Attachment A

HIM Director Survey on HIPAA Privacy (check box or fill in the blank)

1. Type of facility?
   - Hospital > 400 beds
   - Hospital 100 - 400 beds
   - Hospital < 100 beds
   - Long term care
   - Managed care organization
   - Home care
   - Hospice
   - Mental and behavioral health
   - Integrated health delivery service organization
   - Other_________________

2. Your title:
   - HIM director
   - Corporate compliance officer
   - HIM supervisor
   - Administrator
   - Other_________________

3. Your credentials:
   - RHIA
   - RHIT
   - RN
   - Other (please provide)_____________

4. Who is designated as the privacy officer?
   - Legal counsel
   - HIM director
   - Corporate compliance officer
   - Hospital administrator
   - Other_________________

5. To date what type of HIPAA privacy training have employees in your department had? (Check all that apply)
   - Videos
   - Formal classes
   - Computer based
   - HIPAA privacy informational pamphlets/documents
   - Informal
   - No training took place yet
6. Could you estimate how many hours you plan on spending to train employees in your department plan on HIPAA privacy?
   - < 1 hour
   - 1-4 hours
   - 5-9 hours
   - > 10 hours

7. As the HIM director, rank the most confusing aspects of HIPAA privacy 1-6, (1= most confusing, 6= least confusing):
   - Patient access to information (inspect, copy, amend, record)
   - Rules concerning use and disclosure (consent, authorization, marketing, business associates)
   - Administrative requirements (notice, safeguards, training, accounting disclosures)
   - Enforcement and compliance
   - Rules for certain entities (hybrid, affiliated)
   - Other ______________________

8. As the HIM director is your department involved in the process of accounting for disclosures and creating a notice of privacy practices?
   - Yes
   - No
   - Not sure

9. Please estimate current HIPAA privacy compliance within your facility?
   - < 25 percent
   - 25-49 percent
   - 50-74 percent
   - 75 percent or more

10. Will your facility provide a general consent for treatment, payment, and healthcare operations even though it will not be required under HIPAA?
    - Yes
    - No
    - Not sure

11. Do you feel HIPAA privacy will significantly complicate daily operations in the HIM department?
    - Yes
    - No
    - Not sure

12. Who is responsible for developing/updating the following:
13. In your opinion, are HIPAA privacy regulations necessary?
   - Yes
   - No
   - Not sure

14. Have you experienced any breaches of patient confidentiality in the past three years?
   - No
   - Yes
   If yes, who committed the breach?
   - Employee
   - Hacker
   - Patient
   - Other (explain)____________________

15. Do you feel HIPAA privacy will prevent patient confidentiality breaches once it is in place?
   - Yes
   - No
   - Not sure
16. Do you foresee the need to add additional staff to the HIM department because of HIPAA privacy requirements?
   - Yes
   - No

17. Do you foresee the need to add additional staff to the organization as a whole?
   - Yes
   - No

18. HIPAA requires covered entities to have appropriate safeguards in place to protect the privacy of protected health information. Has your facility had to adjust any of the following to meet this requirement?

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<thead>
<tr>
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<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Administrative safeguards</td>
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<td>Technical safeguards</td>
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<td>Physical safeguards</td>
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19. Is your organization using consultants for any of your efforts in meeting HIPAA privacy compliance?
   - Yes
   - No
   - Not sure

20. How has your importance within the facility changed since the implementation of HIPAA privacy?
   - Increased greatly
   - Increased moderately
   - Stayed the same
   - Decreased moderately
   - Decreased greatly