

SHIPM – Update Log

Section	Page	Change
General	All	General formatting for consistency as well as updates to ensure all citation references are consistent with State and Federal standards – these changes do not impact policy content and do not update the Review Date or Revision Date in the policy header
Introduction Letter		Updated for currency
1.2.1 – State Agency Responsibilities	16	Added III.H to address overall compliance with policies and procedures developed by state agencies/departments as well as those issued by the California Information Security Officer (CISO) and the California State Administrative Manual (SAM). This item has been removed from all Security policies as well as 4.1.4 (Staffing: Privacy Official, Security Official) to reduce confusion and ensure accuracy across policies.
2.1.1 – Authorizations	19	III.D.2.d – updated term “substance abuse” to “substance use disorder” to reflect recent changes to 42 C.F.R Part 2 (Federal Register Vol 82; Issue 11, January 18, 2017)
2.2.8 – Opportunity to Agree or Object	40	II. Policy was updated to include C.F.R. citation requiring policies and procedures
2.2.9 – Organ Procurement	44	AB2119 – <i>Medical information: disclosure: medical examiners and forensic pathologists</i> (Chapter 690, September 27, 2016) added medical examiner and forensic pathologist to the definition of “coroner.” The following sections were updated to reflect the definition update: <ul style="list-style-type: none"> • II. Policy • III.A
2.2.11 – Required by Law and Required Disclosures	49	AB2119 – <i>Medical information: disclosure: medical examiners and forensic pathologists</i> (Chapter 690, September 27, 2016) added medical examiner and forensic pathologist to the definition of “coroner.” <ul style="list-style-type: none"> • III.C.9 was updated to reflect the definition update.
2.2.15 Underwriting	60	Updated III.D to correct duplicate “health” reference to “medical” per CA Civil Code § 56.265
2.3.2 – HIV/AIDS Information	74	III.A.3 was updated to include C.F.R. citation requiring policies and procedures
2.3.3 – Mental Health Records	77	III.A was updated to remove requirement for physician approval to release patient records.
2.3.4 – Substance Use Disorder Treatment	82-88	The following items were updated to reflect recent changes to 42 C.F.R Part 2 (Federal Register Vol 82; Issue 11, January 18, 2017) <ul style="list-style-type: none"> • Updated term “substance abuse” to “substance use disorder” in the policy title and throughout the policy • Added new item (III.A) regarding new policies and procedures requirement – note this shifts all items in III. Implementation

SHIPM – Update Log

Section	Page	Change
		<ul style="list-style-type: none"> • Updated III.B to remove TPO reference and moved communication with program/another entity to III.C (item 1) since this refers to disclosures without authorization • Updated III.B.2 per new written authorization requirements • Updated III.B.3 per new requirements for mandatory language for notice prohibiting further disclosure • Updated III.C.6 to reflect updates to qualified service organization and moved definition of qualified service organization to Definitions section • Removed 42 C.F.R. § 2.2 references from the policy - updated Part 2 combines § 2.2 into § 2.1 • Updated III.F to reflect changes to noticing and communications
2.3.5 – Developmental Services Records	91	<ul style="list-style-type: none"> • Updated citation in III.C.10 to reflect correct citations: <ul style="list-style-type: none"> ○ 45 C.F.R. § 164.512 corrected to (i) from (j) ○ CA Welfare and Institutions Code corrected to § 4514(e) from § 4515
2.4.1 – Breach and Breach Notification	97-102	<p>This policy was updated to reflect changes per AB2828 (Personal Information: privacy: breach, Chapter 337, September 13, 2016) and Technology Letter 17-03 (dated March 24, 2017) as well as other updates for consistency (with 3.1.2 Security Incident) and accuracy. Specific changes include:</p> <ul style="list-style-type: none"> • Policy was updated to include encrypted health information per AB2828 • Some references to “patient” were updated to “individual” • Updated III.E.1 to clarify the Secretary of U. S. Department of Health and Human Services to reduce confusion regarding State or Federal HHS • Updated III.E.2 to include requirement that all breach notifications are recorded in the state entity’s Accounting of Disclosure tracking tool/log • Updated III.E and III.H to reflect changes per Technology Letter 17-03, specifically updates to SIMM 5340-C regarding notifications and timing of breach notifications • Updated III.G.1 to correct typo (from “What Happended” to “What Happened”)
2.5.1 – De-identification	103-106	<ul style="list-style-type: none"> • Updated Section III.A and B to add C.F.R. citations for Expert Determination and Safe Harbor approaches for de-identification. • Updated IV. References to remove CA SAM and add NIST standard.

