

1. Complete the Assessment Tool
2. Determine your score:
 - a. Few meaningful safeguards in place
 - b. Reasonable safeguards in place
 - c. Strong safeguards are in place
3. If your score indicates that you have “few meaningful safeguards in place” and you determine that your situation will require financial support to bring your work site up to a reasonable standard, continue to the next step. There are a number of safeguards that can be put into effect with minimal costs.

- a. Submit a request for financial assistance to:

Department of Human Services
 ATTN: Director of Budget and Finance
 Hillsview Plaza, East Hwy. 34
 C/o 500 East Capitol
 Pierre, South Dakota 57501-5070
 Phone (605) 773-5990

- i. Include your Assessment Tool and Safeguard Plan which indicates your recommended changes in each area;
- ii. A completed purchase requisition; and
- iii. Notify the DHS HIPAA Privacy Office that you have made such a request.
- b. The DHS Office of Budget and Finance will review each request and take into consideration all conditions and circumstances before granting a request.
4. If your assessment indicates that you have “reasonable safeguards in place” or “strong

safeguards in place” and you have completed your Safeguard Plan noting why you will not be making changes in particular sections, you will:

- a. Maintain one copy of your completed assessment for your records; and
- b. Submit one copy of your completed assessment to:

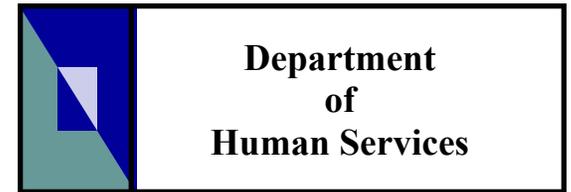
Department of Human Services
 ATTN: DHS HIPAA Privacy Office
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You have achieved excellence and are in a position to support others by sharing your best practices!



Hillsview Plaza, East Highway 34
 c/o 500 East Capitol
 Pierre, South Dakota 57501-5090

Phone: (605) 773-5990
 Fax: (605) 773-5483
 Email: infodhs@state.sd.us



GUIDANCE FOR

Administrative, Technical and Physical Safeguards for Protected Health Information (PHI)



DHS 2099 Guidance for Administrative, Technical and Physical Safeguards for Protected Health Information (PHI)

THE DEPARTMENT OF HUMAN SERVICES (DHS) is conducting ongoing

efforts to improve the protection, of confidential information, including client/patient or participant's PHI. As part of this effort, DHS Administrators and Directors or their designee are conducting self-assessments of their offices to determine whether they have in place reasonable physical, technical and administrative safeguards to protect confidential information.

HIPAA requires DHS, as a covered entity, to "have in place appropriate administrative, technical, and physical safeguards to protect the privacy of protected health information (PHI)." We are required to "reasonably safeguard PHI from any intentional or unintentional use or disclosure" in violation of the law. The federal Office of Civil Rights, which is responsible for enforcing HIPAA, said:

"Reasonably safeguard" means that covered entities must make reasonable efforts to prevent uses and disclosures not permitted by the rule. However, we do not expect reasonable safeguards to guarantee the privacy of PHI from any and all potential risks. In determining whether a covered entity has provided reasonable safeguards, the Department will take into account all the circumstances, including the potential effects on patient care and the financial and administrative burden of any safeguards.

Conducting a Self-Assessment

It is therefore recommended that you, as Administrators and Directors or your designee, take a slow, deliberate walk throughout your facility, with the security of all private information in mind. Then thoughtfully complete the DHS 2098 "Safeguard Assessment Tool". You can complete this tool in less than fifteen minutes. Add up your score and see how your office/facility rates.

This score will be a guide for you to determine what reasonable safeguards to implement in your office/facility. This score is only a relative guide, not a security performance measure. It is up to the Administrator or Director responsible for each office or facility to determine what safeguards are reasonable given his or her location.

The level of security for a Community Program office is not expected to be the same as for a Secure Treatment Facility, or vice versa. Strive to achieve excellence by seeking ways to improve your score.

Developing your Safeguard Plan

Once you have completed your assessment, develop a Safeguard Plan, and document the result. Use the Safeguard Plan outline found at the end of the Assessment Tool to develop and describe your plan. If you are not going to change any safeguard measures in a particular section, please explain.

Please retain a copy of your completed assessment and Safeguard Plan for your site records and submit one copy to:

Department of Human Services
ATTN: DHS HIPAA Privacy Office
Hillsview Plaza, East Hwy. 34
C/o 500 East Capitol
Pierre, South Dakota 57501-5070
Phone (605) 773-5990

On-going Compliance Efforts

This assessment is to be conducted annually at the start of each state fiscal year. Your Safeguard Plan is to be reviewed and updated based upon any changes that may have occurred prior to your last assessment. There are many reasons why an assessment score may change each year. Revisiting the issue each year is intended to focus you and your staff on seeking new ways to implement stronger safeguards and adhere to the safeguards that you already have in place. If you have questions or would like assistance, please feel free to contact the DHS HIPAA Privacy Office.

Best Practices

If you and your staff create safeguard ideas to improve your worksite that haven't been mentioned in the Assessment Tool, please share your ideas with others and inform the DHS HIPAA Privacy Office. We can learn some of our best practices from one-another.

2003 Initial Assessment Tool and Safeguard Process:

For the initial HIPAA compliance and implementation your assessment and Safeguard Plan must be completed and submitted to the DHS HIPAA Privacy Office by **August 1, 2003**. You will have until **November 1, 2003** to implement these safeguards.