

# HOWARD UNIVERSITY POLICY

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**Policy Number:** 900-003: Clinical  
**Policy Title:** HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT of 1996 (HIPAA) HYBRID ENTITY DESIGNATION POLICY  
**Responsible Officer:** Provost and Chief Academic Officer  
**Responsible Office:** Office of the Provost and Chief Academic Officer  
**Effective Date:** April 11, 2018

## I. POLICY STATEMENT

Howard University (the University) designates itself as a single legal entity, specifically a hybrid entity, in accordance with the privacy and security regulations (the “Privacy and Security Standards”) promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”).

## II. RATIONALE

This policy is required to identify Howard University as a hybrid entity and designate its covered health care components in accordance with Federal law. The University conducts both covered and non-covered functions and elects to be a hybrid entity. The HIPAA compliance obligations apply only to the designated health care components. The hybrid entity retains oversight, compliance and enforcement obligations.

## III. ENTITIES AFFECTED BY THIS POLICY

This policy applies to all entities within the University enterprise including, but not limited to, Sponsored Research, Office of Regulatory Research Compliance, Office of Research Development, and Howard University Hospital (HUH), the Faculty Practice Plans and all business associates.

## IV. DEFINITIONS

- A. **Business Associate** - A person or entity that performs certain functions or activities that involve the use or disclosure of PHI on behalf of, or provides services to, the University.
- B. **Covered Entity** - A health plan, health care clearinghouse, or health care provider that transmits any health information in electronic form in connection with a transaction covered by HIPAA.
- C. **Covered Functions** – Those functions of a covered entity which makes the entity a health plan, health care provider, or health care clearinghouse.
- D. **Health Care Component** - A component or combination of components of a hybrid entity designated by the hybrid entity as covered by HIPAA.

- E. **Health Care Operations** - Includes administrative, financial, legal, and quality improvement activities of a covered entity that are necessary to run its business and to support the core functions of treatment and payment. These activities include, but are not limited to: business management and general administrative activities, quality assessment and improvement, training health care and non-health care professionals, accreditation, certification, licensing, credentialing, medical review, legal and auditing services, customer service, and resolution of internal grievances.
- F. **Hybrid Entity** – A single legal entity that is a covered entity whose business activities include both covered and non-covered functions. The hybrid entity designates its health care components.
- G. **Payment** - The activities undertaken by a health care provider to obtain reimbursement for the provision of health care and the activities related to the individual to whom health care is provided, including but not limited to: (i) determinations of eligibility for coverage and adjudication or subrogation of health benefit claims; (ii) adjusting risk amounts due based on enrollee health status and demographic characteristics; (iii) billing, claims management, collection activities, obtaining payment under a contract for reinsurance and related health care data processing; (iv) review of health care services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges; (v) utilization review activities, including precertification and preauthorization of services, concurrent and retrospective review of services; and (vi) disclosure to consumer reporting agencies of any of the following PHI relating to collection of premiums or reimbursement: (a) name and address, (b) date of birth, (c) social security number, (d) payment history, (e) account number, and (f) name and address of the health care provider or health plan.
- H. **Protected Health Information (PHI)** – Information transmitted or maintained in any form that is created or received by a health care provider, health plan, health care clearinghouse, or employer and: (1) relates to the past, present, or future physical or mental health or condition of a patient, the provision of health care to a patient, or the past, present, or future payment for the provision of health care to a patient; and (2) identifies the patient or with respect to which there is a reasonable basis to believe the information can be used to identify the patient. It does not include certain education records and health information of students covered by the Family Educational Rights and Privacy Act. It does not include employment records held by a covered entity in its capacity as employer. It does not include individually identifiable health information regarding a person who has been deceased for more than 50 years.
- I. **Treatment** – Includes the provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider to another.
- J. **Workforce Members** – Faculty, staff, employees, volunteers, contractors, students, trainees, and other persons whose conduct, in the performance of work for Howard University, is under the direct control of Howard University, whether or not they are paid by Howard University.

#### **IV. POLICY AND PROCEDURE**

- A. The University conducts both covered and non-covered functions and elects to be a hybrid entity under HIPAA. As a hybrid entity, the applicable HIPAA compliance obligations only apply to the University's designated health care components.
- B. The designated health care components include:
1. Any component that meets the definition of covered entity if it were a separate legal entity;
  2. Components only to the extent that they perform covered functions; and
  3. Components that provide business associate services to components that perform covered functions.
- C. Health Care Components Responsibility. Each designated health care component shall ensure its compliance with the applicable HIPAA requirements. The designated health care components which provide business associate services shall follow the compliance rules of the designated health care component for which it is providing business associate services.

#### **V. DESIGNATED HEALTHCARE COMPONENTS**

Howard University further designates the following components of Howard University as its health care component in accordance with the HIPAA Regulation.

- A. The following health care components:

- Howard University Hospital and Outpatient Clinics
- College of Medicine Faculty Practice Plan and Centers
- College of Dentistry Faculty Practice Plan and Clinics
- School of Communications, Speech and Hearing Clinic
- Howard University Self-funded Employee Health Plan

- B. The following University departments/divisions only to the extent that they create or receive protected health information in order to perform business associate services for or on behalf of the University's health care components:

- Enterprise Technology Services
- Office of Human Resources, Benefits Administration
- Office of Internal Audit
- Office of the Chief Financial Officer
- Office of the Chief Compliance Officer
- Office of the General Counsel
- Protective Services

#### **VI. SANCTIONS**

Failure to follow this policy or any other approved University policy shall be subject to disciplinary action, up to and including termination of employment.

## VII. HYPERLINK

[www.howard.edu/policy](http://www.howard.edu/policy)

### Related Policies and Regulations:

- Health Insurance Portability and Accountability Act of 1996 as implemented by 45 Code of Federal Regulations [Parts 160, 162](#) and [164](#)
- [900-001 Health Insurance Portability and Accountability Act of 1996 Breach Notification Policy](#)
- [900-002 Health Insurance Portability and Accountability Act of 1996 Privacy And Security Violations/Sanctions Policy](#)