



## Adjusting to the New World of Online Reviews

BY EMILY HU, MD

According to a 2014 JAMA survey of 2,137 American health consumers, almost two-thirds of respondents were aware of physician review sites such as Yelp, Health Grades, or Vitals. Yelp alone has over six million reviews of doctors and hospitals. Furthermore, of the patients that sought out an online review, approximately a third selected a doctor based on good reviews, and a third avoided a doctor because of negative reviews.

Of course, there are many problems with online reviews—starting with the fact that the poster may not actually be a patient. Anyone—be it an angry neighbor or a random stranger—can post a negative review about a doctor. However, there are HIPPA restrictions [see ar-

### *How should physicians manage their online presence?*

Because prospective patients tend to research providers on both practice and hospital websites as well as physician review websites, maintaining an attractive and up-to-date practice website is of utmost importance. As most doctors do not have the experience, energy, or time to do this, enlisting professional help to manage and groom your online reputation is very useful. For example, PatientPop ([www.patientpop.com](http://www.patientpop.com)) is a service that manages physician websites and online presence.

### *How can providers decrease the chances for a negative review?*

It is important to be aware of the common complaints patients have and address them be-

disgruntled patients, PRF can also be a valuable resource for providers. Timely utilization of the Code Green philosophy can sometimes be an appropriate approach to an unhappy patient situation.

### *How can providers respond to reviews without violating HIPPA?*

In trying to respond to negative reviews, some providers have violated HIPPA, which forbids providers from disclosing any patient health information without permission. There have been cases where patients posted a negative comment and received an online response from a provider that violated HIPPA. Even acknowledging that someone is an actual patient

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*However much we might wish for a different scenario, the internet is here to stay, and we would be wise to learn how to better navigate the world of the online physician review system.*

ticle on page 2] that prevent providers from verifying the identities of patients who post online. The reviews may also be irrelevant or inaccurate. Naturally, we would all prefer to have a patient address an issue with us privately rather than leave an anonymous and public complaint online. Being anonymously criticized online can understandably lead to defensiveness and decreased morale among physicians.

However much we might wish for a different scenario, the internet is here to stay, and we would be wise to learn how to better navigate the world of the online physician review system.

fore they result in a negative online review. Most of these criticisms have nothing to do with medical competence or may not even be about the provider, but are about something else in the visit experience. These objections include long wait times, rude staff, unclean offices, billing surprises, and poor telephone communication. Educating and training the office and management staff about how to recognize and ameliorate these kinds of patient concerns should be a top priority—as it would be in any service business that has a public clientele.

Physicians should also perform an honest self-assessment to make sure they are not leaving themselves open to criticism for being in too much of a rush or “not listening.” For truly

### Inside PRF News

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# There's Been a Privacy Breach—Now What?

BY SHANNON R. GATES, ESQ.

**I**t is important that health care providers understand that it is their legal obligation to protect their patients' health information. For insight into the many requirements of the Health Insurance Portability and Accountability Act (HIPAA), some of the important requirements are outlined in the box below. In order to fully understand what is required, health care providers

must familiarize themselves with all of the requirements of HIPAA as well as the additional requirements of the California Confidentiality of Medical Information Act (CMIA).

## *What If There Is A Breach of Protected Health Information?*

Notify PRF. We can walk you through the HIPAA requirements (outlined below), and

your PRF Plus coverage covers notification and monitoring expenses.

Notify each individual whose unsecured protected health information has been, or is reasonably believed to have been, accessed, acquired, used, or disclosed as a result of the breach. The notification must be written in plain language and sent by first class mail no later than 60 calendar days after discovery of a

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## IMPORTANT HIPAA REQUIREMENTS

**H**ealth care providers must reasonably safeguard protected health information. Some of the important requirements of HIPAA include:

Use and disclosure of protected health information only as permitted or required by HIPAA.

Designation of a privacy officer who is responsible for the development and implementation of policies and procedures related to privacy issues.

Designation of a security officer who is responsible for the development and implementation of policies and procedures related to security issues.

Designation of a contact person who is responsible for receiving complaints.

Providing notice of your office's privacy practices to each patient, which includes the name and contact information for the person responsible for receiving complaints.

Obtaining satisfactory assurances from each of your office's business associates, in a written contract, that they will reasonably and appropriately protect the confidentiality, integrity, and availability of the electronic protected health information that they create, receive, maintain, or transmit on your office's behalf.

Development and implementation of administrative, physical, and technical safeguards to (1) ensure the confidentiality, integrity, and availability of all electronic protected health information your office creates, receives, maintains, or transmits; (2) protect against any reasonably anticipated threats or hazards to the security or integrity of such information; (3) protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required; and (4) ensure compliance by your office's workforce.

