

**County of Riverside, California  
Board of Supervisors Policy**

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<b>HEALTH INFORMATION PRIVACY AND SECURITY POLICY</b>	<b>B-23</b>	<b>1 of 5</b>

**Policy:**

The County is a single legal entity comprised of multiple departments, some of which create, access, use, store, process or transmit identifiable health information about patients that is protected by state and federal laws. The County has designated certain departments and functions as a “hybrid entity” under the Health Insurance Portability and Accountability Act (HIPAA) regulations and established this policy to ensure that each component of the hybrid entity complies with the applicable Privacy and Information Security requirements of HIPAA and California privacy medical laws.

The County’s hybrid departments shall safeguard the privacy, security and integrity of both electronic and non-electronic protected health information they create, access, use, store, process and/or transmit. Each department will:

- Keep individually identifiable health information private, secure and safe from accidental or malicious attempts to disclose or destroy it;
- Provide notice of the County’s legal duties and privacy practices with respect to health information;
- Follow the terms of the County notice of Privacy Practices currently in effect; and
- With respect to any breach of unsecured protected health information, notify the affected individuals, the Secretary of the United States Department of Health and Human Services, the California Department of Public Health and prominent media outlets, as applicable.

**A. HIPAA Compliance Council**

County Departments designated as part of the hybrid shall assign a representative to the HIPAA Compliance Council (HCC) and require that representative to regularly attend and participate in HCC meetings. County Departments subject to California privacy laws shall be invited to participate in HCC and attend regularly scheduled meetings. The HCC is responsible for:

1. Formal coordination of health information privacy and security activities among hybrid Departments;
2. Reviewing and recommending to the Board of Supervisors County level policies and procedures regarding the privacy, security and integrity of protected health information;
3. Implementation and oversight of compliance with County policies and procedures related to protected health information; and
4. Reviewing and approving training methods and the content of Department specific Privacy and Health Information Security training.

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**B. Hybrid and Key Role Designations**

The Board of Supervisors may from time to time consider the particular Departments and functions included as health care components within the “hybrid” entity and change that designation as changes in the structure or activities of Departments dictate. See Addendum. In addition, HCC will, at least annually, consider the hybrid entity’s current designations and functions and recommend to the Board of Supervisors any changes it deems necessary.

The Assistant County Executive Officer of Health Systems shall designate a County HIPAA Privacy Official and a County Health Information Security Official.

Each Department included as a health care component in the hybrid entity shall appoint a Privacy Officer for that Department to fulfill for that Department the functions of a County-wide description of those responsibilities. The designated Department Privacy Officer shall serve as the Department’s HCC representative.

**C. Departmental Responsibility**

Each hybrid entity Department shall present periodic compliance reports to HCC. Each Department in the hybrid entity shall ensure compliance with the applicable HIPAA Privacy and Security requirements and state medical privacy laws within its scope of operations.

**D. Complaints and Inquiries**

Any individual may direct inquiries and complaints regarding health privacy or security issues to the Privacy Officer within each hybrid entity Department or to the County HIPAA Privacy Official.

Department Privacy Officers will coordinate responses to such inquiries and complaints with the County HIPAA Privacy Official.

Under no circumstances will the County allow or enable retaliation or reprisal against Individuals who file such complaints.

**E. Workforce Training**

Required trainings shall occur prior to accessing PHI and in no case later than 60 days after hire and annually thereafter:

- Information Security training shall be required for all hybrid entity Department workforce members.
- Privacy training shall be required for hybrid entity Department workforce members when necessary and appropriate for the workforce member to carry out functions regulated by HIPAA.

Evidence of training records must be retained for a minimum of six (6) years.

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**F. Notice of Privacy Practices**

In accordance with federal law, the County will provide a copy of the notice in Attachment 1 outlining this policy to each individual receiving health care and related services from the County, and to participants in certain health plans administered or operated by the County. Where applicable, the County will make a good faith effort to obtain completed acknowledgements of receipt of this notice from each client or patient, and if not obtained, document its good faith efforts to obtain such acknowledgement and the reason why the acknowledgement was not obtained. This notice and acknowledgement may be amended as needed with the approval of the County Counsel and the Executive Officer, and amended copies provided thereafter upon request.

**G. Uses and Disclosures - General**

Generally, except as otherwise specified below, the County's hybrid departments may use and disclose health information, as allowed under state and federal law:

1. For treatment;
2. For payment;
3. For health care operations;
4. For health plan administration, except for genetic information which by law the County health plan may not use or disclose for underwriting purposes; and
5. For fundraising for its own benefit, provided that legal requirements are satisfied.

