

**Texas Tech University Health Sciences Center
HIPAA Privacy Policies**

Administration	Policy 1.3
Hybrid Designation	Effective Date: November 17, 2009 Revised: September 21, 2017
References: 45 CFR 164.102 and 103, http://www.hhs.gov/ocr/hipaa HSC HIPAA website http://www.ttuhscc.edu/hipaa/policies_procedures.aspx	

Policy Statement

This policy designates Texas Tech University Health Sciences Center (HSC) as a hybrid entity under the Health Insurance Portability and Accountability Act (HIPAA) and identifies its health care components subject to HIPAA's privacy and security provisions.

Scope and Distribution

This policy applies to HSC designated health care components identified in this policy. It does not apply to inmates seen or treated by HSC.

Definitions

Refer to [HPP 1.1 for Glossary of HIPAA Terms](#)

See [Old/New HIPAA Policy Number Cross Reference Chart](#)

Procedure

1. **Definitions.** For purposes of this policy, these terms have the following meaning:

“Hybrid Entity” means a single legal entity that is also a covered entity whose business activities include both covered and non-covered functions and that designates health care components.

“Covered Entity” means one or more of the following:

- A health plan;
- A health care clearinghouse; or
- A health care provider who transmits protected health information in electronic form in connection with a HIPAA covered transaction.

“Health Care Component” means a component or combination of components of a hybrid entity designated by the hybrid entity. The component or combination of components includes any component of the covered entity that:

- performs the functions of a covered entity;
- engages in activities that would make it a business associate of the covered entity if both were separate legal entities; or
- meets the definition of a covered entity if it were a separate entity.

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2. Designated HSC Health Care Components. The following are designated by HSC as its health care components.

School/Institution	Departments
TTUS ¹	Chancellor's Office
TTUS	General Counsel/Professional Liability and Risk Management
TTUS	Office of Audit Services
TTUS	Institutional Advancement
HSC	President's Office
HSC	Information Technology
HSC	Office of Communications
HSC	Human Resources Office
HSC	Institutional Review Boards
HSC	Institutional Biosafety Committee
HSC	Sponsored Programs, Research Integrity Office
HSC	Institutional Compliance and related Committees
HSC	Rural and Community Health/Telemedicine
HSC	Institutional Advancement and Communications & Marketing
HSC	Volunteer Services
GSBS ²	Clinical Research
SOAHS	Speech-Hearing Language Clinic
HSC SOM ³	Administration, Clinical Operations ⁴ , Clinical Research
SON ⁶	Administration, Clinical Operations, Clinical Research
SOP ⁷	Administration, Clinical Operations, Clinical Research

TTU Police and Athletic Departments are not designated HSC health care components as neither department functions as a Covered Entity nor performs functions or activities on or behalf of, or provides services to HSC requiring either department to access, create, receive, maintain, transmit or disclose PHI.

This policy and procedure will be documented and retained for a period of 6 years from the date of its creation or the date when it last was in effect, whichever is later.

Knowledge of a violation or potential violation of this policy must be reported directly to a Regional Privacy Officer, the Institutional Privacy Officer or to the employee Compliance Hotline at (866) 294-9352 or www.ethicspoint.com under HSC.

¹ Texas Tech University System

² Graduate School of Biomedical Sciences

³ Health Sciences Center School of Medicine-Lubbock (Lubbock, Amarillo and Permian Basin campuses)

⁴ Clinical Operations includes, but is not limited to patient care activities, clinical research, medical records, patient services or any other activity involving protected health information.

⁵ Health Sciences Center Paul L. Foster School of Medicine-El Paso

⁶ Anita Thigpen Perry School of Nursing

⁷ School of Pharmacy

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Approval Authority

Questions regarding this policy may be addressed to the Regional Privacy Officer ([Amarillo](#), [Lubbock](#), [Permian Basin](#)), the [Institutional Privacy Officer](#), or the [Institutional Compliance Officer](#).

Responsibility and Revisions

This policy may be amended or terminated at any time.