

IT TAKES A THIEF

by Lisa Rappale M.Ed RRT



Sometimes it takes a thief to show the rest of us how systems work and how easily they can be broken. In the case of medical identity theft, the "thief" has taken advantage of several weak links in the health care system. One weak link is the medical record, how it is stored, and how it is shared. Another is the obligation to treat regardless of ability to pay or to produce proof of identification and/or health insurance information. Add to that the frustrating fact that the HIPPA privacy rules work to the thief's advantage.

There has been great publicity about financial identity theft. You may have seen the credit card commercial where two grandmotherly-types have had their identities stolen by a couple of burly bikers whose voices are coming from the little old ladies on the screen. They describe what fun they are having with their newfound money from the grandmothers. It's a clever and cute commercial, but it trivializes a very serious problem. The commercial's point is how ridiculous two grandmothers purchasing motorcycles would look. Obviously it is identity theft. But, how ridiculous would these situations look to a logical person? A woman being billed for a foot amputation when she still has both feet, a man being billed for abdominal surgery for which he has no scar or a man billed for orthopedic surgery on his hand even though an x-ray showed he has no pins from the surgery they are billing him for.

All of these ridiculous situations actually happened as a result of medical identity theft. The hospitals/billing agencies ignored the obvious (grannies on bikes) and continued to hold these people

accountable for the bills. The woman being billed for the foot amputation notified her insurance company of the false billing, thinking they would help, and found that she was then billed for the entire balance (\$66,000) because the insurance company simply denied the claim from the hospital.

Beyond financial consequences, the medical consequences are even more harmful and more difficult to untangle. Wrong blood types, medication allergies, medical and surgical histories can all lead to life-threatening consequences. And clearing up the record is a nightmare. Unlike financial records that are tracked by specific agencies (Equifax, etc) that serve as a central depository for this information, medical information is stored sporadically in hospitals, physician offices, and other health facilities. The information can get fragmented and as a result difficult to repair. An individual can request financial records from one of the central repositories and there is a mechanism for them to correct any errors. Not so with health records. There is no central repository for this information, so repairing the record is pretty much impossible.

The National Health Information Network (NHIN) is working on several pilot projects in the quest to digitize and centralize health records. It is a common belief that by digitizing patient records it will improve health care, reduce fraud, reduce medical errors, and save lives. However, proper implementation and consideration of medical identity theft is key to its success. In the last year, the Senate and the House have passed broad bills pushing for wider use of electronic health records. Supporters, including many big technology firms and insurers, said the plan would increase efficiency, reduce error rates and provide earlier warnings about public health problems. Such a system could also make correcting medical errors easier, but only if patients catch them beforehand, and only if the service providers agree to change them. As the web of electronic distribution expands beyond the current pilot projects, more people will see medical records. That could increase identity theft while making existing errors harder to resolve, said Joanne McNabb, chief of the California Office of Privacy Protection. "There is added risk that we've seen all over the place with electronic data," McNabb said. "It can go to the wrong place at the wrong time very easily."

The interesting twist in medical identity theft is how the HIPPA laws play out. The Health Insurance Portability and Accountability Act of 1996 makes it difficult for patients to see their own medical records. There are penalties for improper disclosure, so some hospitals set up roadblocks for access. And once a victim tells a keeper-of-records that someone else's data might be intermingled; the file becomes even harder to obtain. Because it includes another person's medical history hospitals argue that it can't be turned over without consent. "These privacy rules might put you in a situation where you can't even investigate," said Wilma Kidd, chief privacy officer at WellPoint Inc., the largest U.S. health insurer for employees and other groups. But, what happens most of the time is that people never find out about erroneous records in their own name



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NEWS ITEMS DATED 2106:

- The average life expectancy of American women is now 134, according to the Institute On Middle Age. 81 percent of all married women have been married more than three times. The life expectancy of men is 133. Men who've been married more than four times can expect to live to be 102.

- Congress today turned down President Rexford's request to paint the White House a different color. Members of the New Federal Party said that blue has been the traditional color of the White House for the past 35 years and it should remain blue.

