

# THE ADVISOR

MONTHLY COMPLIANCE COMMUNICATOR

## US Department of Labor Ends COVID-19 Healthcare Rulemaking

The U.S. Department of Labor announced that OSHA (Occupational Safety and Health Administration) has officially stopped working on a COVID-19-specific healthcare rule.

### Timeline:

- June 2021, OSHA issued an Emergency Temporary Standard to protect healthcare workers from COVID-19.
- Over the next year, the agency gathered public feedback through comment periods and public hearings.
- December 2022, OSHA submitted a draft final COVID-19 rule for review.
- April 10, 2023, President Biden signed a law ending the COVID-19 national emergency.

### Why is OSHA Ending This Rulemaking?

OSHA has decided to focus on creating a broader Infectious Disease Standard instead of a COVID-19-specific rule for healthcare workers. This approach was always intended to replace the temporary COVID-19 rule and allows OSHA to protect workers from a wide range of infectious diseases, not just COVID-19.

### Key Points Behind the Decision

Like the CDC, scientific guidance has changed since OSHA submitted its draft of the COVID-19 rule. A COVID-19-specific standard would take significant time and resources, slowing the development of the broader Infectious Diseases Standard.

A broader standard will better protect healthcare workers against COVID-19, other infectious diseases, and future outbreaks.

In summary, OSHA believes its resources are better spent creating a comprehensive rule to safeguard healthcare workers from various infectious diseases, including COVID-19.

## Newsletter Content

US Department of Labor Ends COVID-19 Healthcare Rulemaking

Understanding Tuberculosis (TB): Symptoms, Risks, and Infection Control Guidelines

The Role of Every Staff Member in Maintaining HIPAA Compliance

It's Your Call

# Understanding Tuberculosis (TB): Symptoms, Risks, and Infection Control Guidelines

Tuberculosis (TB) is an infectious disease caused by a bacteria called *Mycobacterium tuberculosis*. *Mycobacterium tuberculosis* is generally found in the lungs but can attack any part of the body, such as the brain, kidneys, or spine.

## Types of TB

There are two types of TB: active and latent (inactive). Active TB disease is very contagious and can cause symptoms such as coughing, fever, and fatigue. Other symptoms can include coughing for more than three weeks, coughing up mucus or blood, unintentional weight loss, night sweats, or chills. The disease is spread through the air when an infected person coughs, sneezes, speaks, or sings. TB can linger in the air for several hours and doesn't require close contact to transmit. It is not spread by shaking someone's hand, sharing food or drink, touching bed linens or toilet seats, sharing toothbrushes, or kissing. If not treated, TB disease can be fatal. People with active TB disease are most likely to spread TB germs to people they spend time with every day or for prolonged periods.

TB can live in the body without making one sick. This is called latent TB infection. Latent TB is not contagious and typically causes few or no symptoms. Most people with latent TB never experience symptoms, however, without treatment one in 10 people with latent TB will develop TB disease.

## Cases of TB in U.S.

As of December 14, 2024, there were 8,040 cases of TB in the United States. The states with the most TB cases in 2024 were California, New York, and Texas. The U.S. has one of the lowest rates of TB in the world. However, there is an ongoing outbreak of TB in two counties in Kansas. As of January 31, 2025, there have been 67 cases of active TB and two deaths in these counties. This is one of the largest outbreaks of TB in the U.S. in the past 30-40 years. It should be noted that this outbreak has been going on for at least a year, possibly longer.

## TB Vaccine

There is a vaccine for TB but, in the U.S., it is not routinely recommended for healthy children due to the low risk of TB infection. However, the vaccine may be considered for certain high-risk individuals, such as those with HIV or who have been exposed to TB. The vaccine can give a false positive TB skin reaction.

Be sure to tell your health care provider if you had the vaccine.

## TB Infection Control Plan

Healthcare facilities must have a written TB infection control plan. The plan includes ways for prompt detection of infectious patients: through medical histories, being aware of the symptoms, education for all employees, and ways to manage the patients and/or healthcare workers who have suspected or confirmed TB disease.

## **Screening for TB in New Hires**

As part of the TB infection control plan, the CDC guidelines recommend that all newly hired employees who are at risk of exposure be screened for TB disease, unless they have a previous positive tuberculin skin test or have been treated for latent TB disease or TB disease. Newly hired employees must complete a TB risk assessment, symptom screening, and be offered a TB test. The TB test is either a two-step tuberculin skin test (TST) or a blood assay TB test (BAMT). If the worker tests positive, they should be further evaluated to exclude a diagnosis of TB disease.

The CDC does not recommend annual TB testing for healthcare workers unless there is a known exposure or there is ongoing transmission in the healthcare setting. State and local regulations may differ to meet local needs and should always be followed.

