POLICY STATEMENT (R*)
Florida International University (“FIU”) is committed to protecting the privacy of Protected Health Information in compliance with all applicable federal and state laws, regulations and rules. For purposes of compliance with the Health Insurance Portability and Accountability Act (HIPAA), FIU has determined that it is a “Hybrid Covered Entity” and has designated the units that constitute the Covered Health Care Component.

REASON FOR POLICY (O*)
The purpose of this policy is to define the Health Care Component of the Hybrid Covered Entity at FIU and describe the process for designation and review of a new or existing Health Care Component.

RELATED INFORMATION (O*)
HIPAA Privacy Rule, 45 C.F.R. § 164.105(a)(2)(iii)(D)
Health Insurance Portability and Accountability Act

DEFINITIONS (R*)
“Business Associate” means any person or entity who is not a member of FIU’s workforce that receives, maintains, creates, or transmits Protected Health Information for or on behalf of FIU. Examples of functions involved include: claims processing or administration, data analysis, processing or administration, utilization review, quality assurance, patient safety activities, billing, benefit management, practice management, legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial services to or for such covered entity.

“Hybrid covered entity” means a single legal entity that performs both covered and non-covered functions. The entity has a defined health care component that engages in electronic transactions.

“Health Care Component” means a component or combination of components of a hybrid entity that has been specifically designated by the covered entity because it either performs covered functions; or activities that would make such component a business associate of a component that performs covered functions if the two components were separate legal entities.

“Protected Health Information” (PHI) means any individually identifiable health information collected or created in the course of the provision of health care services by a covered entity, in any form (written, verbal or electronic). PHI relates to the past, present, or future physical or mental health or condition of an individual or the past, present, or future payment for the provision of health care to an individual. Protected Health Information however specifically excludes:
2. Records described at 20 U.S.C. § 1232g(a)(4)(B)(i); and
3. Employment records held by a covered entity in its role as an employer.

“Workforce” means employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity or business associate, is under the direct control of such covered entity or business associate, whether or not they are paid by the covered entity or business associate.

PROCEDURES (O*)
DESIGNATION OF FIU’S HEALTH CARE COMPONENTS:
A. FIU engages in certain functions that are covered under HIPAA. FIU has designated the following units that will comprise its Covered Health Care Component:
   - Herbert Wertheim College of Medicine (“HWCOM”) and its component units, excluding research
   - Student Health Pharmacy Services (“SHS”) in its provision of services to non-students
   - College of Arts and Science Center for Children and Families, excluding research.

B. There are certain FIU units that perform specific business associate type activities and are only included in the FIU Health Care Component to the extent these units are engaged in HIPAA-related activates or provide business associate-type support to the units listed in A. The units performing specific business associate type activities are: FIU Office of General Counsel, FIU Office of Internal Audits, FIU Office of Compliance & Integrity, FIU Division of Information Technology, FIU Office of Human Resources, FIU Foundation, and any other business unit performing business associate type activities for the FIU Health Care Components listed in A. These units are expected to safeguard and follow confidentiality protections of the covered areas to the extent these units have or have access to PHI.

C. Units that comprise the FIU Health Care Component must adhere to all of FIU’s HIPAA related policies and procedures. Activities or guidance related to HIPAA compliance matters must be reported to the Privacy Official for Health Affairs.

D. This designation of the health care component is subject to change, as appropriate. Such change is made by the Chief Compliance and Privacy Officer in consultation with the Office of General Counsel and the Director of Compliance & Privacy for Health Affairs.

E. Any unit with interest to become part of the Health Care Component must submit its request to FIU’s Chief Compliance and Privacy Officer prior to engaging in any activity that is governed by the HIPAA Law.

F. Once approved by the Chief Compliance Officer, the unit shall be included in Section A of this procedure and shall be designated at an FIU Health Care Component.

G. Other units at FIU that are not part of the Health Care Component may nevertheless, voluntarily choose to adhere to or participate in some or all of HIPAA requirements, policies or procedures. Such voluntary participation shall not affect a unit’s status as a non-Covered Health Care Component.

HISTORY (R*)
Initial Effective Date: September 1, 2009; Revision Date(s): June 8, 2015, December 31, 2017, March 3, 2020

RESPONSIBLE UNIVERSITY DIVISION/DEPARTMENT (R*)
Office of Compliance & Integrity

RESPONSIBLE ADMINISTRATIVE OVERSIGHT (R*)
Compliance & Privacy Official for Health Affairs
University Compliance Office PC 429
11200 S.W. 8th Street
Miami, Florida 33199
Telephone Number: (305) 348-2216

The University Policies and Procedures Library is updated regularly. In order to ensure a printed copy of this document is current, please access it online at http://policies.fiu.edu/.

For any questions or comments, the “Document Details” view for this policy online provides complete contact information.

FORMS/ONLINE PROCESSES (O*)
Links to the above referenced Form(s) available in the “Document Details” Section of the online version of this policy document.

*R = Required   *O = Optional