

# **Incorporating Privacy Policies and HIPAA Compliance into an Institutional Compliance Plan**

**Rebecca L. Williams, RN, JD  
Davis Wright Tremaine LLP  
1501 Fourth Ave.  
Seattle, Washington  
(206) 628-7769  
beckywilliams@dwt.com**

**Shana Chung, MPH, JD  
Premera Blue Cross  
PO Box 327  
Seattle, WA 98111  
(425) 670-4356  
shana.chung@premera.com**



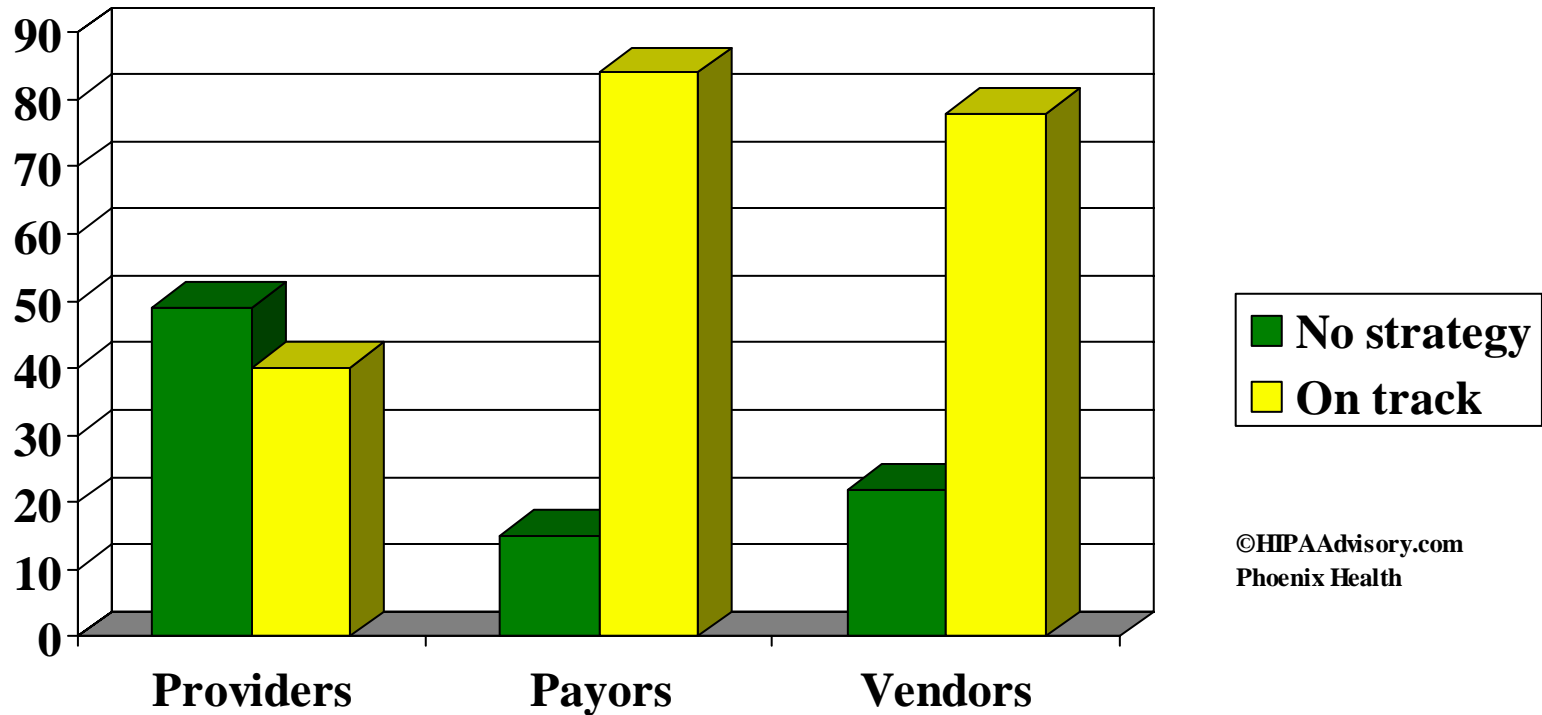
**Davis Wright Tremaine LLP**

# The HIPAA Clock Is Ticking

- ◆ **The final transaction and code sets regulations started the clock**
- ◆ **Standards must be implemented by October 16, 2002 (with an extra year for small health plans)**
- ◆ **The other regulations are not far behind**



# HIPAA Compliance Strategy Progression

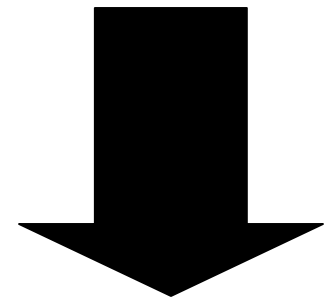


©HIPAAAdvisory.com  
Phoenix Health



# Commitment to HIPAA Compliance

- ◆ **HIPAA compliance needs to be top-down**
- ◆ **Start with an education process, including the board and senior leadership**
- ◆ **Must have commitment to compliance by the board and senior leadership**



