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| Title: Administrative Policy Health Insurance Portability and Accountability Act Hybrid and Privacy and Security Officials Designation Policy | Policy No. Part 5, Staff Policies Chapter 2, Health Information Privacy & Security Section 1 |
| | Effective Date May 5, 2020 |
| Policy Custodian County Manager | Adoption/Revision Date May 5, 2020 |

Adopting Resolution(s): CC20-088

References (Statutes /Resos/Policies): Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 C.F.R. Parts 160 and 164, as amended, Health Information Technology for Economic and Clinical Health Act (HITECH); Information Security Policy; CC03-122, CC04-156, CC05-178, CC06-475, CC07-471, CC17-058, CC17-188

Purpose: To designate Jefferson County as a Hybrid Entity and identify Privacy and Security Officials in compliance with HIPAA.

Policy: Health Insurance Portability and Accountability Act (HIPAA) Hybrid and Privacy and Security Officials Designation Policy

- A. Definitions: Relevant HIPAA definitions may be found in 45 C.F.R. 160.103 and 45 C.F.R. 164.103, 164.304, 164.402 and 164.501. In the event any of the definitions below conflict with the definitions in the HIPAA regulations, the definitions in the HIPAA regulations are controlling.
1. Business Associate: An entity or person that on behalf of a Covered Entity:
 - a. Creates, receives, maintains or transmits PHI for a function or activity regulated by HIPAA; or
 - b. Conducts business that involves the disclosure of PHI from such Covered Entity to the Business Associate or from another Business Associate of such Covered Entity to the Business Associate.
 2. Covered Entity: A health plan, a health care clearinghouse, or a health care provider who transmits any health information in electronic form in connection with a transaction covered by HIPAA.
 3. Hybrid Entity: A single legal entity that has designated itself as a Hybrid Entity because it is a Covered Entity that conducts business activities that include both covered and non-covered functions and has separate departments, offices, divisions, or employment units that would meet the definition of a Covered Entity or Business Associate if it were a separate legal entity (each a "Health Care Component").

4. Protected Health Information (PHI): PHI is individually identifiable health information that relates to the individual's past, present, or future physical or mental health, provision of health care, or payment for the provision of health care.

B. Designation

1. Jefferson County is hereby designated a Hybrid Entity under HIPAA.
2. The Health Care Components of the county under HIPAA include:
 - a. The following programs administered by the Human Resources Department: Programs offered to county employees as self-insured plans.
 - b. The following programs administered by the Human Services Department:
 - 1) Community Assistance Division, all program areas
 - 2) Children, Youth and Family Services Division's Child Protection & Foster Care program area
 - c. Jefferson County Public Health

C. Implementation and Enforcement Authority

1. Because Jefferson County is a single legal entity, there is one Designated Privacy Official and one Designated Security Official. The County's Health Care Components may assign other individuals to develop, implement, train, and enforce HIPAA procedures and guidelines.
2. Privacy
 - a. The Compliance Manager in the Safety & Compliance Division is the county's Designated Privacy Official under HIPAA and shall have the authority for establishing, implementing, and enforcing the overall county requirements of HIPAA. In the event there is a vacancy in the position of Compliance Manager, the Deputy County Manager may designate and name a county employee to serve as the HIPAA Designated Privacy Official in a procedure that implements this policy.
 - b. The Human Services Department Director, Human Resources Department Director, and Public Health Executive Director or their respective designees shall be responsible for the development, implementation, training, and enforcement of procedures and guidelines necessary for their respective county Health Care Component to comply with HIPAA and the overall requirements of the Designated Privacy Official.
3. Security
 - a. The Chief Information Security Official (CISO) as defined in the Information Security Policy shall serve as the Designated Security Official under Part 164,

Subpart C of HIPAA, who shall have the authority for the development and implementation of the overall county policies and procedures required by Part 164, Subpart C of HIPAA.

- b. The Human Services' Information Technology Director and the Total Compensation Manager, shall be responsible for the development, implementation, training, and enforcement of procedures and guidelines necessary for the Department to comply with Part 164, Subpart C of HIPAA for security standards and the overall requirements of the Designated Security Official.
 - c. Public Health's Supervisor of Information Technology is the Designated Security Official for the Public Health Department and shall be responsible for the development, implementation, training, and enforcement of procedures and guidelines necessary for the Department to comply with Part 164, Subpart C of HIPAA for security standards and the overall requirements of the Designated Security Official.
4. The policies, procedures, Notice of Privacy Practices, and other documentation adopted by the county related to HIPAA may be obtained from the county's Designated Privacy Official.
 5. The county's Designated Privacy Official shall also serve as the contact person who is responsible for hearing complaints regarding HIPAA and for providing information regarding the county's privacy practices.