⁶ PRIVACY

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from being used for commercial purposes. That rule was announced by Health and Human Services in December 2000 and, after two years of modifications, was set to be enforced beginning April 14 of this year.

Under HIPAA, hospital patients can let their privacy wishes be known in writing prior to being admitted. Or, hospital staff should inform patients of their privacy rights upon admittance and give them a chance to object to release of their name; room number, medical condition, religious denomination or parish affiliation.

Consent can be provided by patients or loved ones. Any member of the public — by providing the patient's name — can be given this information except for religious details. And parish visitors, though not needing to provide names, will be given a list of parishioners as long as they're properly identified. Since HIPAA's privacy rule took effect, Deacon Nelson said, many healthcare institutions have begun requiring badges or other forms of identification for parish staff.

On-site chaplains have access to all patients' medical information, including those who have requested privacy. Yet Father Kellner, who serves as part-time chaplain for Unity Health System, said that chaplains are bound by the same privacy restrictions as nurses, social workers and information-desk employees and must be careful about sharing that information with parishes and the public.

Should a sudden need for pastoral care arise and no hospital chaplain is available, hospital staff members may call a parish — with the patient's permission — and state the need without releasing the patient's



The Health Insurance Portability and Accountability Act applies to all healthcare entities, including nursing homes.

name. If circumstances prevent permission from being obtained, the HIPAA privacy rule does give health-care institutions the latitude to make judgments about pastoral care in the best interests of the patients. Deacon Nelson said such judgments are now made with extreme caution, based on HIPAA-fueled penalties of up to \$250,000 and 10 years' imprisonment for knowing misuse of an individual's medical information.

"Hospitals, very understandably, don't want to take these risks," Deacon Nelson said.

COMMUNICATION IS KEY

But is lack of risk-taking causing those who desire pastoral care to slip through the cracks?

Father Richard Brickler, pastor of Rochester's St. Boniface Parish, makes numerous weekly visits to hospitals and nursing homes. Although he can't be precise about patients who are getting bypassed, he did remark, "It seems to me there aren't quite as many people listed."

For the most part, Father Kellner said, patients are willing to be listed. On the other hand, he said he's run into people at Park Ridge Hospital in Greece who have asked him to visit loved ones in their rooms — but somehow those patients had not been listed in the directory.

"The communication between hospitals and faith communities is always fractured at best, not because of evil intent," Deacon Nelson said. Add HIPAA to this already imperfect system, and "there are thousands of things that can go wrong now that you're limiting access to information," he remarked. He cited emergency situations as a prime example, where a patient might not be cognizant enough to answer privacy questions and/or staff members have such urgent concerns that "they're not worried about whether someone is Catholic or Jewish."

But not having such details on record may well mean that patients will go unlisted and not receive adequate pastoral care. Father Reinhardt, for one, feels that seeking this simple data needs to become a higher priority for health-care institutions where he has ministered.

"They're so concerned about privacy, but what are they doing about basic information?" he said.

Father Kellner said privacy is valuable for patients who might be celebrities, criminals or going through a difficult divorce. But in regard to HIPAA and its effect on pastoral visitation, he said that "it's probably being carried out to the extreme."

To minimize complications, Deacon Nelson said patients should be vigilant about keeping their parishes informed. "The message I would appreciate getting delivered is please, please call your faith community," he said. "It's best to assume the parish does not know. Therefore it's best for you, a family member or a friend to call, or ask the nurse to call."

Indeed, numerous diocesan parishes have run bulletin notices saying that anyone entering the hospital should contact their parish as soon as possible. Father Reinhardt, in his parish's bulletin, has also implored parishioners to be specific about their denomination and parish affiliation when giving visitation consent. "The problem is if people are Catholic and don't say anything, then there's no way for us to know," he explained.

Despite the potential headaches brought on by HIPAA, Father Brickler said adjustments have gone well thus far with his parishioners. "We're just working around it. The people have been good (about informing us)," he said.

Ideally, Deacon Nelson said, HIPAA and its privacy rule will bring about "good civil corporate citizens, respecting the law — but minimize unintended consequences on legitimate spiritual care."





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