# Practical Reasons for Compliance Plans

- ◆ **Reduce criminal and civil liability/based on the Federal Sentencing Guidelines**
- ◆ **Government encouragement — Compliance Program Guidance**
- ◆ **Consistent with Board's fiduciary duty**
- ◆ **Consistent with sound business practices**
- ◆ **Voluntary is preferable over government-mandated plan**

# A First Step — Revisit Corporate Compliance Programs

- ◆ **Organizational commitment to integrity**
- ◆ **Form of self-policing**
- ◆ **Processes to effectively ensure legal compliance**
- ◆ **Part of an organization's day-to-day operations**
- ◆ **Part of the health care industry**

# Integrated Compliance Planning

- ◆ **For those with compliance programs, leverage current compliance knowledge, processes, culture and resources**
- ◆ **For those without effective compliance plans**
  - ❖ **Use HIPAA as the lead issue**
  - ❖ **Establish structure — Expand as capabilities allow**
- ◆ **Integrate — Do not just layer an additional bureaucracy on top**

# Integrated Compliance Planning

<b><i>OIG Compliance Plan</i></b>	<b><i>HIPAA Compliance Plan</i></b>
Policies & Procedures	Administrative Procedures
Assignment of Oversight Responsibilities	Assigned Security & Privacy Responsibilities
Training & Education	Training & Education
Lines of Communication	Report Procedures; Event Reporting
Enforcement & Discipline	Sanctions
Audit & Monitoring	Internal Audit
Response & Corrective Action	Response Procedures; Testing & Revision



# Ensure Oversight — Compliance Task Force

- ◆ **Form HIPAA oversight group or task force**
- ◆ **Too big a job for one person**
- ◆ **Engage key managers and clinicians**
- ◆ **Don't delegate this solely to the I/S department**