SHIPM – Update Log

Section	Page	Change
2.6.1 – Incidental Disclosures	107	III.A was updated to include C.F.R citation requiring policies and procedures
Section 3 - Security	Entire section	<p>CalOHII has reviewed and rewritten the entire Security section to provide more details in the implementation specifics as well as cite specific CA SAM and SIMM requirements.</p> <p><i>We strongly recommend this section is carefully reviewed.</i></p> <p>In addition, we highlight the following items:</p> <ul style="list-style-type: none"> • A cross reference for the entire section was added (see 3.0 at the beginning of Section 3) to provide a guide to which SHIPM sections address HIPAA requirements • 3.1.8 - Workforce Security was retired. The requirements have been moved to 3.2.4 Workstation Use and Security • 3.2.1 - Access Control was moved from 3.2.0 - Physical Safeguards to 3.3.0 - Technical Safeguards – refer to 3.3.5 Access Control • 3.3.3 - Access Administration was retired. The requirements have been moved to 3.1.3 Information Access Management • 3.3.4 - Integrity is a new policy • 3.3.5 is the new policy location for Access Control (moved from 3.2.1)
4.1.1 – Policies and Procedures	176	<ul style="list-style-type: none"> • Updated III.A.3 to remove overlapping language (first two sentences) to reduce confusion. These items are covered in 4.1.2 Privacy Training. • Updated III.A.4 to add “business practices” to items that should prompt review/changes to privacy policies and procedures.
4.1.2 Privacy Training	178-179	<ul style="list-style-type: none"> • Updated to include specific CA SAM references. • Added documentation requirements (III.C) • Removed additional state requirement (previous III.C)
4.1.3 Sanctions for Violation	180	<ul style="list-style-type: none"> • Updated C.F.R. citation under II. Policy to specific reference
4.1.4 Staffing: Privacy Official, Security Official	186	<ul style="list-style-type: none"> • Removed III.C regarding Additional State Entity Requirements. This item was moved to 1.2.1 State Agency Responsibilities.
4.3.1 – Transactions and Code Sets (TCS)	195	Updated III.A.1 to reflect full list of standard electronic transactions and updated to include the full nomenclature (transaction reference number and description).

SHIPM – Update Log

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4.4.1 Business Associate Agreement	198-202	<ul style="list-style-type: none"> Updated the policy name from Business Associates to Business Associate Agreement. Moved last paragraph of II. Policy section to III. Implementation Specifics (now item D) since this item reflected implementation guidance. Added cloud computing/services guidance to III. Implementation Specifics (item D) to reflect new CA SAM requirements and OCR guidelines. Added Interagency Agreement references throughout policy. Updated III.F.11 to reflecting timing constraint for accounting of disclosure. Updated IV. References to include CA SAM citation for cloud computing. Updated V. Related Policies to reflect Accounting of Disclosures.
4.4.2 – Oversight of Business Associates	203-205	<ul style="list-style-type: none"> Updated policy to clarify purpose of business associate oversight – ensuring emphasis is on contractual compliance not direction on how business associate performs day-to-day operations. Added creation and maintenance of list/log of all BAA contracts to list of compliance demonstration items (III.B.4). Cleaned up references to business associate and business associate agreement (using acronym) and removing references to MOU.
5.2.1 Patient’s (Individual’s) Right to Amend Medical Records	222	<ul style="list-style-type: none"> Updated policy name from Amendments to Patient’s (Individual’s) Right to Amend Medical Records. III.A was updated to include C.F.R citation requiring policies and procedures.
5.3.1 – Notice of Privacy Practices	226-228	<ul style="list-style-type: none"> Updated acronym for Notice of Privacy Practice from NOPP to NPP to reflect industry standard (throughout SHIPM). Updated III. Implementation Specifics to include citation references for all items. Updated III.A to reflect HIPAA requirement Removed non-applicable citation references from IV. References Updated Attachment names throughout policy to reflect file naming standards

