The history and background of the Healthcare Insurance Portability and Accountability Act (HIPAA)

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A law was needed to protect the patient's privacy about their health information. In this regard, The Health Insurance Portability and Accountability Act of 1996 (HIPPA) was introduced to ensure patients’ privacy (Hash et al., 2005). It became a law, and most of the healthcare providers alongside optometrists must follow HIPPA. The law provides healthcare practitioners with the proper guidelines as to how to protect the privacy of patients who receive various treatments. The Act defines some regulations to access patients' information and data. According to the set of rules, only concerned physicians, doctors or healthcare providers can access the information of the patient (Hash et al., 2005). The Security Rule outlines clauses to safeguard health data in electronic form and ensures the security of health information (Cohen & Mello, 2018).

Professionals and organizations that fall in the category of "covered entity," i.e., Health care clearinghouses, Healthcare providers, and Health plans are required to abide by the rules and regulations of HIPPA. The HIPAA was established to bring improvement in the accountability and portability of health insurance coverage for employees between employments (Edemekong & Haydel, 2018). In this respect, the other purpose of the Act was to counter fraudulent practices and abuse in the overall system of health insurance and healthcare delivery. In addition, the Act had clauses to encourage medical saving accounts by employing coverage and tax breaks for workers having medical conditions and provide them with the ease of health insurance. The U.S. Congress approved and passed HIPAA by keeping in mind the benefits of customers.

Moreover, one of the main strengths of the Act was that it enabled patients to have great control over their own health data. Also, they got the right to view and update it whenever patients want and the freedom to decide t to whom they will pass their personal information. However, the Act had weaknesses in a way that it served as an expensive load on the organizations that have access to patients’ healthcare information by contributing to the workload of healthcare individuals and professionals. In this context, large health care institutions need to hire full-time privacy officials to supervise special training and worker communication programs, and in case they do not comply with the rules, they have to pay an expensive price for that. As a result, companies felt extra pressure on them especially those that do not generate high revenues. Another weakness is that HIPAA rules often prove to be counterproductive in emergency conditions, for example, private information can only be shared to particular entities, and any misinterpretation of the Act causes a delay in passing relevant information. Another weakness of the Act is that it requires technology to maintain and upgrade patients' information, thus adding to the overall costs of the healthcare organizations. Also, the title of the policy truly reflects the overall content of the policy. In terms of patients' privacy, the advantages of the Act are more than the disadvantages, and the overall policy is effective. HIPAA was based on clinical research to address the question of how patients' protection of data affects the healthcare delivery of the patient (O’herrin, Fost, & Kudsk, 2004). In this way, the policy was necessary to address the privacy issues of patients' data and overall information.

HIPAA Act justifies the utilitarian theory of ethics in healthcare as it gives consumer sovereignty as it provides them with the freedom to decide that with whom they should share the information (Villani, 2016). Importantly, it guides healthcare providers about respecting patients' privacy of information. Patients' information is something sensitive and confidential. Therefore, ethically healthcare providers and organizations should not pass patients' data to any other party. According to the concept of utilitarian theory, the HIPAA Act endorses the commitment of physicians to Public health, which is an essential element of healthcare practice. Predominantly, Utilitarianism is welfarist in its spirit. Thus, the HIPAA Act was designed by keeping in view the overall welfare of the patients.

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