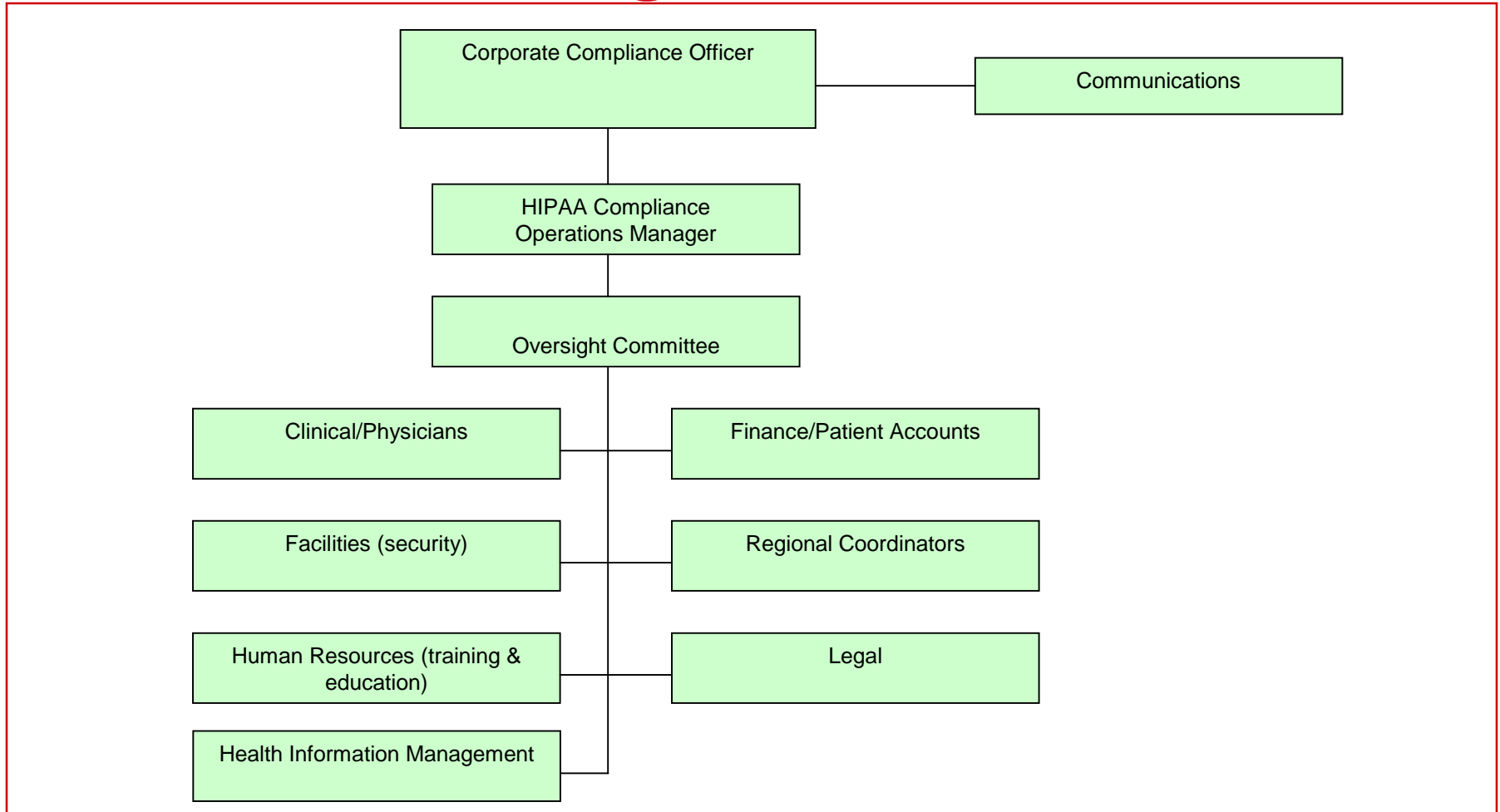


# Ensure Oversight — HIPAA Police

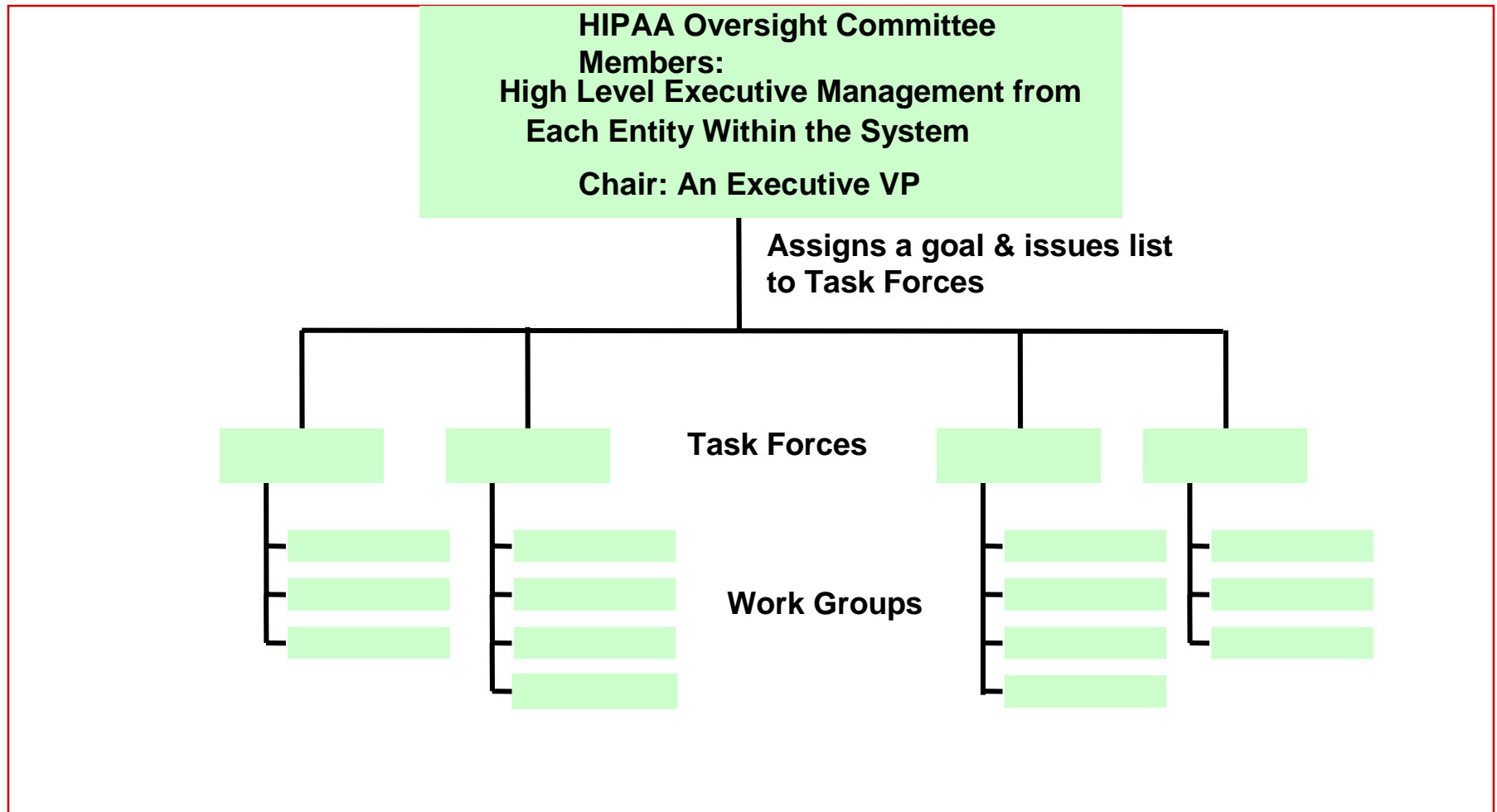
- ◆ **Appoint privacy and security officials**
- ◆ **Must have real authority — Be aware of the chain of command**
- ◆ **Defined by organization's need**
- ◆ **Who should be privacy and security officer?**