SHIPM – Update Log

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5.4.1 – Patient’s (Individual’s) Right to Access Health Information	229-235	<ul style="list-style-type: none"> • Updated policy name from Patient Rights - Access to Patient’s (Individual’s) Right to Access Health Information. • Added health care clearinghouse entities impacted by this policy • Updated III.D.1 to include C.F.R citation requiring policies and procedures. Additionally, removed #4 and moved items into #1 to reduce overlap. • Updated III.A.2 and III.A.8 regarding charges or fees for patients to obtain copies of their records <ul style="list-style-type: none"> ○ III.A.2 – removed fees reference since this is covered under III.A.8 ○ III.A.8 – updated to reflect preemptive analysis on fees that can be charged for records (10 cent per page).
5.5.0 – Restrictions	237	<ul style="list-style-type: none"> • This section has been renamed from 5.5.0 – Restriction for Self-Pay and Confidential Communications to 5.5.0 – Restrictions. • The single policy in this section was split into two policies – 5.5.1 – Restriction for Self-Pay and 5.5.2 – Confidential Communications.
5.5.1 – Restriction for Self-Pay	237-239	<ul style="list-style-type: none"> • Updated policy name to reflect focus of policy for Restriction for Self-Pay (confidential communications was removed and placed in a new policy – see 5.5.2 below) • Updated policy to remove all references to confidential communications (see 5.5.2 below). • Updated citations for III.A.5 to include additional HIPAA references per updates to 42 C.F.R. Part 2.
5.5.2 – Confidential Communications	240-241	<ul style="list-style-type: none"> • New policy - 5.5.1 Restriction for Self-Pay and Confidential Communications was split into two policies. This policy focuses on Confidential Communications.
SHIPM Definitions	Entire Section	<p>All definitions and sources were reviewed and general formatting was completed. In addition, the following updates were made to specific definitions:</p> <p>Added new definitions for:</p> <ul style="list-style-type: none"> • Audit Logs • Audit Trails • Media • Policy • Procedure • Qualified Service Organization • Substance Use Disorder

SHIPM – Update Log

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		<ul style="list-style-type: none"> • Treating Provider Relationship <p>The following definitions were updated or modified:</p> <ul style="list-style-type: none"> • Breach – added encrypted data definition per AB 2828 • Disclose – added 42 C.F.R Part 2 definition • Patient – added 42 C.F.R Part 2 to source citations • Program – to reflect recent changes to 42 C.F.R Part 2 • Substance Use Disorder Treatment Program – to reflect recent changes to 42 C.F.R Part 2 • Substance Use Disorder Treatment Records – to reflect recent changes to 42 C.F.R. Part 2 and correct date reference (corrected from 2974 to 1974) • Treatment Relationship – added reference to Treating Provider Relationship for Part 2 treatment • Availability – added IT related definition • Authentication – added IT related definition • Health Information - updated to reflect new terminology “substance use disorder” • Specially Protected Health Information - updated to reflect new terminology “substance use disorder” • Substance Use Disorder Regulations - updated to reflect new terminology “substance use disorder”
Attachments		<p>The following changes were made to all attachments:</p> <ul style="list-style-type: none"> • File names have been changed to match the attachment reference in the applicable SHIPM policy – additionally all file names contain the applicable SHIPM policy number for ease of cross-reference • All headers and footers have been updated for consistency (except CalDURSA)
Attachment – CalOHII Annual Breach Reporting Form		<ul style="list-style-type: none"> • Updated report title to match attachment reference in policy and file name • New columns added for annual reporting: <ul style="list-style-type: none"> • Cal-CSIRS Incident Number (2nd column) • Type of Breach (last column) • A footnote was added to the report to provide the applicable values for “Type of Breach”
Attachment – Risk Analysis/Assessment Checklist		Updated header to match attachment reference in policy and file name

SHIPM – Update Log

Section	Page	Change
Attachment – HIPAA Required Policies and Procedures		<ul style="list-style-type: none"> • Updated header to match attachment reference in policy and file name • Updated SHIPM Section column to correct inaccurate references in policy Section 2 • Added 2.2.18 – Hybrid Entities and 2.3.4 – Substance Use Disorder Treatment • Removed 3.1.5 – Security Awareness and Training • Updated policy names for 5.2.1 and 5.4.1 to match updated policy topics
Attachment – HIPAA Business Associate Agreement Template		<ul style="list-style-type: none"> • Updated title page to match attachment reference in policy and file name • Updated I. Documentation of Disclosures to add timing for BA to make documentation available • Added J. Notification of Patient Confidential Communication to ensure department is notified by BA about patient preferences • Updated 3.D to include timing for department to notify the BA regarding patient preferences
All Attachments for NPP		<ul style="list-style-type: none"> • Updated change in acronym from NOPP to NPP
Attachment – A – Model Template Notice for Privacy Practices		<ul style="list-style-type: none"> • Added business associate to the organizations listed under A. Who Will Follow this Notice
Attachment – B – Notice of Privacy Practices - Checklist		<ul style="list-style-type: none"> • Updated checklist to include specific HIPAA regulation citations for required items
Attachment – C – Notice of Privacy Practices – Acknowledgment of Receipt		<ul style="list-style-type: none"> • Added title to form