PROCEDURE TITLE:

Administration of Privacy Compliance

To be reviewed every three years by:
Information Security and Privacy Council

REVIEW BY: September 1, 2021

PROCEDURE

This Procedure implements the requirements of Integrity & Compliance Policy No. 1 Integrity and Compliance Program which requires Trinity Health to establish a Privacy program to, among other things, protect the use and disclosure of Protected Health Information consistent with requirements of law or regulation.

1. Privacy Official

   a. Each Ministry will have a Privacy Official. If the Privacy Official has other responsibilities, there will be adequate support to ensure the duties described in the Trinity Health Privacy Official Position Description can be met.

   b. The Privacy Official shall be appointed in consultation with the Trinity Health Privacy Official.

2. Compliance

   a. The Privacy Official at Trinity Health and each Ministry will ensure privacy compliance by:

      i. Enacting their own or adopting Trinity Health Privacy Compliance Procedures;

      1. If a Ministry chooses to enact or keep its own Privacy Compliance Procedures, separate and independent from Trinity Health Privacy Compliance Procedures, they must meet or exceed the requirements set forth in Trinity Health Privacy Compliance Procedures. In the event of a conflict in interpretation or practice between a Ministry's local Privacy Compliance procedure and a Trinity Health Privacy Compliance procedure, the Trinity Health procedure is to be followed;
ii. Educating workforce members on its Privacy Compliance Procedures;
iii. Making its Privacy Compliance Procedures readily available and accessible to workforce members;
iv. Providing on-going communication to workforce members regarding its Privacy Compliance Procedures;
v. Investigating and documenting privacy related complaints/incidents according to standards and expectations established by the Trinity Health Privacy Compliance department;
vi. Implementing and maintaining adherence to Privacy Compliance Procedures, including privacy and security safeguards;
vii. Conducting on-going monitoring of activities related to privacy compliance, including conducting periodic risk assessments; and
viii. Continually analyzing and monitoring overall Privacy Compliance Program effectiveness.

3. **Privacy Oversight**

a. The Privacy Official will serve in a leadership role in the Ministry with respect to privacy compliance.
b. The Privacy Official will report to the senior leadership and local compliance or other appropriate committees on issues related to the Privacy Compliance Program.
c. The Privacy Official will work in close collaboration with the Integrity and Compliance Officer and the Security Official.
d. The Privacy Official will ensure that its Ministry's Privacy Compliance Procedures are consistent with Trinity Health’s Integrity & Compliance Program.

4. **Qualifications**

a. The Ministry will ensure that the qualifications for its Privacy Official position include a minimum of the following:

   i. A Bachelor’s degree and/or relevant experience;
   ii. Two years of experience in the health care field;
   iii. Demonstrated working knowledge of privacy compliance regulations;
   iv. Organizational and managerial skills including the ability to adjust priorities;
   v. Investigatory skills; and
   vi. High level of communication skills (i.e., written and verbal).

5. **Resources / Questions about the Procedures**

a. The Privacy Official will serve as a resource person for privacy compliance for workforce members.
b. Questions about privacy compliance should be directed to the local Privacy Official, Trinity Health Legal, or Trinity Health Privacy Official.
The Privacy Official at each respective Trinity Health Ministry is responsible for ensuring compliance with all Privacy Compliance Procedures. These activities may be delegated by the Privacy Official to another individual as appropriate and necessary, but the Privacy Official remains responsible for ensuring compliance.

The purpose of this Procedure is to ensure Administration of Privacy Compliance is consistent with applicable privacy and security regulations.

**SCOPE/APPLICABILITY**

This Procedure is intended to apply to Trinity Health and all Ministries when performing functions that are regulated by HIPAA either directly as covered entities, or indirectly as Business Associates, and all members of the Trinity Health workforce. Each Ministry may adopt mirror procedures substantially similar to these procedures.

**DEFINITIONS**

**Business Associate** means a person or entity who is not a member of Trinity Health’s Workforce and performs or assists in the performance of a function or activity for or on behalf of Trinity Health regarding treatment, healthcare operations or payment purposes or for any other function or activity involving PHI.

**HIPAA** means the Privacy Standards of the Health Insurance Portability and Accountability Act of 1996, and its implementing regulations, 45 CFR Parts 160 and 164, as they are amended from time to time.

**Ministry** means a first tier (direct) subsidiary, affiliate, or operating division of Trinity Health that maintains a governing body that has day-to-day management oversight of a designated portion of Trinity Health System operations. A ministry may be based on a geographic market or dedication to a service line or business. Ministries include Mission Health Ministries, National Health Ministries, and Regional Health Ministries.

**Policy** means a statement of high-level direction on matters of strategic importance to Trinity Health or a statement that further interprets Trinity Health’s governing documents. System Policies may be either stand alone or Mirror Policies designated by the approving body.

**Privacy Official** means an individual designated by the organization that is accountable for privacy-related matters.

**Procedure** means a document designed to implement a Policy or a description of specific required actions or processes.

**RESPONSIBLE DEPARTMENT**
Further guidance concerning this Procedure may be obtained from the System Office Integrity and Compliance department.

RELATED PROCEDURES AND OTHER MATERIALS

- Integrity and Compliance Program Policy No. 1
- Privacy Compliance Procedures
- Enterprise Information Security Procedures
- Resources for Privacy Officials

APPROVALS

Initial Approval: 08/15/2002

Subsequent Review/Revision(s): 09/15/2011
07/17/2013
08/12/2015
07/31/2018