# Ensure Oversight — Other HIPAA Organizational Structure



# Ensure Oversight — Other Structures

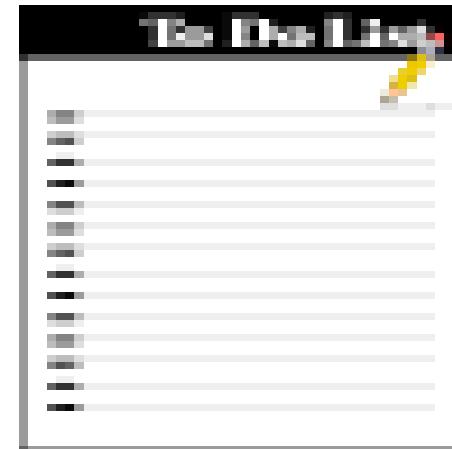


# Employee Training: Like All Compliance Efforts, Training Is Crucial

- ◆ Privacy and security awareness training to —
  - ❖ Entire workforce
  - ❖ New employees
- ◆ When policies change, retrain affected employees
- ◆ HIPAA certification for employees
  - ❖ New certification statement at least every 3 years
  - ❖ May want to tie with compliance program
- ◆ Stress importance of security and privacy
- ◆ Consistent enforcement

# Risk Management

- ◆ **Prioritize the issues facing the organization**
- ◆ **Priorities list should drive the compliance plan**
- ◆ **Fix identified problems in priority order**



# HIPAA Project Scope

- ◆ **Compliance for all Premera entities impacted by HIPAA**
- ◆ **Modification of information systems**
- ◆ **Modification of business practices**
- ◆ **Document policies and procedures**
- ◆ **Draft business partner agreements**
- ◆ **Secure transmission & storage of all protected health information**
- ◆ **HIPAA compliance monitoring**

# HIPAA Program Phases

Decide on  
Remediation  
Strategy

Phase	Assessment	Analysis	Remediation	Closeout
Content	<ul style="list-style-type: none"> <li>✓ High Level Assessment</li> <li>✓ Identify impacted systems and processes</li> <li>✓ High Level Scope</li> <li>✓ Total Project Cost Gross Estimate</li> </ul>	<ul style="list-style-type: none"> <li>✓ Select HIPAA Consultant</li> <li>❑ Detailed Gap Analysis of affected systems and processes</li> <li>❑ Code Analysis</li> <li>❑ Transaction Gap Analysis</li> <li>❑ Operational Gap Analysis</li> <li>❑ Data Dictionary &amp; Data Mapping</li> <li>❑ Security Design</li> <li>❑ Privacy Analysis</li> <li>❑ Remediation Approach Decision</li> <li>❑ Remediation Plan and Schedule</li> </ul>	<ul style="list-style-type: none"> <li>❑ Detailed system design of remediation</li> <li>❑ Detailed design of procedural changes</li> <li>❑ Coding and testing</li> <li>❑ Implementation of system remediation and procedural changes</li> <li>❑ Communication and retraining</li> <li>❑ Trading Partner contract modifications</li> <li>❑ Finalize contracts with vendors &amp; contractors</li> </ul>	<ul style="list-style-type: none"> <li>❑ Transition project team</li> </ul>
Timing	Jan 00 – Mar 00	Sep 00 – Mar 01	Nov 00 – Mar 03 Staggered stages which begin as each ruling is published	Apr 03 Follows each remediation stage



