The HIPAA Privacy and Security Executive Board ("Executive Board") charges the HIPAA Privacy and Security Operations Committee ("Operations Committee" or "Committee") to implement, operate, and continually assess privacy and security controls that support the UW-Madison’s HIPAA Policies and Procedures (https://compliance.wisc.edu/policies-and-forms/).

The Operations Committee is also responsible for identifying and reporting to the Executive Board observed compliance risks and recommendations about how to reduce such risk and corresponding likelihood of HIPAA violations at UW-Madison.

| Committee Co-Chairs | • HIPAA Privacy Officer: Amanda Reese, JD, CHPC, CPHRM  
|                     | • HIPAA Security Officer: Dharvesh Naraine, CEH |
| Sponsors           | • Co-chairs of the HIPAA Executive Board  
|                    |   o Director of Compliance, Jaimee Guilford, JD  
|                    |   o Chief Information Security Officer, Bob Turner |
| Official Members   | • HIPAA Privacy and Security Coordinators, as identified at https://compliance.wisc.edu/hipaa/coordinators/  
|                    | • Office of Legal Affairs, Health Law Attorneys  
|                    | • School of Medicine & Public Health, Honest Broker |
| Ex Officio Members | • Office of Compliance, HIPAA Incident Investigator  
|                    | • Office of Cybersecurity, HIPAA Security Risk Analysts  
|                    | • Office of Cyber Security, Incident Response Team (IT Forensics)  
|                    | • Health Sciences Institutional Review Board, Director (or designee) |
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1. Purpose

The Health Insurance Portability and Accountability Act of 1996 ("HIPAA") was enacted in part to protect health information by establishing privacy and security standards for the use and disclosure of individually identifiable health information, known as Protected Health Information (as defined in HIPAA, referred to as "PHI"). HIPAA is enforced by the US Department of Health and Human Services’ Office for Civil Rights.

The Operations Committee is responsible for operationalizing methods to protect the privacy and security of UW-Madison’s patients’ and research subjects’ PHI, while at the same time reducing UW-Madison’s business, financial and reputational risks associated with the creation, storage, use, transmission, disclosure, and disposal of PHI. The Committee will work at the direction of the Executive Board, the Office of Compliance, and the Office of Cybersecurity – and will operate under the supervision of the UW-Madison HIPAA Privacy Officer and the UW-Madison HIPAA Security Officer.

2. Administrative Structure

The following identifies the administrative structure of the Operations Committee. Changes to this structure or this charter are at the discretion of the Executive Board or the HIPAA Privacy and HIPAA Security Officers.

2.1. Composition

The Committee is formed and organized, operated and co-chaired under the purview of UW-Madison’s HIPAA Privacy Officer and HIPAA Security Officer.

2.2 Chairpersons

UW-Madison’s HIPAA Privacy Officer and HIPAA Security Officer co-chair the Committee; these positions are identified by and report to the Director of Compliance in the Office of Compliance and the Chief Information Security Officer in the Office of Cybersecurity, respectively. In the event the co-chairs are absent at any meeting of the Committee, they shall have discretion to cancel or reschedule such meeting, or to designate a Committee member to serve as an Acting Chair or Acting Co-Chair.

2.3. Meetings

Committee meetings will be held once a month for no longer than ninety (90) minutes. The co-chairs will identify if additional meetings of the Committee or a sub-committee need to be coordinated in order to address outstanding business. The co-chairs will post agenda and supporting documentation prior to meetings to a common repository available to all Official and Ex-Officio members of the Committee. Meetings will consist of at least the following standing agenda items:

1. Introductions / Announcements
2. Regulatory Enforcement News and Changes to Laws and Regulations (if any)
3. New or Modified UW-Madison HIPAA Policies
4. Status of Operations and Projects
2.4. Minutes and Reports
The Committee shall maintain all meeting minutes, reports, and other documentation in a repository available to all Official and Ex-Officio members of the Committee. The co-chairs are responsible for managing the documentation based on the appropriate records retention schedules.

2.5. Administrative Support
A designated staff person who provides administrative support to the co-chairs shall assist the Committee with coordination of meetings, preparing agendas and taking minutes during meetings, and providing other administrative support as reasonably requested by the co-chairs.

