



Privacy and Security Workgroup Charter

Version 15.1

Purpose:	<p>The Privacy and Security Workgroup will:</p> <ul style="list-style-type: none"> • Gather input from key stakeholders throughout the state, to inform and give feedback to the HIP TN Operations Council, Board and state officials, as appropriate, on matters related to privacy, confidentiality and security of PHI electronically exchanged, • Recommend to the HIP TN Operations Council and/or Board policies and processes that help to ensure the privacy, confidentiality and security of PHI electronically exchanged in Tennessee, consistent with the State Plan and all State and federal laws, rules, regulations and standards that may apply, • Participate in and contribute to the development and adoption of policies that ensure privacy, confidentiality and security of PHI electronically exchanged within and across the boundaries of Tennessee, • Identify and disseminate best practices at the national, state, and regional levels. • Recommend policies and processes to address and comply with patient/consumer rights related to how PHI is electronically accessed, used and disclosed
Meeting Schedule:	<p>The Privacy and Security Workgroup will initially meet weekly or bi-weekly. Meeting frequency is subject to change based on need.</p>
Scope and Boundaries:	<p>The Privacy and Security Workgroup will:</p> <ul style="list-style-type: none"> • Focus initially on the electronic exchange of PHI between legal organizations (including providers and RHIOs); not on electronic exchange within a single legal entity such as an Integrated Delivery Network (IDN), • Consider best practices concerning electronic exchange of PHI from the patient's perspective. <ul style="list-style-type: none"> ○ Has the patient been informed of the benefits and risks? ○ Does the patient desire PHI to be electronically exchanged? ○ What data is available at the point of care? ○ Who has access to the PHI and for what purpose? ○ Does the patient have electronic access to their PHI? ○ Can the patient get accounting of each disclosure of PHI shared with others? ○ Has the patient been informed of their rights concerning electronic exchange of PHI? • Use the process defined by the state for policy adoption (Appendix A attached), work with State leaders to propose and support adoption of recommended policies, • Consider Meaningful Use, Minimum Necessary and Limited Data Set, and Breach requirements related to privacy and security, • Work within the State's defined priorities for addressing technical needs for

	<p>providers throughout the state to exchange PHI electronically. The State will provide guidance on priorities and support to enable electronic exchange capabilities for providers in different locations (e.g. rural, urban, suburban), as well as those serving “vulnerable and underserved”¹ populations.</p> <ul style="list-style-type: none"> • Consider that the electronic exchange of sensitive PHI (sexually transmitted diseases, minors, substance abuse, mental health, HIV status etc) requires a secondary level of protection
<p>Objectives and Goals:</p>	<ul style="list-style-type: none"> • Make policy recommendations to the HIP TN Operations Council and/or Board regarding secure electronic exchange of PHI in a manner that protects privacy and confidentiality, • Coordinate with the Tennessee Regional Extension Center to increase provider awareness and capability to meet requirements, • Evaluate the HITRUST Common Security Framework and recommend to HIP TN Board this or other frameworks to accomplish the goals of the organization relating to privacy and security, • Support the development and implementation of privacy and security components of the State Operational Plan, • Throughout the RFP process, support HIP TN to identify and address technical requirements to protect Privacy and Security, including definition of criteria for evaluating each proposal submitted, • Provide input for development and execution of data sharing agreements to support the electronic exchange of PHI within and across the state boundaries.
<p>Measures of Success:</p>	<p>The Privacy and Security Workgroup will be responsible for ensuring that privacy and security policies and template data sharing agreements are in place for participants in statewide electronic exchange of PHI.</p>
<p>Deliverables:</p>	<ul style="list-style-type: none"> • Documentation of Privacy and Security policies designed to guide electronic exchange of PHI statewide, and enable Meaningful Use. • Evaluation of HITRUST Common Security Framework and recommendation to HIP TN board regarding adoption of HITRUST or other appropriate framework, • Document privacy and security infrastructure requirements to ensure privacy and security of PHI electronically exchanged within and across the state boundaries.
<p>Constraints:</p>	<ul style="list-style-type: none"> • Statewide policy – to the extent applicable in any given circumstance – shall be a condition of access to HIE related services supported by HIP TN, as well as any third party contracted by HIP TN to carry out the development, delivery or operation of HIE services, • Engagement and coordination with State of Tennessee’s Internal Health Council and IHC Operations Council.

¹ “Vulnerable” denotes high risk for healthcare problems. “Underserved” denotes populations that receive fewer healthcare services than required for actual or potential healthcare problems – JAMIA
 Medically Underserved populations are those with economic barriers or cultural or linguistic access barriers to primary medical services – HRSA
 There is considerable overlap between Vulnerable and Underserved but an individual may be vulnerable and not yet underserved – JAMIA
 Source: <http://jamia.bmj.com/content/11/6/448.full.pdf>



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<p>Other related projects/initiatives that the Privacy and Security Workgroup needs to coordinate with:</p>	<ul style="list-style-type: none"> • State Planning initiatives that include TennCare Plans, eHealth plans for statewide HIE (Strategic Plan and Operations Plan), State Health Plan, Department of Health, Department of Mental Health, Department of Correction, others TBD, • Meaningful Use requirements, • Minimum Necessary • State Internal Health Council, • IHC Operations Council, • Other workgroups, including those led and supported by HIP TN (e.g. Technical, Clinical, Sustainability and Consumer). • Local and regional initiatives (i.e., MSeHA, CareSpark and the like)
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Appendix A

Process for Adoption of Policies:

(Source: Grant Contract between HIP TN and State of Tennessee, effective October 1, 2009)

- Once an issue is identified, the Operations Council will pass the policy issue to the appropriate Work Group(s) for consideration and drafting of policy recommendations.
- Once the Work Group(s) has drafted the policy recommendation, it will be sent to the Operations Council for review and further vetting.
- If any revisions are required, the policy recommendation will go back to the appropriate Work Group(s) for revision based on the guidance from the Operations Council.
- Once the policy has been revised, the policy will be sent to the Operations Council for review.
- When the recommended policy has been fully vetted, the Operations Council will forward the recommended policy to the (HIP TN) Board for preliminary review.
- Once the (HIP TN) Board completes a preliminary review, it shall forward the policy recommendation to the State HIT Coordinator for consideration for adoption through the State's process.
- At the time of adoption by the State, the policy will be forwarded to the Board for final adoption and implementation steps as necessary.