# HIPAA Program Schedule

September 2000 - April 2003

8/2000

2001

2002

2003

4/2003

**Rulings Published**

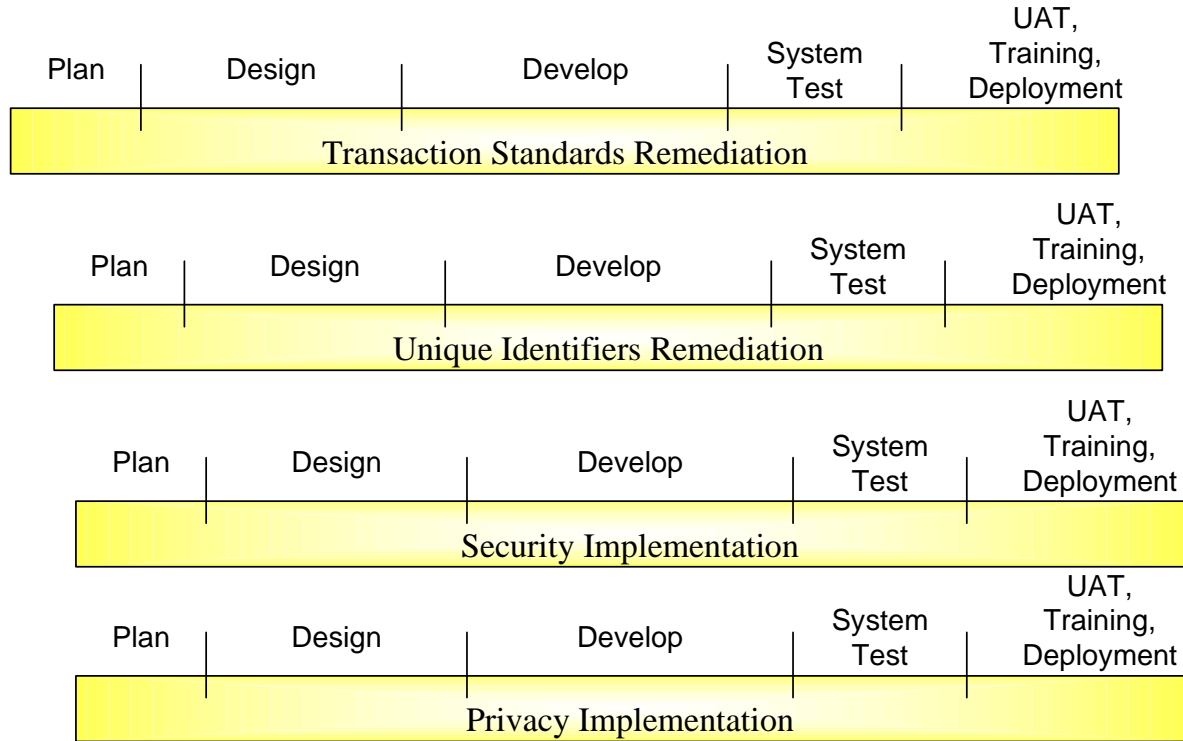
*26 months from final ruling publication & compliance deadline*