- Two hundred million people watched the movie "Rocky XXXIX" on their electronic viewers Tuesday. The viewers, which replaced old-fashioned television sets, feed the signal directly into the brain of anyone who tunes in through electrodes in the headpiece.

In an effort to reduce the amount of money spent on salaries, the National Football League has decided that in the future, the game will be played with just nine men on a team instead of the 11 that has been traditional.

Baseball is expected to follow football's lead and reduce the number of players on a team to just eight. Shortstop will be eliminated as a position. "It has no business in the game," one manager, who spoke on condition that his name would be mentioned, said.

In defending the action, NFL president Geoffrey Noxon said nine players would make the game easier for fans to watch and, in addition to saving on salaries, teams would save more than \$5,000 per year on uniforms. A helmet alone costs \$900, and with the radio transmitter that allows conversation between the coach and the player, it runs \$1,400.

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because of HIPPA. "There's no reason to assume the patients ever find out," said Harvard University management professor Malcolm Sparrow, an expert on regulatory agencies who has written books on healthcare fraud. "The bulk presumably remains invisible."

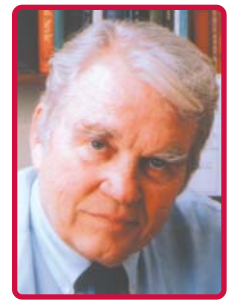
We have just skimmed the surface of issues concerning medical identity theft. To better understand medical identity theft the best place to go would be to the World Privacy Forum at <http://www.worldprivacyforum.org/medical.html>. The World Privacy Forum was established in 2003 as a nonprofit, nonpartisan public interest research group. The organization is focused on conducting in-depth research and consumer education in the intersecting areas of technology and privacy. The World Privacy Forum focuses its investigations on a broad range of emerging and maturing technologies; specific areas the Forum is focused on researching and benchmarking include consumer data privacy, workplace privacy, job applicant rights and privacy, background checks and public records, identity issues, communications privacy, medical and financial privacy, and large technological infrastructures, including databases. The Forum also works to encourage collaborative efforts among non-profits working in the privacy arena. At their website you can read about Medical Identity Theft, NHIN, HIPPA, and electronic health records. Many of the reports are in PDF format. Some of the examples that I sited earlier are described at this site. There is a 56 page report entitled "Medical Identity Theft: The Information Crime that Can Kill You", summarized in 15 pages.

- A revolutionary new development in computer technology will make all computers made before the year 2098 obsolete. Government officials are pleading with computer owners not to throw their old equipment in the trash, as they did six years ago when all computers were made obsolete by new developments. There are more than 400 million obsolete computers in use, and most of the dumps in the country are already full. Congress may declare new developments in computer technology illegal, but meantime, Congress is looking into establishing another 100,000 dumps in space. There are now almost a million space dumps and a lot less empty space left in space than there used to be. It has been predicted that outer space could be full by the year 2200.

- In order to raise money to pay for repaving the main streets in major American cities, local officials are advocating the installation of coin boxes on every corner. It would cost \$1 to cross an avenue and 50 cents to cross a street.

- Officials at the U.S. Mint are debating whether or not to eliminate the dime. This 10-cent piece is almost useless because nothing costs that little anymore. Once upon a time, long long ago, there was both a five-cent piece, known as a nickel, and a one-cent coin known as a penny. The Mint stopped coining the penny 74 years ago and eliminated the nickel in 2079. Pennies are now sold by coin collectors for as much as \$27 each.

The dollar bill, another favorite of collectors, was discontinued 50 years ago because nothing sold for as little as a dollar and the paper was too coarse to be used for napkins.



Information on the NHIN such as current news events and a timeline of events is available. Information in regards to the Department of Health and Human Services and HIPPA is available.

As healthcare providers it is imperative to keep informed on issues that can so devastatingly affect our patients. Our simple awareness of the harmful potential may prove vital to a patient. Just by picking up clues in a medical record that may be faulty because of medical identity theft could save a life. And our collective voice in the development of laws such as HIPPA and the development of government electronic records systems could be vital to the future of healthcare.

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