TULANE UNIVERSITY
SITE VISITS AND PRIVACY AUDITS

SCOPE OF POLICY

This policy applies to the Tulane University Medical Group, its participating physicians and clinicians, and all University employees and business units who provide management, administrative, financial, legal, and operational support to or on behalf of Tulane University Medical Group and/or have been designated as part of the Tulane University HIPAA Health Care Component.

STATEMENT OF POLICY

The University Privacy Officer is responsible for monitoring Tulane University’s privacy practices and standards in order to ensure compliance with applicable privacy regulations. Tulane University is committed to a robust auditing and site visit program to periodically check and ensure privacy practices and standards are being adhered to.

IMPLEMENTATION OF POLICY

1. The University Privacy Officer will coordinate and conduct an auditing and site visit program to periodically check and ensure privacy practices and standards are being adhered to.
   
a. The University Privacy Officer will have direct, unimpeded access to all Tulane University facilities and staff to conduct such audits, interviews and walkthroughs.

b. The University Privacy Officer will ensure the use of appropriate administrative, technical and physical safeguards to protect Protected Health Information.

   c. The site visits shall include a determination of whether the site conforms to the Tulane University’s standards for medical record keeping practices and the confidentiality requirements provided by the Health Insurance Portability and Accountability Act (“HIPAA”), its implementing rules and regulations and in Chapter 4, Section 10.5.4 of
the Center for Medicare Services ("CMS") Medicare Managed Care Manual ("MMCM").

d. Such audits and site visits may be announced or unannounced as deemed appropriate by the University Privacy Officer.

e. The site visits will be performed at least once per calendar year or more frequently as determined by the University Privacy Officer.

f. The results of any such audit will be recorded and retained for a period of 6 years. These results will be forwarded to appropriate personnel for any necessary remedial action.

2. The Office of the General Counsel and the University Privacy Officer may engage outside consultants to conduct privacy and/or security assessments as deemed appropriate.