



ESSENT HEALTHCARE, INC.

Section:	HIPAA Privacy	Effective Date:	4/14/04
Subject:	Privacy Officer	Revision Date:	3/26/08
Policy #:	HIPAA-015	Review Date:	9/14/09
Responsible Party:	Chief Privacy Officer	Revision #:	2

Scope:

This policy applies to all workforce members and all facilities of Essent Healthcare, Inc., (“Essent”).

Purpose:

The purpose of this policy is to assign overall responsibility for maintaining the privacy of protected health information (PHI) in accordance with the Health Insurance Portability and accountability Act (HIPAA).

Policy:

It is the policy of Essent to:

1. Protect all sensitive information from unauthorized use or disclosure.
2. Formally recognize a “Chief Privacy Officer” (CPO) who has ultimate responsibility for maintaining the privacy of PHI at all Essent facilities.
3. Formally recognize a privacy officer at each Essent facility. The “Facility Privacy Officer” (FPO) is responsible for assisting the CPO with maintaining patient the privacy of PHI.
4. Distribute policies and procedures governing the privacy of sensitive information to all workforce members so that they can successfully comply with those policies and procedures.
5. Periodically review and update the HIPAA privacy policies and procedures on an as needed basis.

Definitions:

Protected Health Information (PHI) – Any individually identifiable health information that is created, maintained, stored, or transmitted by the facility.

Electronic Protected Health Information (ePHI) – PHI that is in electronic format.



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Personnel files – Any information related to the hiring and/or employment of any individual who is or was employed by Essent Healthcare, Inc.

Payroll data – Any information related to the compensation of an individual during that individual's employment with Essent Healthcare, Inc.

Financial/accounting records – Any records related to the accounting practices or financial statements of Essent Healthcare, Inc.

Other information that is confidential – Any other information that is sensitive in nature or considered to be confidential.

Workforce: (As defined by the HIPAA Regulations) includes employees, volunteers (board members, community representatives), trainees, students, contractors, and any other persons under the direct control of a covered entity.

Procedures:

1. The Corporate Compliance Officer (CCO) shall be designated as the Chief Privacy Officer (CPO) and will have overall responsibility for preventing, detecting, containing, and/or correcting all HIPAA privacy violations within Essent.
2. The CPO shall be responsible for the following:
 - a. Appointing a Facility Privacy Officer "FPO" at each Essent facility.
 - b. Implementing the appropriate safeguards as outlined in the HIPAA privacy regulations.
 - c. Overseeing the privacy of all PHI created, maintained, or stored by Essent.
 - d. Performing periodic risk assessments to identify threats to and vulnerabilities to PHI at Essent.
 - e. Providing appropriate training and education of all personnel and/or contractors that have access to PHI.
 - f. Monitoring activity to ensure PHI is being used appropriately.
 - g. Preventing, detecting, and responding to privacy violations.
 - h. Periodically reporting on the overall privacy of the information systems to the CCO.
 - i. Periodically updating privacy policies and procedures to reflect changes in the



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organization and/or changes in the regulations.

3. Each FPO shall assist the CPO in fulfilling his/her duties by implementing policies and procedures to prevent, detect, contain, and correct privacy violations at his/her respective facility.
4. Each FPO shall be responsible for the following:
 - a. Implementing policies and procedures that are developed and approved by the CPO and/or the CCO.
 - b. Notifying the CPO and/or the CCO of all privacy complaints and violations.
 - c. Monitoring PHI to ensure appropriate use and prevent unauthorized access to PHI.
 - d. Implementing training at the direction of the CPO.
 - e. Performing periodic audits and/or risk assessments of system activity to ensure compliance with system and privacy policy and procedures.
 - f. Processing day-to-day operating requests.
 - g. Responding to privacy violations and reporting such violations to the CPO.
 - h. Enforcing all policies and procedures related to the privacy of sensitive information, ePHI, and/or the systems in which such information is housed.
5. The FPO shall be responsible for ensuring that all workforce members and system maintenance personnel are adequately supervised and/or have appropriate authorization when working with sensitive information or in areas that house sensitive information. Access to sensitive information or areas that house sensitive information shall be granted only under direct supervision of the department head, or with adequate proof of proper authorization which may include but is not limited to the following:
 - a. Pre-employment background checks
 - b. Approved access authorization request form
 - c. Approved/valid contracts with vendors
 - d. Persons authorized by contingency plan in the event of an emergency
 - e. See Essent Policy IS-001 Access Authorization
6. The FPO shall be responsible for distributing privacy policies and procedures to all employees who have access to or work in areas that house sensitive information. The FPO shall distribute all relevant privacy policies and procedures to the department heads. The department heads



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shall be responsible for reviewing the privacy policies and procedures with each of their respective employees.

7. On a periodic basis, the CPO shall review and update relevant policies and procedures to reflect changes in the organizational structure of Essent, and/or any regulatory changes.

References:

Final HIPAA Privacy Rule