

**Lead Agency:** County Management

**Program Contact:** Travis Graves

**Program Offer Type:** Innovative/New Program

**Related Programs:**

**Program Characteristics:**

**Executive Summary**

The U.S. Department of Health and Human Services issued the Privacy Rule to implement the requirements of the Health Insurance Portability and Accountability Act (HIPAA). The Privacy Rule prescribes specific standards for organizations to manage, use and disclose individuals' protected health information.

This program offer funds a new Privacy Officer program in Central Human Resources to formalize authority and accountability for countywide HIPAA and Privacy Rule compliance, as well as other related State and Federal privacy rules and regulations. The Privacy Officer works directly with county departments and business areas, and collaborates with the county IT Security Manager, to ensure that county operations and services safeguard the privacy of employee and client protected health information.

**Program Description**

A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and coordinate client health care and employee health benefits. The Office of Civil Rights vigorously enforces the HIPAA Privacy and Security Rules and can impose civil monetary penalties for violations.

The Privacy Office will provide leadership and oversight for:

- Policies and procedures: planning, development, implementation and alignment across the county;
- Compliance: Information and data safeguards, internal performance audits, violation investigation and mitigation, complaint tracking and reporting;
- Workforce Training: new employee orientation, initial, refresher, follow-up; documentation and tracking;
- Communication and Regulatory Reporting: education and awareness, respond to general public inquiry, periodic and ad hoc reporting to regulatory agencies;
- Consultation and guidance: evaluate internal policies and procedures, provide regulatory analysis on new/updated laws/rules, advisory and best practice support;
- Coordinate with department and business areas privacy liaisons: oversee consistent and efficient implementation and monitoring, lead countywide liaison group to address compliance issues;
- Coordinate with county IT Security Manager: coordinate overlapping issues/concerns, collaborate on countywide Privacy Assessment;
- Records requirements: oversee documentation and records retention requirements, maintain system to track and account for authorized disclosures.

**Performance Measures**

| Measure Type | Primary Measure  | Previous Year Actual (FY10-11) | Current Year Purchased (FY11-12) | Current Year Estimate (FY11-12) | Next Year Offer (FY12-13) |
|--------------|--|--------------------------------|----------------------------------|---------------------------------|---------------------------|
| Output       | Completed countywide Privacy Assessment.                                       | 0                              | 0                                | 0                               | 1                         |
| Outcome      | Percentage of new employees trained on HIPAA standards within 60 days of hire. | 0.0%                           | 0.0%                             | 0.0%                            | 100.0%                    |

**Performance Measure - Description**

An updated countywide Privacy/Security Assessment identifies organizational strengths and areas of improvement for internal action planning and prioritization.

Effective HIPAA staff training is a key component to Privacy Rule compliance and the County's ability to mitigate Privacy Rule violations.

## Legal/Contractual Obligation

Health Insurance Portability and Accountability Act of 1996 U.S. Department of Health and Human Services Standards for Privacy of Individually Identifiable Health Information (Privacy Rule).

## Revenue/Expense Detail

|                         | Proposed General Fund | Proposed Other Funds | Proposed General Fund | Proposed Other Funds |
|-------------------------|-----------------------|----------------------|-----------------------|----------------------|
| Program Expenses        | 2012                  | 2012                 | 2013                  | 2013                 |
| Personnel               | \$0                   | \$0                  | \$0                   | \$150,231            |
| Contracts               | \$0                   | \$0                  | \$0                   | \$30,000             |
| Materials & Supplies    | \$0                   | \$0                  | \$0                   | \$17,842             |
| Internal Services       | \$0                   | \$0                  | \$0                   | \$0                  |
| Total GF/non-GF:        | <b>\$0</b>            | <b>\$0</b>           | <b>\$0</b>            | <b>\$198,073</b>     |
| Program Total:          | <b>\$0</b>            |                      | <b>\$198,073</b>      |                      |
| Program FTE             | 0.00                  | 0.00                 | 0.00                  | 1.00                 |
| <b>Program Revenues</b> |                       |                      |                       |                      |
| Total Revenue:          | <b>\$0</b>            | <b>\$0</b>           | <b>\$0</b>            | <b>\$0</b>           |

## Explanation of Revenues

Revenue for the Privacy Officer program offer funded by the Risk Fund.

## Significant Program Changes

Last year this program was:  
New offer for FY 2013.