**H. Uses and Disclosures Generally Requiring Authorization**

The County may use and disclose the following health information with a valid authorization, unless an exception exists under state and/or federal law:

1. From mental health records and psychotherapy notes;
2. From or pertaining to some substance abuse treatment programs; and
3. For marketing.

**I. Uses and Disclosures Requiring an Opportunity to Agree or Object**

In certain cases, the County may use and disclose health information as follows only if it informs individuals in advance and provides them the opportunity to agree or object, as allowed under state and federal law:

1. For facility directories;
2. To individuals involved in the individual's health care or payment for health care; and
3. To assist in disaster relief efforts.

**J. Uses and Disclosures NOT Requiring Authorization or an Opportunity to Agree or Object**

In specific cases, the County may to use and disclose health information without the individual's authorization and without providing an opportunity to agree or object:

1. When required by law;
2. For public health activities;

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3. To report victims of abuse, neglect or domestic violence;
4. For health oversight activities;
5. To the minimum extent necessary to comply with judicial and administrative proceedings when compelled by an order of a court or administrative tribunal, or in response to a subpoena, discovery request or other lawful process as allowed by law;
6. For law enforcement purposes;
7. To coroners, medical examiners and funeral directors;
8. Regarding a deceased person for organ, eye or tissue donation and transplantation;
9. For research purposes in compliance with required conditions approved by an institutional review board;
10. To avert serious threats to health and safety;
11. On armed forces and foreign military personnel for activities deemed necessary by appropriate military command authorities to assure proper execution of a military mission;
12. To determine eligibility for or entitlement to veterans benefits;
13. To authorized federal officials for the conduct of lawful intelligence, counter-intelligence, and other national security activities;
14. To authorized federal officials to provide protection to the President, other authorized persons, or foreign heads of state, or to investigate threats against the President or other authorized persons;
15. To correctional institutions and other law enforcement custodial situations;
16. To determine eligibility for or enrollment in a government health plan program, or to coordinate and improve administration of benefits for such government plans; and
17. To the minimum extent necessary to comply with workers' compensation laws or similar programs providing benefits for work-related injuries or illnesses.

The County will not disclose individuals' health information to outside parties for any other reasons not covered by this policy without prior written authorization.

**K. Rights and Responsibilities**

With regard to health information, the County recognizes and commits to safeguard each individual's:

1. Right to request restrictions on certain uses and disclosures, including respecting an individual's right to restrict disclosure to a health plan health information pertaining to a health care item or service paid in full by the individual, or a person other than the health plan on behalf of the individual;
2. Right to confidential communications;
3. Right to limit communications by making prior payment arrangements;
4. Right to request to inspect and copy records;
5. Right to request amendments of their health records;
6. Right to an accounting of certain disclosures;

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7. Right to obtain a paper copy of the required notice of privacy practices upon request; and
8. Right to file complaints without fear of retaliation.

**L. Business Associates**

The County engages and partners with a variety of vendors who perform functions on behalf of the County. The County may share or disclose protected health care information to such parties for the purposes outlined above. In such instances, the County requires those entities to agree to abide by all applicable laws and regulations, this policy, and the terms of the County's business associate agreement substantially as shown in Attachment 2 of this policy. The terms of this business associate agreement may be amended from time to time with the approval of County Counsel and the Executive Officer. This policy authorizes the County Purchasing Agent to execute on behalf of the Board of Supervisors business associate agreements conforming to Attachment 2 of this policy as necessary to bring existing underlying agreements into compliance with this policy.

**M. Effective Date**

This policy took initial effect on April 14, 2003.

**References:**

Minute Order 3.26 of 03/18/03  
Minute Order 3.4 of 05/03/05  
Minute Order 3.4 of 04/10/07  
Minute Order 3.4 of 12/14/10  
Minute Order 3.98 of 09/10/13  
Minute Order 3-59 of 06/21/16  
Minute Order 3-8 of 05/21/19  
Minute Order 3.4 of 10/03/23

**Attachments:**

Attachment 1.A – Notice of Privacy Practices – English  
Attachment 1.B – Notice of Privacy Practices – Spanish  
Attachment 2 – Business Associate Agreement Template  
Attachment 3 – Hybrid Entity Composition

**Attachment 1.A – Notice of Privacy Practices – English  
TO BOARD POLICY B-23**



# COUNTY OF RIVERSIDE NOTICE OF PRIVACY PRACTICES

**This Notice describes how medical information about you may be used and shared and how you can obtain access to this information. Please review it carefully.**

## Your Rights

**When it comes to your health information, you have the right to:**

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### **Get an electronic or paper copy of your medical record**

- You can ask to see or get copies of your medical record. Ask us how to do this.
- We may charge a reasonable, cost-based fee.