**Compliance Deadlines**

**Analysis**



**Remediation**



**Closeout**



# Know the HIPAA Rules

Overview

## HIPAA Privacy

PHI

Individual  
Rights

Minimum  
Necessary

Policies and  
Procedures

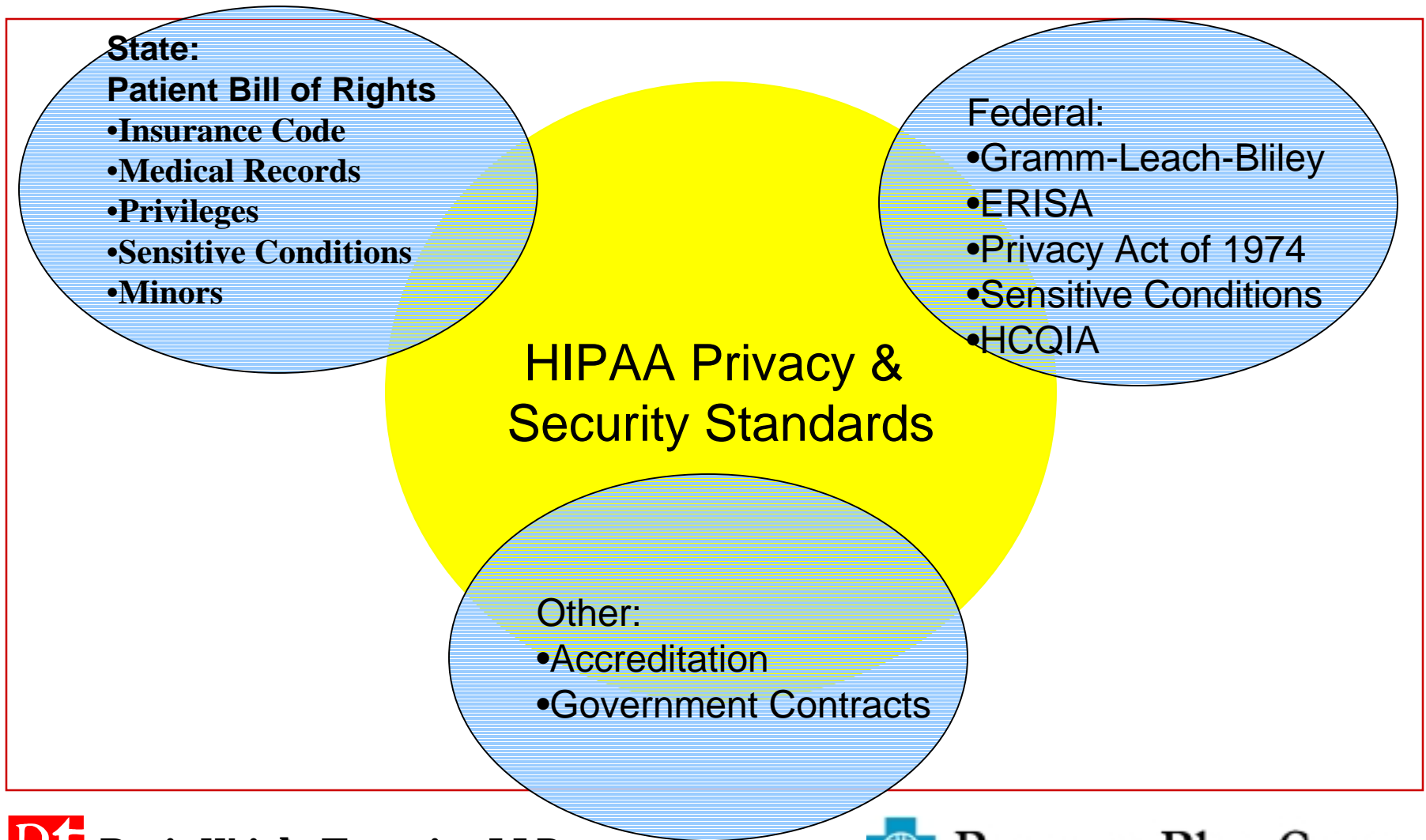
Use and Disclosure

Business  
Partners

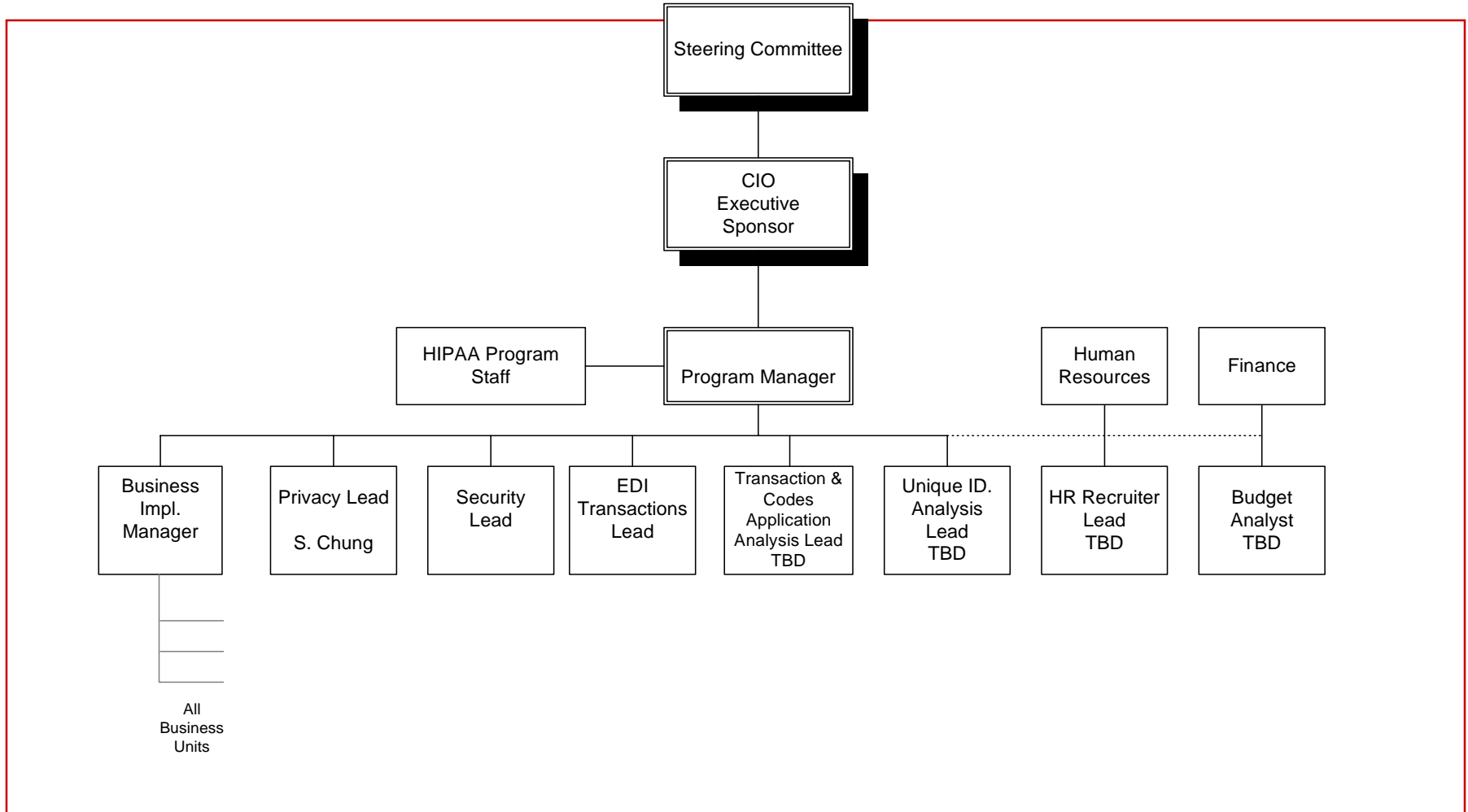
Privacy Official  
& Training



# Know Related Rules



# Build the HIPAA Team



# Analysis Phase Staffing

## Program Core Team

- Program Manager
- Business Implementation Manager
- 3 Project Managers
- Standard Transactions Lead
- Application Analysis Lead
- Unique Identifier Lead
- Security Lead
- Privacy Lead