2.6. Committee Membership
Official Committee members will include:
- The HIPAA Privacy Coordinator(s) and HIPAA Security Coordinator(s) for each of the Health Care Components (HCC), as designated in accordance with HIPAA Policy 10.2.
- Office of Legal Affairs Health Law Attorneys
- The School of Medicine and Public Health Honest Broker

Ex-Officio members include but are not limited to the following.
- Office of Compliance, HIPAA Incident Investigator
- Office of Cybersecurity, HIPAA Security Risk Analysts
- Office of Cyber Security, Incident Response Team (IT Forensics)
- Health Sciences Institutional Review Board, Director (or designee)

3. Authority
Subject to the Direction of the Executive Board, the Office of Compliance, and the Office of Cybersecurity, the Operations Committee is authorized to operationalize methods to comply with HIPAA. More specifically, the Committee’s efforts will focus protecting the privacy and security of UW-Madison’s patients’ and research subjects’ PHI, while at the same time reducing UW-Madison’s business, financial and reputational risks associated with the creation, storage, use, transmission, disclosure, and disposal of PHI. They accomplish this by implementing, maintaining, and enforcing the UW-Madison HIPAA Policies, and fulfilling the responsibilities outlined in Section 4 of this Charter.

3.1 Authority of the Co-Chairs
The Co-Chairs of the Committee may act on behalf of the Committee in the event immediate or urgent action is required and it is impractical to convene the Committee. In such instances, they shall report on any actions taken as soon as possible to the Committee.

3.2 Advisory Resources
The Committee may obtain such advice as it requires from time to time to address its responsibilities, whether through the appointment of one or more Advisory Councils to provide expert input, the engagement of consultants or other advisory resources, or through any other appropriate action.
4. Responsibilities
The following identifies the responsibilities for the Committee members as well as the responsibilities of the HIPAA Privacy Officer, HIPAA Security Officer, and the HIPAA Privacy Coordinators and HIPAA Security Coordinators who are identified and function in accordance with UW-Madison HIPAA Policy 10.2, “Designation of Unit Privacy and Security Coordinators.”

4.1 Committee Co-Chairs and Official Members

4.1.1 Establishing and maintaining all HIPAA privacy and security policies.
4.1.2 Creating and maintaining all HIPAA privacy and security educational and training materials.
4.1.3 Centralizing and maintaining HIPAA policies, procedures, and training materials, and resources in a user-friendly website or websites responsive to the needs of faculty, staff, students, volunteers, business associates and community partners.
4.1.4 Enhancing consistency and cohesiveness of HIPAA compliance efforts across the UW-Madison Health Care Component.
4.1.5 Ensuring UW faculty, staff, students, volunteers, business associates and community partners are informed, trained and educated about the standards of conduct and ethical/legal obligations as they apply to HIPAA privacy and security.
4.1.6 Receiving and responding to audit reports of HIPAA compliance activities.
4.1.7 Establishing and maintaining a mechanism for individuals to report potential HIPAA non-compliance concerns or observations.
4.1.8 Reviewing reported incidents of non-compliance with HIPAA policies, including potential HIPAA privacy/security breaches, evaluating or formulating associated corrective action plans, and endorsing or recommending associated disciplinary proposals.
4.1.9 Serving as resources to UW-Madison regarding HIPAA, especially its application to educational and research matters.
4.1.10 Conducting periodic risk assessments to identify, prioritize, implement and evaluate process improvement initiatives to enhance the quality, effectiveness, and efficiency of UW-Madison’s compliance with HIPAA.
4.1.11 Evaluating the quality, effectiveness and efficiency of UW-Madison’s compliance with HIPAA through a HIPAA Risk Assessment process.
4.1.12 Fostering a community of trust among the UW-Madison Health Care Component and clinical and research affiliates by promoting and utilizing risk-based controls to safeguard PHI, while not unnecessarily impeding its legitimate use or disclosure critical to fulfill UW-Madison's clinical, research, education, and public service missions.
4.1.13 Advising UW-Madison leadership, including the HIPAA Executive Board, on all matters related to HIPAA compliance at UW-Madison.

5.2 Ex-Officio Members

4.2.1 Act as subject matter experts for their respective role at UW-Madison with regard to HIPAA compliance efforts at UW-Madison.
4.2.2 Provide responses to requests for information as part of HIPAA Risk Assessment efforts.

5. Operations Committee Guiding Principles

The Committee will operate in the consideration of the following guiding principles.

5.1. **Transparency**: The Committee will be transparent in its actions within the Committee, with the HIPAA Executive Board, and with the UW-Madison community.

5.2. **Knowledge**: The Committee will strive to be campus experts regarding HIPAA privacy and security compliance.

5.3. **Participation and Responsiveness**: The Committee will participate in meetings, educational sessions, and operational responsibilities as well as be responsive to the needs of the campus community.

5.4. **Respect**: The Committee will be respectful with each other as well as respectful of the needs of the campus community.

5.5. **Advocacy**: The Committee will identify opportunities to efficiently and effectively promote compliance with HIPAA throughout the campus community.