Administrative safeguards include risk assessment, analysis, and management; development of a sanction policy for workforce members who do not comply with your office's policies and procedures; implementation of procedures to regularly review records of information system activity; implementation of procedures to ensure that all members of your office's workforce have appropriate access to electronic protected health information and to prevent those who do not

have access from obtaining access; implement a security awareness and training program for all members of your office's workforce; implementation of procedures to address security incidents.

Physical safeguards include implementation of procedures to limit physical access to electronic information systems while ensuring that properly authorized access is allowed; implementation of procedures regarding workstation use and security; and implementation of procedures governing the receipt and removal of hardware and electronic media that contain protected health information into and out of a facility, and the movement of these items within the facility.

Technical safeguards include implementation of technical procedures for electronic information systems that maintain protected health information to (1) allow access only to persons or software programs that have been granted access rights; (2) record and examine activity; and (3) protect electronic protected health information from improper alteration or destruction.

Development and implementation of policies and procedures that set out how these, and all other, HIPAA requirements will be accomplished by your office.

Maintenance of the policies and procedures in written form (which may be electronic).

Review and updating of the policies and procedures periodically.

Retention of the policies and procedures for six years from the date of their creation or the date when last in effect, whichever is later.

Training the members of your office's workforce on all policies and procedures as necessary and appropriate for each member to carry out his or her function; and documentation that the training was provided.

Documentation of compliance with these requirements, maintenance of this documentation, and retention of the documentation for six years from the date of their creation or the date when last in effect, whichever is later.

Cooperation with the Secretary of the U.S. Department of Health and Human Services if the Secretary undertakes an investigation or compliance review of your office's policies, procedures, or practices. ■

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# Have You Hugged a Tree Today?

Reviews of *Lab Girl* by Hope Jahren and *The Hidden Life of Trees* by Peter Wohlleben

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BY ROBERT D. NACHTIGALL, MD

Is there anything that objectifies the sense and feeling of “Nature” better than a tree? Of course not. But I really hadn’t spent much time actually thinking about trees until I read the National Book Critics award-winning *Lab Girl* by Hope Jahren. Dr. Jahren’s personal memoir of how a girl who loved leaves and dirt overcame a myriad of obstacles (some expected, some surprising) to become a world-renowned research botanist is so simply, beautifully, and poignantly written that I can almost guarantee that you will fall in love with her (I certainly did). Alternating narrative chapters of her personal life story with short scientific essays that concisely illuminate the untold botanical wonders of treedom, the author easily exceeds her explicitly stated aim; i.e., you will never look at a tree in the same way again!

So when Peter Wohlleben’s *The Hidden Life of Trees* appeared on the New York Science Times recommended list (my go-to for non-fiction reading), I was more than willing to embark on a somewhat deeper and more extended adventure into the forest. What I wasn’t quite prepared for was the author’s skill at making scientifically footnoted explanations of tree physiology clearly understandable and even somewhat predictable—yet simultaneously fascinating and awe-inspiring! When we think of “plants” as opposed to “animals,” it’s easy to forget that both life-forms shared a common eukaryotic ancestor (albeit a billion years ago, more or less).

What Wohlleben does so effectively is demonstrate (without anthropomorphizing) how similar (and familiar) the survival concerns and strategies of trees are to our own. Trees not only live on sugar, breathe, grow, and sexually reproduce, but far from being (literally) free-standing individual entities, their natural habitat is in forests where they share an active and communicative social life with their neighbors (and offspring) and create an ecosystem that increases the group’s chances of survival far beyond their individual capability. And although all this activity is taking place right in front of us, we don’t notice it because the size and longevity of trees so dwarfs our own that their physiologic time scale appears impossibly slow.

Trees are the largest and longest-living life-forms that have ever existed on earth, and I find it remarkable (and humbling) to realize that there is a 9,500-year-old Swedish spruce living today that has witnessed the entire span of modern human civilization. Even the average tree lives 10 times longer than humans (they don’t even reach sexual maturity until 80-150 years old) and all their physiological processes are slowed to match this extended life span. Yet the ways that trees communicate

be almost unbelievably complex and result in reproductive strategies uniquely suited to their environment. This can include waiting two or three years between breeding seasons to keep acorn-loving deer and wild boar populations in check as well as synchronizing and staggering the opening of male and female blossoms to avoid self-pollination and inbreeding. Just to be clear, these preceding examples were gleaned from just the book’s first four chapters—there are 32 more equally fascinating chapters that

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are not dissimilar to the human senses of vision, touch, taste, and smell. When a group of giraffes decide that a grove of acacia trees looks like an all-you-can-eat lunch buffet, the trees not only pump toxins into their leaves but release an ethylene gas to warn their neighbors of the coming invasion. When a caterpillar bites a leaf, the insult results in nerve conduction analogous to pain – but it takes an hour for the tree’s chemical defenses to commence because their electrical impulses travel at a tree-paced 10 mm per minute instead of the human-scale 50 meters per second. When the leaves at the crown of the tree touch those of a neighbor, the tree re-directs its growth so as not to intrude on the neighbor’s sunshine. Yet much of the communication is invisible to us because it takes place underground.

