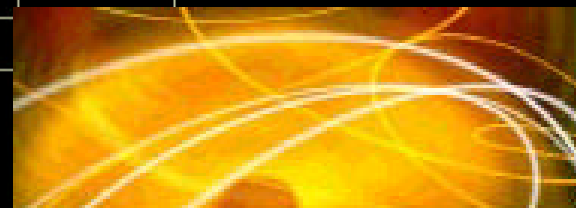


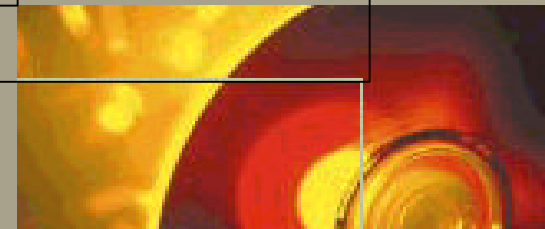
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Privacy & Security Compliance for the System Vendor

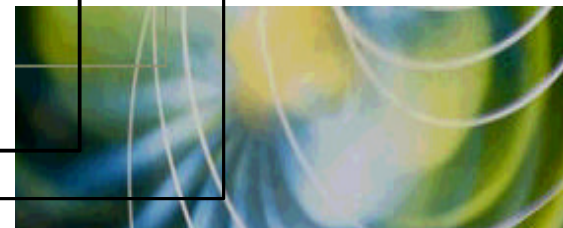
June 22, 2001

Roadmap to HIPAA Compliance



How to Get from Where
You Are to Where You
Ought to Be ...

Why Comply?



- ◆ Contractual agreements with clients
- ◆ Market place realities
- ◆ It's the right thing to do

HIPAA Presents Challenges for Vendor



- ◆ Had to start early to be ahead of implementation curve of clients
- ◆ Large investment in R&D to enhance systems and processes well in advance of client adoption means delayed ROI
- ◆ Awareness raising and education – “Why me?” syndrome

TriZetto's HIPAA Commitment



Total commitment to HIPAA compliance throughout entire organization

- ◆ ASP
- ◆ Clearinghouse/health plan activities
- ◆ Transactions services functions
- ◆ Business associate
- ◆ Software application vendor

What is our Approach?



- ◆ Multi-faceted organization wearing many different hats and so have had to approach compliance from many different perspectives
- ◆ HIPAA Compliance Office is the driving force in our efforts
 - ◆ Compliance office efforts supplemented by workgroups addressing specific HIPAA issues
 - ◆ HIPAA “champions” in workgroups coordinate compliance efforts within each segment of organization
- ◆ Compliance program began in 2000... continuing on in 2001...and 2002, 2003... and beyond

Step 1: Form a Compliance Team



Need a dedicated core team whose job *is* HIPAA

- ♦ HIPAA Compliance Office – two full time staff members dedicated to HIPAA compliance (third person coming soon)
 - ♦ Privacy Officer part of compliance office team
 - ♦ Separate Security office and Security officer and staff
- ♦ HIPAA “champions” from each business unit throughout organization

Step 2: Get Executive Buy-in and Support



Critical that HIPAA support begins at the top

- ♦ Executive Steering Committee (ESC) includes Senior VPs from every part of organization
- ♦ HIPAA Compliance Office reports to ESC
- ♦ Assures executive level support for assignment of time and resources to HIPAA projects
- ♦ Awareness and education activities start here

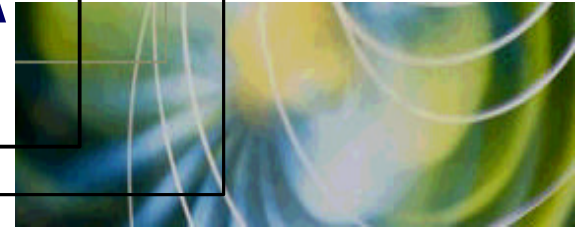
Step 3: Form HIPAA Workgroups



Form HIPAA workgroups from among HIPAA “champions” throughout organization

- ◆ Compliance Office leads and coordinates workgroups
- ◆ “All HIPAA” group tracks progress toward compliance with all rules
- ◆ EDI Taskforce addresses implementation issues related to electronic transactions and code sets; small workgroups focus on resolving specific EDI issues
- ◆ Privacy/Security Taskforce is responsible for developing and implementing Privacy/Security policies and procedures

