

University Privacy Officer Description

Position Title: University Privacy Officer

Report: HIPAA Management Team

General Provisions: The Privacy Officer oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to the University's policies and procedures covering the privacy of, and access to, patient health information in compliance with federal and state laws and the University Health Care Components (HCC) privacy practices, including the University Health Information Portability and Accountability Act.

Responsibilities:

- ▀ Provides development guidance and assists in the identification, implementation, and maintenance of organization information privacy policies and procedures in coordination with University management and administration, the HIPAA Management Committee, and legal counsel.
- ▀ Serves on the HIPAA Management Team
- ▀ Performs initial and periodic privacy risk assessments and conducts related ongoing compliance monitoring activities in coordination with HCC compliance and operation assessment functions.
- ▀ Works with legal counsel and administration, key departments, and committees to maintain appropriate privacy and confidentiality consent, authorization forms, and information notices and materials reflecting current organization and legal practices and requirements.
- ▀ Oversees, directs, delivers, or ensures delivery of initial and privacy training and orientation to all employees, volunteers, medical and professional staff, contractors, alliances, business associates, and other appropriate third parties.
- ▀ Participates in the development, implementation, and ongoing compliance monitoring of all business associate agreements.
- ▀ Establishes with management and operations a mechanism to track access to protected health information, within the purview of the University and as required by law and to allow qualified individuals to review or receive a report on such activity.
- ▀ Works cooperatively with applicable University units in overseeing patient rights to inspect, amend, and restrict access to protected health information when appropriate.
- ▀ Administers a process for receiving, documenting, tracking, investigating, and taking action on all complaints concerning the University's privacy policies and procedures in coordination and collaboration with other similar functions, and when necessary, legal counsel.
- ▀ Reviews annually or as necessary compliance with privacy practices and consistent application of sanctions for failure to comply with privacy policies for all individuals in the HCC workforce, extended workforce, and for all business associates, in cooperation with Human Resources, the University Security Officer, administration, and legal counsel as applicable.
- ▀ Initiates, facilitates and promotes activities to foster information privacy awareness within the HCC and related entities.
- ▀ Serves as a member of, or liaison to, the organization's IRB Committee. Also serves as the information privacy liaison for users of clinical and administrative systems.
- ▀ Reviews with the University's Security Officer system-related information security plans throughout the University's network for alignment between security and privacy practices, and acts as a liaison to the information systems department.
- ▀ Works with all HCC personnel involved with any aspect of release of protected health information for coordination and cooperation under the University's policies and procedures and legal requirements.

- ▀ Maintains current knowledge of applicable federal and state privacy laws and accreditation standards, and monitors advancements in information privacy technologies to ensure organizational adaptation and compliance.
- ▀ Serves as information privacy consultant to the Unit Privacy Officer for all departments and appropriate entities.
- ▀ Cooperates with the Office of Civil Rights, other legal entities, and University officers in any compliance reviews or investigations.
- ▀ Works with University administration, legal counsel, and other related parties to represent the University's information privacy interests with external parties (state or local government bodies) who undertake to adopt or amend privacy legislation, regulation, or standard.

HIPAA Procedure 1.005, Form 3