

# INDIANA UNIVERSITY

# HIPAA-A01 Policy: University HIPAA Privacy and Security Officers

#### **FULL POLICY CONTENTS**

Scope

Reason for Policy Policy Statement

ADDITIONAL DETAILS
Related Information

History

Effective: January 30, 2012 Last Updated: January 12, 2016

Responsible University Office:

University Clinical Affairs

**Responsible University Administrator** *Vice President for University Clinical Affairs* 

**Policy Contact:** 

University HIPAA Privacy Officer University HIPAA Security Officer

# Scope

This policy pertains to all Indiana University (IU) HIPAA affected area, as defined by the HIPAA Privacy and Security Compliance Council and published in the HIPAA Compliance Participant List.

# Reason for Policy

This policy defines university-wide roles and responsibilities of the University HIPAA Privacy Officer and the University HIPAA Security Officer in compliance with the Health Insurance Portability and Accountability Act (HIPAA). This policy also covers the reporting structure for these two positions, as well as, their charge to serve as the responsible persons as required under HIPAA.

## **Definitions**

See Glossary of HIPAA Related Terms for a complete list of terms.

# **Policy Statement**

The Indiana University Vice President for University Clinical Affairs shall designate individuals to serve as the University HIPAA Privacy Officer and the University HIPAA Security Officer and shall grant sufficient authority and resources to fulfill the duties addressed in this policy.

The University HIPAA Privacy Officer shall be responsible for privacy matters related to the HIPAA Privacy Rule.

The University HIPAA Security Officer shall be responsible for security matters related to the HIPAA Security Rule.

The University HIPAA Privacy Officer shall be accountable to the HIPAA Privacy and Security Compliance Council and the Vice President for University Clinical Affairs.

The University HIPAA Security Officer shall be accountable to the HIPAA Privacy and Security Compliance Council, the Vice President for University Clinical Affairs and the Chief Information Officer and Associate Dean for Information Technology.

## University HIPAA Privacy and Security Officer Roles and Responsibilities

The University HIPAA Privacy and Security Officers shall develop and implement the Indiana University HIPAA Compliance Program ("IU HIPAA Program") under the direction of the Vice President for University Clinical Affairs and the Chief Information Officer and Associate Dean for Information Technology and in collaboration with appropriate audit, compliance, privacy, and security offices, and affected units and the Indiana University Health Privacy Office.

Together, the IU HIPAA Privacy and Security Officers shall:

- Co-chair the HIPAA Privacy and Security Compliance Council and apply the strategies identified by the Council.
- Oversee, monitor and coordinate HIPAA privacy and security compliance efforts across IU HIPAA affected units, regardless of the office or School responsible.
- Coordinate and harmonize such efforts, as feasible and appropriate, with the <u>Indiana University Security and Privacy Program</u>.
- Monitor developments and changes in relevant local, state and federal statutes, regulations and ordinances that may affect the IU HIPAA Program.
- Maintain and implement university-wide HIPAA privacy and security policies and procedures.
- Maintain the IU HIPAA Compliance Participant List.
- Coordinate delivery of related HIPAA privacy and security training university-wide.
- Coordinate HIPAA-related complaints and incidents in accordance with the Privacy Complaint policy and the Incident Reporting, Management and Breach Notification policy.
- Retain documentation required for IU's compliance with the HIPAA Privacy and Security Rules.
- Address inquiries related to the IU covered healthcare components' Notice of Privacy Practices.
- Provide guidance and support to IU HIPAA affected units related to the IU HIPAA Privacy and Security Program.
- Conduct periodic HIPAA privacy and security compliance reviews.
- Provide routine reports to the HIPAA Privacy and Security Compliance Council.
- Facilitate periodic reviews of the IU HIPAA Program.

## **Procedures**

## **Designate IU HIPAA Privacy and Security Officers**

The Vice President for University Clinical Affairs will designate individual(s) to serve as the University HIPAA Privacy Officer and the University HIPAA Security Officer, in accordance with the provisions of the HIPAA Privacy and Security Rules.

The Vice President for University Clinical Affairs will document this designation of the University HIPAA Privacy and Security Officers in an IU memorandum. The Vice President will notify all IU HIPAA affected units of the IU HIPAA Privacy and Security Officer designations and any changes to the designations.

The University HIPAA Privacy and Security Officers will retain documentation, in accordance with HIPAA and any applicable IU document retention policies.

## **Related Information**

## **HIPAA** Regulations

### Privacy Rule

45 CFR § 164.530(a) - Personnel Designations

45 CFR § 164.530(c) - Training

45 CFR § 164.530(d) – Complaints

45 CFR § 164.530(i) - Policies and Procedures

45 CFR § 164.530(j) - Documentation

#### Security Rule

45 CFR § 164.308(2) - Assigned security responsibility 45 CFR § 164.316 - Policies and procedures and documentation requirements

#### HITECH Act

Section 13402 of Title XIII (HITECH Act) of the ARRA Act of 2009

45 CFR §160 and 164 – Breach Notification for Unsecured Protected health Information; Interim Final Rule

# History

01/2012 New policy

01/2016 Revised language to reflect current organizational status