

**3361: 10-5-20**

**Organization: HIPAA administration and compliance**

- (A) The university is committed to compliance with all requirements of the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations (hereinafter “HIPAA”), as they may be amended from time to time.
  
- (B) Because the university only uses, and engages in electronic transactions involving, HIPAA protected health information for a part of its operations, the university has designated itself as a hybrid entity for purposes of HIPAA compliance. The designated health care components of the university’s hybrid entity subject to the specific requirements of HIPAA are the following:
  - (1) University health services
  - (2) Hoxworth blood center
  - (3) College of medicine
  - (4) Human resources component administering the university’s health plans
  - (5) Office of general counsel
  - (6) UC information security department
  - (7) Office of research compliance & regulatory affairs
  - (8) Internal audit
  - (9) Such other components as may be required to comply with changes in the law, or that are necessary for the orderly operation of the university as determined in writing by the senior vice president for academic affairs and provost

In the event an additional university component is designated as part of the university’s hybrid entity, the senior vice president for academic affairs and provost shall report such designation to the board for information at its next regular meeting.

- (C) Overall administration of university's HIPAA compliance program shall be the responsibility of the university HIPAA privacy official, who shall be appointed by and shall report to the senior vice president and provost. The responsibilities of the university privacy official shall include:
- (1) Developing, implementing and maintaining the HIPAA compliance program
  - (2) Coordinating the implementation of appropriate policies and procedures
  - (3) Developing and overseeing the training of employees in the healthcare components of the hybrid entity and other employees as appropriate
  - (4) Serving as the contact person for any HIPAA related complaints and administering appropriate complaint procedures and processes
  - (5) Overseeing HIPAA breach notification
  - (6) Coordinating the implementation and enforcement of sanctions against employees who violate HIPAA policies
  - (7) Conducting HIPAA audits
  - (8) Overseeing institutional HIPAA compliance
  - (9) Developing, implementing and monitoring all other obligations of the university under HIPAA
- (D) Although only the healthcare components of the university's hybrid entity are part of a covered entity for purposes of HIPAA compliance, all employees of the university are required to protect and safeguard the confidentiality of individually identifiable health information relating to the physical or mental health or condition of an individual, the provision of health care to an individual or the payment for health care for an individual. This requirement is a statement of university policy and is not intended to subject components of the university that are not part of the university's hybrid designation to the specific requirements of HIPAA.

Effective: July 15, 2011

Certification:



Susan M. Stringer  
Executive Assistant to the Board of Trustees

Date: June 21, 2011

Promulgated under: R.C. Section 111.15

Rule amplifies: R.C. 3361.03