Not only do trees communicate through their extensive root system, but even more through the hyper-dense hyphae of fungi that live in that same environment. How dense? More than a mile of fungal filaments per teaspoon of forest soil (the “wood wide web”). Ironically, selective breeding and agriculture have severed these lines of communication with the result that our modern plant crops have very little self-defense capability (and must rely on man-made chemical pesticides). Communication among same-species trees in a forest can

follow. At 250 pages, this is a wonderfully concise and information-rich book that is well worth your investment of time (for the tree it would be barely a heartbeat).

Let me summarize by opining that both of these tree-themed books are terrific, but in stylistically different ways. Hope Jahren’s intensely personal memoir at the heart of *Lab Girl* is compelling and lovely in a way that we immediately recognize as being authentic and distinctly human. On the other hand, Wohlleben’s work is informed by years of living and working in the forests of Germany and has a subtle ecological tone distinctly written from the tree’s perspective. By directing our attention to so many of the unnoticed and unappreciated “social” attributes and strategies of trees, he is gently encouraging us to see (and acknowledge) our inexorable link to not only trees, but to all forms of life that share our common planet Earth. ■

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## ONLINE REVIEWS (continued from page 1)

of the practice is a HIPPA violation. According to Deven McGraw, deputy director of Health Information Privacy at the U.S. Department of Health & Human Services, a physician response can lead to a complaint at the Office for Civil Rights. He cautions that "Health professionals who respond to online reviews can speak generally about the way they treat patients but must have permission to discuss individual cases." That means that a response cannot actually be much more personal than "I provide all of my patients with good patient care."

### How can providers "combat" negative reviews?

PRF cannot directly intervene to take down a negative post on Yelp, but PRF can offer guidance to contact Yelp's Customer Service department and if necessary may be able to recommend an attorney to assist.

The reality is that providers need to embrace the reviews of patients. Website or online reputation management services exist to bolster and polish your online presence and can help cultivate more positive reviews. Too often the issue is the denominator—if a provider

## It's OK to ask a patient you know well who likes to do online reviews for a positive plug for your practice . . .

only has three reviews and two are negative, things aren't going to look good. "The solution to pollution is dilution" is not only a valid strategy for wound irrigation; it also applies to negative reviews! It's OK to ask a patient you know well who likes to do online reviews for a positive plug for your practice, but never pad your online resume with posts from friends and family—it can come back later to discredit your entire public persona.

## KEEPING ONLINE REVIEWS IN CONTEXT

Take a deep breath and realize that not all is lost. Although it is true that the previously referenced JAMA survey found that almost 60

percent of respondents reported physicians' online ratings to be "somewhat" or "very" important, the survey found six other factors to be even more influential. In fact, the most important attribute in choosing a physician was that the practice accepted the patient's health insurance! In descending order, the other five patient preferences were the convenience of the office location, the physician's years of experience, whether the physician was part of a trusted group practice, positive word of mouth from family or friends, and referral from another physician.

Like it or not, online reviews can offer useful performance feedback and provide a pathway for practices to improve by identifying what patients care about. Positive reviews can also be a tool to promote one's practice. In the end, reviews of physicians and hospitals can help patients make more informed consumer decisions and thereby increase their confidence in their decision making. ■

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## PRIVACY BREACH

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breach. The notification must include:

- A brief description of what happened, including the date of the breach and the date of the discovery of the breach, if known;
- A description of the types of unsecured protected health information that were involved in the breach (e.g., full name, social security number, date of birth, home address, account number, diagnosis, disability code);
- Any steps individuals should take to protect themselves from potential harm resulting from the breach;
- A brief description of what the health care provider involved is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches; and
- Contact procedures for individuals to ask questions or learn additional information.

If the breach involves more than 500 residents of a state or jurisdiction:

- Notify prominent media outlets serving the state or jurisdiction; and
- Notify the Secretary of HHS at <https://www.hhs.gov/hipaa/for-professionals/breach-notification/breach-reporting/index.html>

If the breach involves less than 500 residents of a state or jurisdiction:

- Maintain a log or other documentation of such breaches and, not later than 60 days after the end of each calendar year, notify the Secretary of breaches occurring during the preceding calendar year, at <https://www.hhs.gov/hipaa/for-professionals/breach-notification/breach-reporting/index.html>.

### Does HIPAA apply to you?

HIPAA applies to all health care providers who electronically transmit health information to carry out financial or administrative activities related to health care. This includes the use of a billing service or other third party who electronically transmits the information for you.

For more information about HIPAA, visit <https://www.hhs.gov/hipaa/for-professionals>. ■

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