



VOLUME 13: PRIVACY	Effective Date: 09/2015
CHAPTER 11	Revision Date:
13.11 PRIVACY BREACH POLICY	Attachments: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

I. POLICY

California Correctional Health Care Services (CCHCS) shall process and report privacy breaches to oversight agencies as required by state and federal law.

II. PURPOSE

To ensure that CCHCS information privacy breaches are processed in compliance with state and federal law.

III. DEFINITIONS

Breach: The unauthorized acquisition, access, use or disclosure of Protected Health Information (PHI) or Personally Identifiable Information (PII) (as those terms are defined by Inmate Medical Services Policies and Procedures, Volume 13, Chapter 12, General Privacy Policies for Staff and Patient Information Policy) that compromises the security, confidentiality, or integrity of personal information maintained by CCHCS. Good faith acquisition of PHI or PII by an employee or agent of CCHCS for the purposes of CCHCS is not a breach, provided that the PHI or PII is not used or subject to further unauthorized disclosure.

Disclosure: The release, transfer, provision of access to, or divulging in any other manner, of information outside the entity holding the information.

Personally Identifiable Information: Any information that is maintained by CCHCS that identifies or describes an individual, including, but not limited to, his or her name, social security number, physical description, home address, home telephone number, education, financial matters, and/or medical or employment history. It includes statements made by, or attributed to, the individual. PII may include information that is not necessarily PHI and may pertain to CCHCS employees, members of the public, or other individuals who may or may not be patients.

Protected Health Information: Information created or received by CCHCS which identifies or can be used to identify an individual as it relates to past, present, or future health conditions; health care services provided to the individual; or health care related payments. This applies to information that is transmitted or maintained in verbal, paper, or electronic form.

IV. RESPONSIBILITY

Oversight responsibility of the Privacy Office shall be vested in the Privacy Officer. The Privacy Officer is required to oversee privacy rights as required by laws, policies, and standards for respecting the rights of individuals with regard to the collection, use, and disclosure of personal information throughout CCHCS.

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V. PRIVACY BREACH REPORTING

- A. Any suspected breach shall be reported to the CCHCS Information Security Officer, who shall investigate the suspected breach.
1. The CCHCS Information Security Officer shall notify the CCHCS Privacy Office of the initiation and outcome of each investigation.
 2. Privacy breach notifications to patients, or others as applicable, shall be made by the CCHCS Privacy Office.
 3. The Privacy Office shall assist CCHCS in the reporting of unauthorized collection, access, use, or disclosure of PHI or PII in accordance with applicable laws, rules, and the California Department of Corrections and Rehabilitation, Department Operations Manual.
- B. Notifications shall be written in plain language. Notifications shall meet the following requirements if the information is available at the time the notice is provided:
1. Include the name and contact information of CCHCS.
 2. A list of the types of personal information reasonably believed to have been the subject of a breach.
 3. The date of the breach, the estimated date of the breach, or the date range within which the breach occurred, the date of discovery of the breach, and the date of the notice.
 4. Whether the notification was delayed as a result of a law enforcement investigation.
 5. A general description of the breach incident.
 6. CCHCS actions related to gathering facts and/or investigating the breach, mitigating harm to individuals and protecting against further breaches.
 7. Any steps individuals should take to protect themselves from potential harm.
 8. If the breach exposed a social security, driver's license, or California identification card number, CCHCS shall provide toll-free telephone numbers and addresses of the major credit reporting agencies.

VI. TRAINING REQUIREMENTS AND CONTACT INFORMATION

- A. Privacy training is required for new employees during New Employee Orientation and annually thereafter.
- B. For questions or clarification, please contact: Privacy@cdcr.ca.gov or 1-877-974-4722.

VII. REFERENCES

- Code of Federal Regulations, Title 45, Subtitle A, Subchapter C, Part 164, Subpart D, Section 164.400 et seq.
- California Civil Code, Division 3, Part 4, Title 1.8, Chapter 1, Article 7, Section 1798.29
- California Civil Code, Division 1, Part 2.6, Section 56 et seq.
- California Health and Safety Code, Division 2, Chapter 2, Article 3, Section 1280.15
- California Correctional Health Care Services, Inmate Medical Services Policies and Procedures, Volume 13, Chapter 12, General Privacy Policies for Staff and Patient Information Policy