organization is protected health information transmitted?

How is protected health information transferred (original paper-based records, copies of paper-based records, facsimile transmission of electronic transfer, electronic transmission, telephone conversation, etc.)?

What specific protected health information is transferred to other individuals or departments (clinical information, demographic information, billing information, etc.)?

RECEIVING PROTECTED HEALTH INFORMATION

From which individuals or department in the organization do you receive protected health information?

How is protected health information received (original paper-based records, copies of paper-based records, facsimile transmission of electronic transfer, electronic transmission, telephone conversation, etc.)?

What specific protected health information is received from other individuals (clinical information, demographic information, billing information, etc.)?

What do you do with the protected health information received?

DISCLOSURES OF PROTECTED HEALTH INFORMATION

To which entities outside the organization is protected health information disclosed?

How is protected health information disclosed (original paper-based records, copies of paper-based records, facsimile transmission of paper-based records, electronic transmission, telephone conversation, etc.)?

What specific protected health information is disclosed to outside entities (clinical information, demographic information, billing information, etc.)?

What is the purpose of the disclosure(s)?

If necessary, is patient authorization obtained prior to the disclosure?

MAINTAINING PROTECTED HEALTH INFORMATION

What specific protected health information do you maintain (clinical information, demographic information, billing information, etc.)?

In what formats do you maintain protected health information (paper-based records, computer-based records, images, films, videotapes, or electronic media)?

Where is protected health information maintained (in your department, in another location within the facility, off-site storage controlled by the facility, off-site storage controlled by a vendor, etc.)?

How long is protected health information maintained?

What happens at the end of the retention period? If protected health information is destroyed, please describe the process for destruction.