## **Exposure to TB**

If a healthcare worker has a known exposure to TB, they should report the incident to the safety officer. A worker who tested negative previously should be tested immediately and test again 8-10 weeks after the exposure. The same type of test (TST or BAMT) that was done at hire, should be used for any follow-up testing. This will produce consistency in the testing. Because local needs may be different than these recommendations, the local health department must be contacted immediately for guidance.

A worker who had a previous positive TB test result does not need to be re-tested. They would be screened for symptoms. If asymptomatic, evaluate for TB disease. Again, local needs may differ, contact the local health department for further recommendations and guidance.

If you are in a facility that provides treatment for patients with TB, there are additional precautions necessary. These are called transmission-based precautions and can be found in the CDC guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Facilities.

# **The Role of Every Staff Member in Maintaining HIPAA Compliance**

HIPAA is a cornerstone of patient privacy in healthcare, but ensuring compliance is not just the responsibility of IT or the compliance team. Every staff member, from receptionists to clinicians to administrative personnel, plays a vital part in safeguarding Protected Health Information (PHI). Here's an overview of the responsibilities different roles have in maintaining HIPAA compliance.

## **Why HIPAA Matters**

HIPAA exists to protect PHI from unauthorized access or disclosure. Healthcare organizations must keep patient data—including physical records, digital files, or verbal communications—confidential and secure. Every staff member, regardless of role, must understand HIPAA's regulations and follow best practices to maintain privacy and security. Violations can result in consequences, including financial penalties, loss of trust, and reputational damage. Therefore, maintaining compliance is essential for both the organization and individuals.

## **Your Responsibilities, No Matter Your Role**

1. Administrative Staff/Frontline staff like receptionists and office managers interact directly with patients and are often the first point of contact for handling PHI. Their key responsibilities include:
  - Verifying patient identity to ensure only authorized individuals access PHI.
  - Securing documents by storing physical records in locked cabinets and ensuring digital files are password-protected.
  - Maintaining confidentiality by avoiding discussions of patient information in public areas.
2. Clinical Staff (Doctors, Nurses, and Medical Assistants) have direct access to PHI and must take extra precautions. Their duties include:
  - Securing patient data by logging out of computers when leaving workstations and locking paper files in secure spaces.
  - Limiting data sharing to those directly involved in the patient's care, avoiding discussions of PHI in public areas.
  - Obtaining patient consent when sharing information outside of the patient's care team.
3. Billing and Coding Staff Professionals handle sensitive data daily and have roles that include:
  - Accurate data entry to ensure patient information is securely and correctly input.
  - Minimal disclosure of PHI, sharing only the necessary information for billing or insurance purposes.
  - Secure communication by using encrypted emails and secure portals to transmit PHI.
4. IT and Security Staff: The IT department is key to maintaining the technical safeguards for patient data. Their responsibilities include:
  - Access control by implementing strong passwords, user authentication protocols, and managing access permissions.
  - Data protection by ensuring encryption and secure storage of PHI, both in transit and at rest.
  - Monitoring system activity through audit logs to track who accesses patient data and detect potential breaches.

## **Practical Tips for HIPAA Compliance**

Regardless of your role, you can take simple steps every day to ensure compliance:

- Be mindful of your surroundings: Lock your computer when stepping away from your desk and avoid discussing patient information in public spaces.
- Use strong passwords and never share login credentials. Ensure digital communications containing PHI are encrypted.
- Report suspicious activity immediately. If you notice any potential violations, report them to your supervisor or compliance officer.
- Follow proper disposal procedures by shredding paper documents containing PHI and ensuring digital records are securely deleted when no longer needed.

Maintaining HIPAA compliance is a collective effort that involves every team member. By following best practices and being vigilant in your daily tasks, you help protect patient privacy and ensure your organization remains in compliance with HIPAA regulations. Together, you can foster a culture of trust and security that prioritizes patient confidentiality in every interaction.

# It's Your Call – February 2025

## **OSHA: Why is OSHA Ending The COVID-19 Healthcare Rulemaking?**

A: OSHA has decided to focus on creating a broader Infectious Disease Standard instead of a COVID-19-specific rule for healthcare workers. This approach was always intended to replace the temporary COVID-19 rule and allows OSHA to protect workers from a wide range of infectious diseases, not just COVID-19.

## **HIPAA:**

**I work in a shared office space and sometimes must leave my computer unattended for short periods. What should I do to ensure patient information remains secure and in compliance with HIPAA during these times?**

A: To protect patient information in a shared office, follow these steps:

- **Lock your computer:** Always lock your screen or log out before stepping away.
- **Store documents securely:** Keep paper records in a locked drawer and avoid leaving sensitive files visible on your screen.
- **Limit access:** Position your workstation to minimize the chance of others seeing patient information.

By taking these precautions, you help ensure that PHI remains secure, even when you're not at your desk. Remember, it's better to be cautious than risk a violation!

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## Instructions

Print and post newsletter in office for staff review. Each member should sign this form when completed. Keep on file as proof of training on these topics.

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