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### **Ask us to correct your medical record**

- You can ask us to change health information about you if it is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but if we say no, we’ll tell you why in writing within 60 days.
- You may also add a written add-on to your medical record about the statement in your record that you believe is incorrect or incomplete. Ask us how to do this.

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### **Request confidential communications**

- You have the right to receive confidential communications of protected health information as provided in 45 CFR §164.522(b), as applicable and can ask us to communicate with you in a certain way (for example: home, cell, or office phone or to send mail to a certain address).

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### **Ask us to limit what we share**

- If you have paid for an item or service in full, you can ask us not to share that information about the **item or service with a health plan**. We will say “yes” unless a law requires us to share that information.

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### **Get a list of those with whom we’ve shared information**

- You can ask us for a list (called an “accounting”) of times we’ve shared your health information during the last six years before the date you ask, who we shared it with, and why.
- We will provide one (1) accounting a year for free but will charge a reasonable, cost-based fee if you ask for another accounting within 12 months.

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### **File a complaint if you feel your rights are violated**

- You can file a complaint by contacting us at (951) 486-4659 or [r.compliance@ruhealth.org](mailto:r.compliance@ruhealth.org).
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by using the information on page 4.
- We will not retaliate against you for filing a complaint.

## How we may use or disclose information about you

We use or share information to:

<p><b>Treat you and contact you</b></p>	<ul style="list-style-type: none"> <li>• We can use health information about you and share it with other professionals who are treating you.</li> <li>• Health information about you may also be used by non-County of Riverside healthcare providers who share our common electronic health record, but only to treat or contact you.</li> <li>• We may share your health information with public or private social service agencies to help coordinate services and improve your health.</li> <li>• We may use and share your health information to contact you when necessary.</li> </ul>	<p><b>Examples:</b></p> <p>RUHS providers, such as nurses, doctors, therapists, etc., may view your health information.</p> <p>Because RUHS shares a common medical record platform with Loma Linda University Health, RUHS providers can also see information collected by your Loma Linda providers and appointments you have scheduled there.</p> <p>We may contact you about future appointments and with test results.</p>
<p><b>Run our organization</b></p>	<ul style="list-style-type: none"> <li>• We may use information to assess the care and outcomes in your case, to improve our services, and in administrative processes.</li> </ul>	<p><b>Example:</b> We use health information to measure how well our staff is caring for patients.</p>
<p><b>Bill for your services</b></p>	<ul style="list-style-type: none"> <li>• We may use and share information to bill you or your insurance company.</li> </ul>	<p><b>Example:</b> We send bills and other information to your health insurance plan so it will pay for services you received.</p>
<p><b>Health care operations and plan administration</b></p>	<ul style="list-style-type: none"> <li>• As administrator of certain health plans, such as Medicare, Medi-Cal, and Exclusive Care, the County may disclose limited information to plan sponsors.</li> </ul>	<p><b>Example:</b> For purposes such as plan eligibility and enrollment, benefits administration, and payment of health care expenses.</p>
<p><b>Underwriting purposes</b></p>	<ul style="list-style-type: none"> <li>• If you are a member of Exclusive Care, we may use or share certain information for underwriting purposes.</li> </ul>	<p><b>Example:</b> We use some information when we are trying to set the cost of premiums.</p>