## PMO Staff

- Project Coordinator
- Project Financial Analyst
- Project Administrator/Technical Writer/Webmaster
- HR Recruiter
- Information Modeler
- Data Analyst
- Architect
- Business Analyst

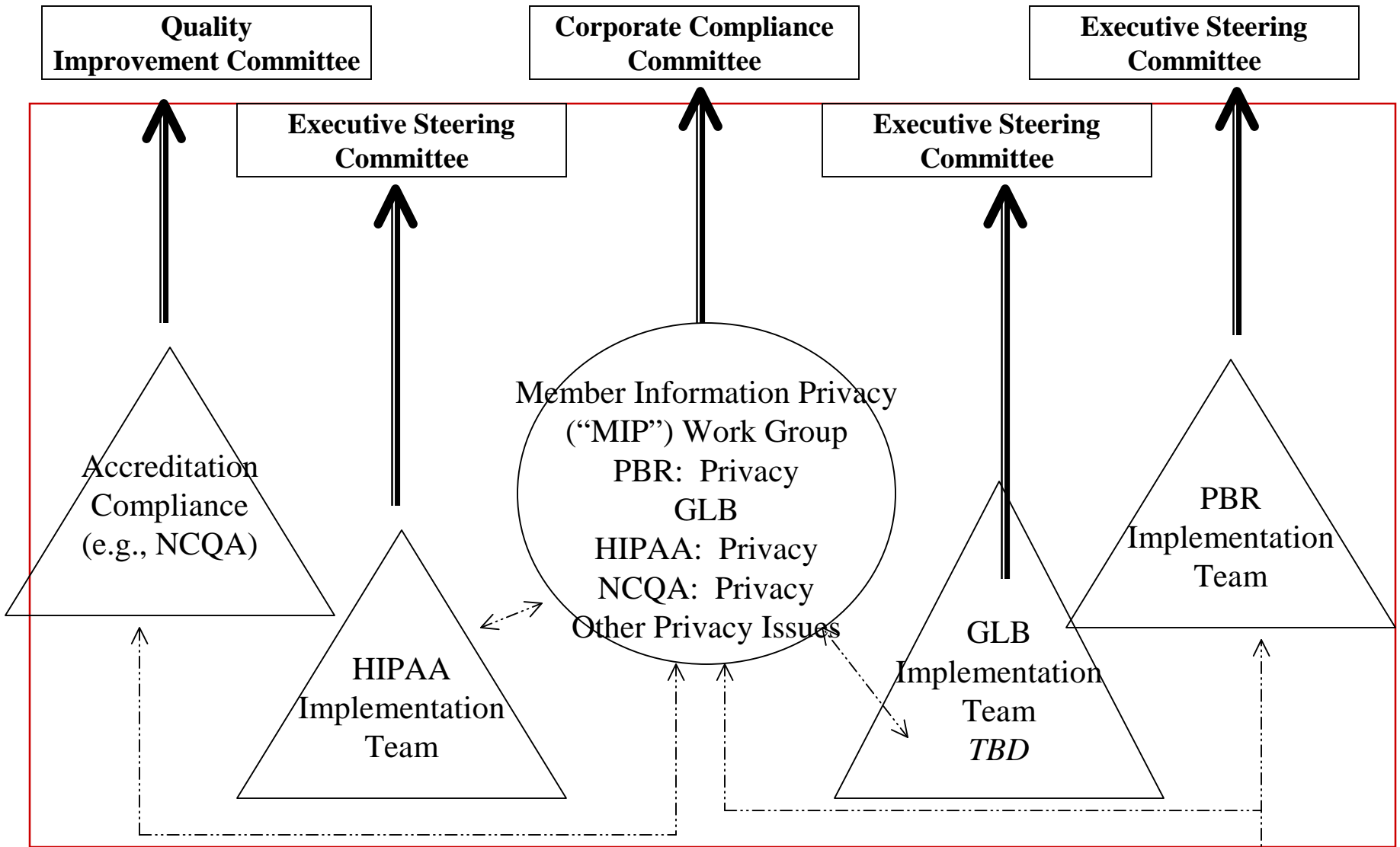
## Subject Matter Experts

- 100 Business Experts x 16 hr (avg)
- 80 System Experts x 16 hr (avg)