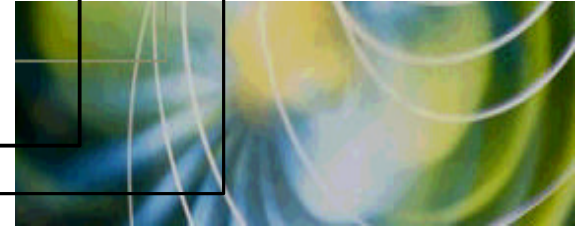
Step 4: Conduct HIPAA Assessments



Conduct HIPAA gap assessments and business impact analysis

- ◆ Use a systematic process can replicate
- ◆ Assess and reassess as organizations grows and changes
- ◆ Reach entire organization, even those departments that don't think HIPAA applies to them
- ◆ Run a "pre-assessment" to determine whether or not to assess farther

Step 5: Analyze Data



Analyze data and determine compliance gaps

- ◆ Develop strategies for compliance efforts
- ◆ Design overall solutions and approaches
- ◆ Create a shopping list of resources and materials
- ◆ Go back to the “top” for support for obtaining resources, materials and time

Step 6: Enlist Help of Human Resources



Design “Entrance to Exit” approach to HIPAA compliance

- ◆ Incorporate HIPAA into HR interactions - new employee orientation to exit interviews
- ◆ Include HIPAA awareness in employee training
- ◆ Add HIPAA policy and privacy agreement to employee handbook
- ◆ Coordinate termination procedures with IT
- ◆ Develop policies regarding sanctions for violations

Step 7: Awareness and Educational Programs



Develop HIPAA awareness and education programs appropriate for your organization

- ♦ Offer short sessions on frequent basis – Lunch and Learn classes good options
- ♦ Take advantage of electronic training – web casts, audio casts, internet-based
- ♦ Provide general HIPAA awareness training plus focused training for Privacy and Security issues
- ♦ Plan to provide on-going training due to staff turnover and movement to new job responsibilities

Step 8: Develop HIPAA Policies & Procedures



Compliance office begins by documenting corporate level policy and guiding principles

- ◆ Team leads and managers at unit level develop specific policies and procedures for their own departments
- ◆ Jump start process with policy and procedure workshops
- ◆ Focus first on areas handling protected health information (PHI) in day-to-day work
- ◆ Move next to support personnel (application and systems) and finally to entire company – everyone must get HIPAA!
- ◆ “Fix the problem not the blame” approach

Step 9: Have Some Fun with HIPAA!



Put some fun and humor into HIPAA

- ♦ Make use of employee newsletter - HIPAA articles, cartoons, humor
- ♦ Create HIPAA posters – play off company theme for HIPAA and make posters attention grabbers
- ♦ Give out HIPAA trinkets to reward participation in HIPAA training sessions and activities
- ♦ Use screen savers with HIPAA messages
- ♦ “HIPAA knowledge” contests - with prizes

Step 10: Document, Document, Document



Must document - both Privacy and Security rules require documentation of policies and procedures

- ♦ Seek legal review of policies and procedures and documentation
- ♦ Look for independent certification of efforts and results – EHNAC, JCAHO, NCQA, etc.
- ♦ Make documentation easily available to staff
- ♦ Post policies and procedures on intranet
- ♦ Put a HIPAA Handbook in each work area

Step 11: Assess and Assess Again



You may never be “done” – will need to re-assess organization as it grows and changes due to

- ◆ Acquisitions
- ◆ New product lines
- ◆ Changes in corporate structure and roles
- ◆ Changes in regulations

Step 12: Maintain Compliance



HIPAA is not a one-time fix; compliance requires on-going monitoring

- ◆ Keep up with legislative changes - new regulations and modifications to existing rules
- ◆ Conduct “fire drills” to test your emergency security procedures – fix the problem, not the blame
- ◆ Conduct on-going compliance audits of physical security, access controls, and privacy practices
- ◆ Make sure termination procedures are strictly followed

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Questions?