Designation of Chief HIPAA Privacy Officer and Chief HIPAA Security Officer

APPLICABILITY:

This policy applies to the following entities (collectively referred to as "UNC Health Care System" or "UNCHCS" in this policy):

- ✔ UNC Health Care System/UNC Medical Center*
- ✔ UNC Physicians Network
- ✔ UNC Physicians Network Group Practices
- ✔ Rex Healthcare / Rex Hospital
- ✔ Chatham Hospital
- ✔ Caldwell Memorial Hospital
- ✔ UNC Rockingham Health Care / UNC Rockingham Hospital
- ✔ Johnston Health
- ✔ Lenoir Memorial Hospital
- ✔ Margaret R. Pardee Memorial Hospital
- ✔ Nash Healthcare System / Nash Hospitals
- ✔ Wayne UNC Health Care

*UNC Medical Center includes all UNC Hospitals' facilities and the clinical patient care programs of the School of Medicine UNC-Chapel Hill (including UNC faculty physicians).

I. Description

UNCHCS is required under the privacy and security regulations of the federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA") to designate a Privacy Officer and a Security Officer.

Included within the scope of this policy are the patient care programs of the UNC School of Medicine (UNC SOM). As a result, this policy shall apply to all UNC SOM personnel, including but not limited to faculty, staff, students, trainees, interns and volunteers who may be full-time, part-time, paid or unpaid who create, store, transmit, access or use any patient information in support of clinical purposes for UNCHCS or any other healthcare entity.
II. Policy

A. The UNCHCS Privacy and Security Officer Scope of Authority

1. UNCHCS Privacy Officer Responsibilities

a. The UNCHCS Privacy Officer shall have full responsibility for the HIPAA privacy compliance responsibilities for UNCHCS (with the exception of UNCHCS Managed facilities) and shall be authorized to act on behalf of UNCHCS with respect to HIPAA privacy compliance issues including but not limited to HIPAA privacy policies, privacy incident investigations, HIPAA privacy training and education, EHR access audits and other audits involving HIPAA compliance as well as outreach and guidance on HIPAA privacy related issues.

b. The UNCHCS Privacy Officer shall be responsible for the development, implementation, maintenance of, and adherence to policies and procedures regarding the privacy of health information in compliance with HIPAA and other applicable federal and state laws.

2. UNCHCS Privacy Officer Responsibilities – UNCHCS Managed Facilities

The UNCHCS Privacy Officer shall act in a strictly consultative role to UNCHCS Managed Facilities. The individual UNCHCS Managed Facilities shall each be independently responsible for all HIPAA privacy compliance responsibilities of their facilities. The UNCHCS Privacy Office shall provide consultation services as necessary or as requested from time to time and shall only provide such additional services beyond consultation upon agreement.

3. Appointment of Privacy Personnel – Owned and Managed Facilities

a. UNCHCS Owned Facilities – Appointment of Privacy Coordinators. UNCHCS Owned Facilities may appoint Facility Privacy Coordinators who shall be responsible for coordinating with the UNCHCS Privacy Office to facilitate and coordinate implementation of the UNCHCS privacy policies at their respective facility and who shall act at the direction of the UNCHCS Chief Privacy Office with respect to the operational implementation and application of the UNCHCS HIPAA privacy policies.

b. Managed Facilities – Appointment of Facility Privacy Officers. UNCHCS Managed Facilities may appoint their own individual "Facility Privacy Officers" or such other privacy personnel who shall be responsible for local facility operational implementation of the UNCHCS privacy policies or their own facility's privacy policies (as the case may be) and may at their own discretion seek advice and consultation from the UNCHCS Privacy Officer from time to time with respect to HIPAA privacy matters or the UNCHCS HIPAA privacy policies.

4. UNCHCS Security Officer Responsibility

The Security Officer shall be responsible for the development, implementation, maintenance of, and adherence to policies and procedures regarding the security of health information in compliance with the HIPAA Security Rule and other similar applicable federal and state laws.

III. Definitions

Privacy Official – A person designated by UNCHCS who is responsible for the development and implementation of the UNCHCS HIPAA privacy compliance program. The Privacy Official may delegate responsibility for privacy functions unless otherwise indicated. The Privacy Official may also serve as the Security Official if so designated.

Security Official – The person designated by UNCHCS who is responsible for the development and
implementation of the UNCHCS HIPAA security policies and procedures. The Security Official may delegate responsibility for security functions unless otherwise indicated. The Security Official may also serve as the Privacy Official if so designated. 45 CFR § 164.308(a)(2).

IV. References

45 C.F.R. §§ 164.308(a)(2), 164.530(a),(i),(j)

V. Related Policies/Forms

None

Attachments:

No Attachments

Approval Signatures

<table>
<thead>
<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jerylyn Williams: VP Chief Audit &amp; Comp Officer</td>
<td>01/2019</td>
<td></td>
</tr>
<tr>
<td>SYSTEM Site Administrator</td>
<td>Emilie Hendee: HCS-Sr Attorney</td>
<td>01/2019</td>
</tr>
<tr>
<td></td>
<td>David Behinfar: HCS-Privacy Dir</td>
<td>01/2019</td>
</tr>
</tbody>
</table>

Applicability

Caldwell Memorial Hospital, Chatham Hospital, Johnston Health, Nash Health Care, Pardee Hospital, UNC Health Care System, UNC Lenoir Health Care, UNC Medical Center, UNC Physicians Network, UNC Rex Healthcare, UNC Rockingham Health Care, Wayne Memorial Hospital