BOARD MEMBERS PRESENT:

James R. Adams, Chair
Linda Rivas, Vice Chair
Rebecca Q. Cedillo, Secretary
Roberto L. Jimenez, M.D., Immediate Past Chairman
Robert Engberg
Alex Briseño
Ira Smith

Call to Order and Record of Attendance:  JAMES R. ADAMS, CHAIR, BOARD OF MANAGERS

Mr. Adams called the meeting to order at 4:40 p.m.

New Business

HIPAA, HITECH, HB300 AND UHS - WHAT COVERED ENTITIES CAN BE DOING WHILE WAITING ON FINALIZATION OF HITECH RULES—SHERRY JOHNSON/BILL PHILLIPS/ELIZABETH N. ROGERS

Summary: Mr. Adams yielded the floor to Mr. Hernandez, Ms. Johnson and Mr. Phillips for introduction of Ms. Elizabeth Rogers who provided a brief
overview of the Health Insurance and Portability Act of 1996 (HIPAA),
the Health Information Technology for Economic and Clinical Health
(HITECH) Act, and Texas House Bill 300. (A complete copy of the
handouts and graphics presentation are on file with the meeting minutes).
Ms. Rogers reviewed the following points with meeting participants:

**HIPAA:**
- Duties of hospital Governing Board
- Enforcement Actions
- Covered Entities
- Protected Health Information Clarified
- De-Identification
- The Five Individual Rights

**HITECH:**
- Definition and Impact
- Expanded HIPAA Application to Business Associates
- Privacy and Security Breach Notification Requirements
- Individual Access to Information
- Restrictions on Marketing and Fundraising Communications
- Penalties and Enforcement
- Increased Penalties under HIPAA

**HOUSE BILL 300 – TEXAS PRIVACY LAW CHANGES**
- Effective September 1, 2012
- No changes to state definition of “covered entity”
- Prohibits the sale of Patient Health Information (PHI), with some
  exceptions that differ from HIPAA/HITECH
- Notice and authorization for electronic disclosure of PHI
- Increases civil penalties for violations, tiered by intent
- New role-based training rules
- Requires patient access to electronic health records within 15 days of a
  request
- Allows state to request federal compliance audits of covered entities by
  feds and to act on findings
- Attorney General to maintain consumer website and provide annual
  report on complaints
- Certification for compliance with privacy and security standards for
  electronic sharing of PHI; and
- Breach notification requirements

The U.S. Department of Health and Human Services Office for Civil
Rights (OCR) enforces the HIPAA Privacy and Security Rules and the
confidentiality provisions which protect identifiable information being
used to analyze patient safety events and improve patient safety. The
OCR audit program serves as a new part of OCR’s health information
privacy and security compliance program. OCR will use the audit
program to assess HIPAA compliance efforts by a range of covered entities. Ms. Waller provided the meeting participants with an OCR Audit Preparation Checklist for their perusal.

RECOMMENDATION: This information was provided for educational purposes only.
ACTION: No action was required by the Board of Managers.
EVALUATION: Board members engaged the presenters in general dialogue and asked questions regarding the various points in the graphics presentation.
FOLLOW-UP: None.

ADJOURNMENT:

There being no further business, Mr. Adams adjourned the public meeting at 5:32 p.m.

James R. Adams  Rebecca Q. Cedillo
Chair, Board of Managers  Secretary, Board of Managers

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Sherry Johnson, Recording Secretary