# Conduct Assessment and Analysis

- ◆ **Inventory Data Repositories**
  - ❖ **Identify where information resides**
  - ❖ **Look beyond the obvious (palm pilots, laptops)**
- ◆ **Evaluate current processes**
  - ❖ **Technical**
  - ❖ **Human**
  - ❖ **Organizational**
- ◆ **Y2K inventories may be helpful**
- ◆ **DON'T STOP with information systems!**

# Reporting Structure: Privacy Issues

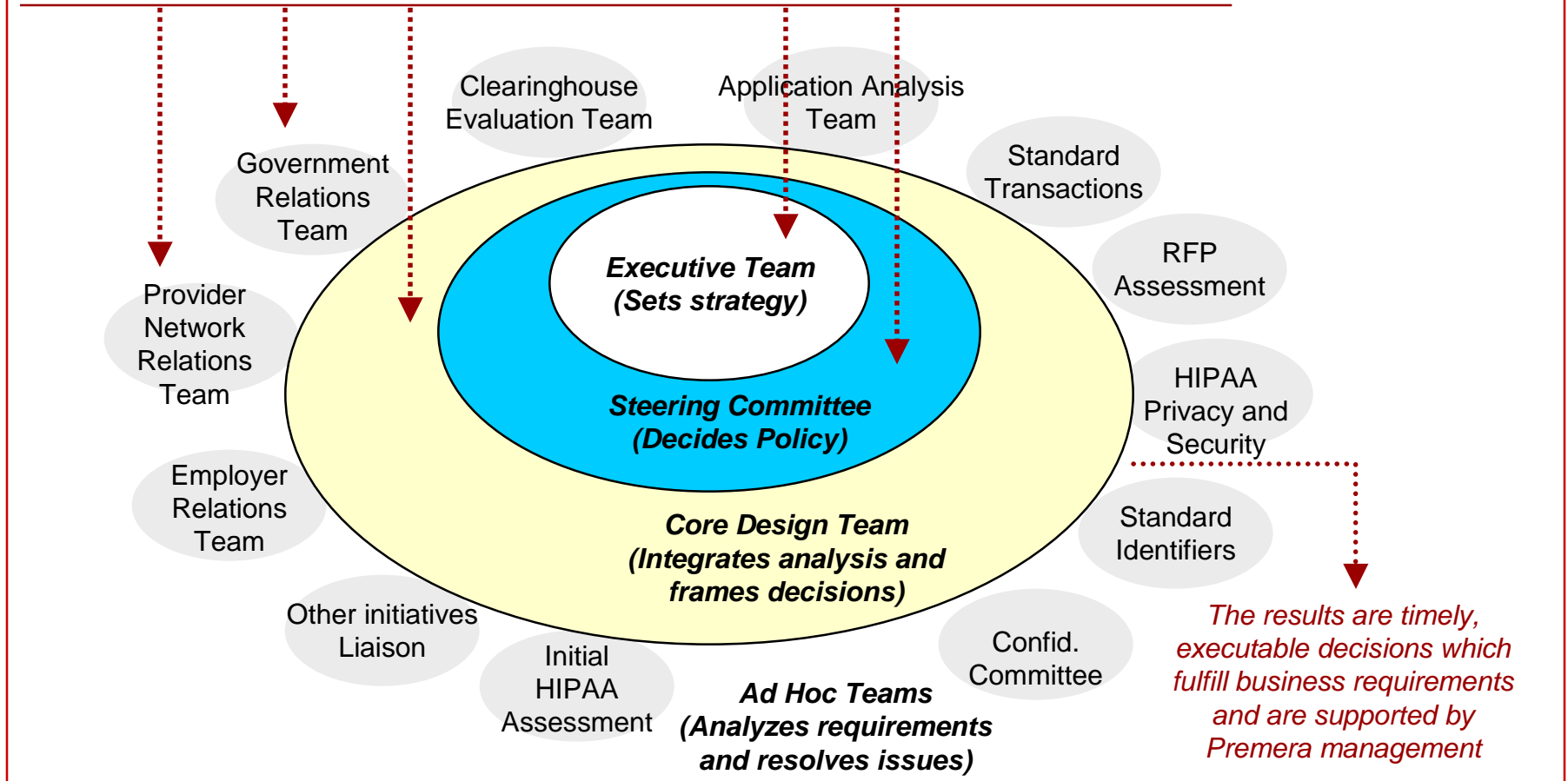


# Ad Hoc Analysis & Implementation Teams

*Multiple teams work concurrently to identify and resolve issues...*

*...then a small core team integrates their analysis and frames decisions...*

*... which are approved and deployed by the management and executive teams.*





# Final Thoughts

- ◆ **The HIPAA clock is ticking**
- ◆ **Start now and keep at it**
- ◆ **Integrate HIPAA into your strategic vision**
- ◆ **Comprehensive organizational plan**
- ◆ **If you base HIPAA compliance decisions on sound business practices and the best interest of individuals, you probably will meet or exceed HIPAA's requirements**