<b>Help with public health and safety issues</b>	<p>We can share health information about you for certain situations such as:</p> <ul style="list-style-type: none"> <li>• Reporting births and deaths</li> <li>• Preventing or controlling disease, injury, or disability</li> <li>• Helping with product recalls</li> <li>• Reporting adverse reactions to medications or problems with products</li> <li>• Reporting suspected abuse, neglect, or domestic violence</li> <li>• Preventing or reducing a serious threat to anyone’s health or safety</li> </ul>
<b>Comply with the law</b>	<p>We will share your health information as required by State or federal law.</p>
<b>Work with the medical examiner or funeral director</b>	<p>We can share your information with a coroner, medical examiner, or funeral directors, as necessary.</p>
<b>Do research</b>	<p>We can use and share your health information for health research, if a special board permits us to.</p>
<b>Address workers’ compensation, law enforcement, and other government requests</b>	<p>We can use or share health information about you:</p> <ul style="list-style-type: none"> <li>• For workers’ compensation claims or similar programs</li> <li>• For certain, limited law enforcement purposes</li> <li>• With government agencies responsible for health oversight</li> <li>• For special government functions such as national security and presidential protective services.</li> <li>• In response to a court or administrative order, or a subpoena.</li> <li>• If you are an inmate of the correctional institution or in custody of a law enforcement official, we may share with the correctional institution or other law enforcement for purposes such as protecting your safety or the safety of others.</li> </ul>
<b>Health Information Exchange</b>	<ul style="list-style-type: none"> <li>• We participate in a Health Information Exchange (HIE)</li> <li>• The HIE is an electronic system that allows participating health care providers to share patient information in compliance with federal and state privacy laws</li> <li>• Unless you notify us or otherwise you object, we will share your health information electronically with your participating health care providers as necessary for treatment</li> <li>• Patient health information that currently by law requires your signed authorized for release WILL NOT be transmitted to the HIE without your consent</li> <li>• You can opt out of being included in an HIE at any time by contacting your provider’s office</li> </ul>
<p><b>How else may we use or share your health information?</b> We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research efforts. We have to meet many conditions before we can share your</p>	

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information for these purposes. For more information see: <https://www.hhs.gov/hipaa/for-individuals/index.html>

## Your Choices

**For certain health information, you can choose what we share.** Tell us what you want us to do, and we will do our best to follow your instructions.

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**In these cases, you have the right to decide if we can:**

- Share information with individuals involved in your health care or assisting with payment for your health care.
- Share information in a disaster relief situation
- Contact you for fundraising efforts
- Share your name, location in the facility, and general status (for example “fair” or “critical”) with those who ask for you by name.
- Share your religious affiliation with clergy.

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**In these cases, we never share your information unless you give us written permission:**

- Marketing purposes
- Most sharing of mental health and substance abuse treatment records

## Our Responsibilities

- We are committed and required by law to maintain the privacy and security of your protected health information.
- We will let you know of any breach that may have compromised the privacy or security of your protected health information (PHI).
- We must follow the terms of this notice and give you a copy of it to inform you of our legal duties and privacy practices with respect to PHI. Except in an emergency treatment situation, we will make a good faith effort to obtain a written acknowledgment of receipt of this Notice of Privacy Practices.
- If you tell us we can use or share your information, you may change your mind at any time and revoke your permission. Let us know in writing if you change your mind. We can't change actions taken based on your prior permission or if permission was obtained as a condition of obtaining insurance coverage.
- For additional information about this Notice, contact the County's Privacy Officer using the contact information below.

**Changes to the Terms of this Notice:** We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our offices, and on our web site.

The effective date of this Notice is December 2021.

## Privacy Complaint Contacts

**Riverside County Privacy Office**  
Compliance and Privacy Officer  
26520 Cactus Avenue  
Moreno Valley, CA 92555  
(951) 486-4659

**U.S. Department of Health & Human Services**  
**Region IX Office of Civil Rights**  
90 7<sup>th</sup> Street, Suite 4-100 San Francisco, CA 94103  
TEL: (800) 368-1019 • TDD: (800) 537-7697 •  
FAX: (202) 619-3818

**Attachment 3 – Hybrid Entity Composition  
TO BOARD POLICY B-23**

### **Attachment 3 – Hybrid Entity Composition TO BOARD POLICY B-23**

The County of Riverside Hybrid Entity hereby designates its health care components. Consistent with 45 C.F.R. § 164.105(a)(2)(iii)(D), the health care components must include all Departments that would meet the definition of a covered entity or business associate if they were a separate legal entity,<sup>1</sup> and may include Departments only to the extent that they perform covered functions. The health care components, to the extent they perform covered functions, are:

- Riverside University Health System (RUHS)
  - RUHS Medical Center
  - Department of Behavioral Health
  - Community Health Centers
  - Detention Health
  - Department of Public Health
- Riverside County Emergency Management Department
- Riverside County Fire Department
- Riverside County Information Technology (RCIT)
- Child Support Services
- County Counsel
- Department of Public Social Services
- Executive Office
- First 5 Riverside
- Housing and Workforce Solutions
- Human Resources
- Office on Aging
- Probation Department
- Sheriff's Department
- Veterans' Services

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<sup>1</sup> The terms “covered entity” and “business associate” are defined at 45 C.F.R. § 160.103.