

<b>POLICY AND PROCEDURE</b>	
<b>Policy # and TITLE:</b> Changes in Health Insurance Portability and Accountability Act (HIPAA) Law	
<b>Primary Policy owner:</b> Compliance	<b>POLICY #:</b> HPA11
<b>Impacted/Secondary policy owner:</b> Select the department(s) that are responsible for compliance with all, or a portion of the policy or procedure as outlined	
1) <input checked="" type="checkbox"/> All Departments 2) <input type="checkbox"/> Behavioral Health (BH) 3) <input type="checkbox"/> Benefits Administration (BA) 4) <input type="checkbox"/> Care Management (CM) 5) <input type="checkbox"/> Claims (CLMS) 6) <input type="checkbox"/> Community Marketplace & Member Engagement (MAR) 7) <input type="checkbox"/> Compliance (CMP/HPA) 8) <input type="checkbox"/> Configuration (CFG) 9) <input type="checkbox"/> Provider Contracting (CONT) 10) <input type="checkbox"/> Cultural & Linguistics (CL) 11) <input type="checkbox"/> Customer Service (CS)	12) <input type="checkbox"/> Facilities (FAC) 13) <input type="checkbox"/> Finance (FIN) 14) <input type="checkbox"/> Health Equity (HEQ) 15) <input type="checkbox"/> Human Resources (HR) 16) <input type="checkbox"/> Information Technology / Core Systems (IT) 17) <input type="checkbox"/> Pharmacy (PH) 18) <input type="checkbox"/> Provider Networks (PRO) 19) <input type="checkbox"/> QI Health Equity (GRV/HE/HEQ/PHM/QM) 20) <input type="checkbox"/> Utilization Management (UM)
<b>PRODUCT TYPE:</b> <input checked="" type="checkbox"/> Medi-Cal	<b>Supersedes Policy Number:</b> N/A

## I. PURPOSE

Health Plan of San Joaquin and Mountain Valley Health Plan (“Health Plan”) promptly documents and implements any changes to federal or state law that impacts any policies and procedures (P&P), including the Notice of Privacy Practices (NPP), intended to comply with the Health Insurance Portability and Accountability Act (HIPAA) and corresponding regulations.

## II. POLICY

- A. The Health Plan's designated Privacy Officer, in conjunction with the designated Security Officer, or his/her designee(s), are responsible for monitoring modifications to the HIPAA Privacy and Security Rules, and any new or amended state contracts, regulations or legislation impacting areas identified by the HIPAA Privacy or Security Rules.
- B. The Privacy and Security Officers, or his/her designee(s), modify this Policy and the NPP, as needed. HIPAA policies are submitted to the Department of Health Care Services (DHCS) by the Compliance Department for review and approval.
- C. The Compliance Department trains all affected Health Plan's Workforce members.
- D. The Chief Compliance Officer reviews this policy at least annually and revises as necessary.

## III. PROCEDURE

- A. The Privacy & Security Officers, or his/her designee(s), compare The State and Federal HIPAA Privacy & Security Rules at least annually. The more stringent rules prevail and are applied in this Policy.
- B. The Health Plan complies with the Privacy Rule, including exceptions to the general rule of federal preemption for contrary State laws that:<sup>1</sup>
  - 1. As it relates to the privacy of individually identifiable health information and provides greater privacy protections or privacy rights with respect to such information,
  - 2. Provide for the reporting of disease or injury, child abuse, birth, or death, or for public health surveillance, investigation, or intervention, or
  - 3. Require certain health plan reporting, such as for management or financial audits.

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<sup>1</sup> [Summary of the HIPAA Privacy Rule | HHS.gov](#)

C. The Health Plan applies exception determinations, when appropriate or applicable. Preemption of a contrary state law will not occur if the Department of Health and Human Services (DHHS) determines, in response to a request from a state, other entity, or person, that the state law:

1. Is necessary to prevent fraud and abuse related to the provision of or payment for health care,
2. Is necessary to ensure appropriate state regulation of insurance and health plans to the extent expressly authorized by statute or regulation,
3. Is necessary for state reporting on health care delivery or costs,
4. Is necessary for purposes of serving a compelling public health, safety, or welfare need, and, if a Privacy Rule provision is at issue, if the Secretary determines that the intrusion into privacy is warranted when balanced against the need to be served or
5. Has as its principal purpose the regulation of the manufacture, registration, distribution, dispensing, or other control of any controlled substances, or that is deemed a controlled substance by state law.<sup>2</sup>

D. The Privacy Officer, or his/her designee, updates the NPP in accordance with HPA16 Notice of Privacy Practices, whenever a change is made affecting one or more of the following citations in the NPP:

1. Uses or disclosures,
2. Members' rights,
3. Health Plan's legal duties, or
4. Health Plan's privacy practices

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<sup>2</sup> [21 USC 802: Definitions \(house.gov\)](#)

**IV. ATTACHMENT(S)**

- A. DHCS Medi – Cal Managed Care Plans Definitions (Exhibit A, Attachment I, 1.0 Definitions)
- B. [Glossary of Terms Link](#)
- C. Medi-Cal Managed Care Contract Acronyms List (Exhibit A, Attachment I, 2.0 Acronyms)

**V. REFERENCES**

- A. 21 U.S.C. § 802
- B. 45 CFR Parts §160, §162, and §164 HIPAA Regulations
- C. Health Information Technology for Economic and Clinical Health Act (HITECH Act)
- D. HPA16 Notice of Privacy Practices  
HHS OCR Privacy Rule Summary

**VI. REVISION HISTORY**

\*Version 001 as of 01/01/2023

Version*	Revision Summary	Date
001	Conducted annual review of policy, revised to meet formatting standards, and placed policy in current template.	11/10/2023
002		
003		
004		
<b>Initial Effective Date:</b> 4/14/2003		

**VII. Committee Review and Approval**

Committee Name	Version	Date
Compliance Committee	001	2/15/2024
<ul style="list-style-type: none"> <li>• Privacy &amp; Security Oversight Committee (PSOC)</li> </ul>	001	12/11/2023
<ul style="list-style-type: none"> <li>• Risk Management</li> </ul>		
<ul style="list-style-type: none"> <li>• Delegation Oversight</li> </ul>		

<ul style="list-style-type: none"> <li>• Policy Review</li> </ul>	001	12/20/2023
Quality and Utilization Management		
<ul style="list-style-type: none"> <li>• Quality Operations Committee</li> </ul>		
<ul style="list-style-type: none"> <li>• Grievance</li> </ul>		

### VIII. REGULATORY AGENCY APPROVALS

Department	Reviewer	Version	Date
Department of Healthcare services (DHCS)	N/A	N/A	N/A
Department of Managed Care (DMHC)	N/A	N/A	N/A

### IX. APPROVAL SIGNATURE\*

Signature	Name Title	Date
	PRC Chairperson	
	Policy Owner	
	Department Executive	
	Chief Executive Officer	

\*Signatures are on file, will not be on the published copy