

HHSA Provider Fundamentals



Training for HHSA Providers

County of San Diego- Health and Human Services

Business Assurance and Compliance

[SANDIEGOCOUNTY.GOV/HHSA](https://sandiegocounty.gov/HHSA)

February 2025

Disclaimer



This slide deck is intended as a resource to assist HHSA providers with common topics related to their contractual requirements. This slide deck is not intended to be a comprehensive set of contract requirements nor legal advice. For a comprehensive description of your contractual requirements, review your contract language.

Provider Fundamentals



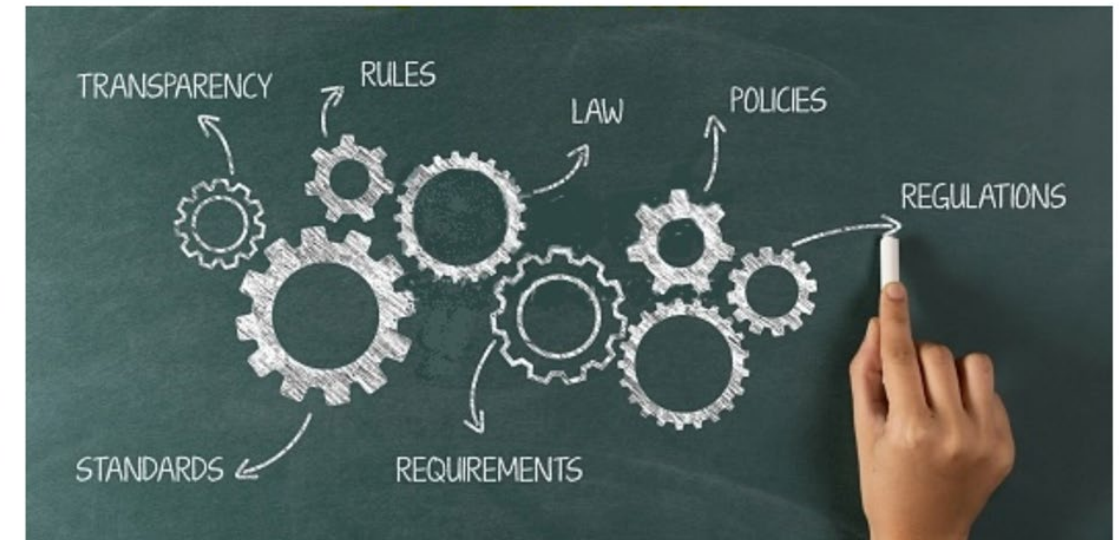
Who are we and what do we do?

- We are HHSA's Business Assurance & Compliance Department (BAC).
- We work to ensure that the County and its' providers are following local, State and Federal guidelines.
- We also serve as a privacy and confidentiality resource to the County and its' providers.
- **We've got your BAC!**
- To learn more about what we do, visit our website: www.cosdcompliance.org

Business Assurance & Compliance



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Business Assurance & Compliance (BAC) is responsible for coordinating compliance, privacy, and information security policies and programs. BAC ensures standards, provides training and monitors for risk to provide a consistent application throughout the Health and Human Services Agency (HHSA).

Provider Fundamentals



- These slides will be covering parts of your service agreement with the County that pertain to compliance, privacy, and confidentiality.
- These slides are a broad overview of these topics, so you should also visit BAC's website where we have resources specifically for Providers.
- Additional Provider resources can be found here:

[Provider Resources](#)

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Compliance Resources

BAC supports County of San Diego Health and Human Services Agency (HHSA) Programs in providing assurances for compliance with applicable federal, State and County regulations, assurances for effective and efficient service delivery, and thorough, objective investigation and resolution of potential compliance concerns.

Learn more about [compliance resources](#).

Provider Resources

BAC works closely with HHSA providers to ensure they understand and adhere to all relevant laws, rules, regulations, and requirements.

Learn more about [provider resources](#).

Employee Resources

BAC keeps HHSA staff apprised of the latest changes to compliance, privacy, and information security rules and best practices. One way BAC does this is by sending reminders to staff about common concerns and questions.

Learn more about [employee resources](#).

Provider Template



Common Compliance Sections:

Exclusion,
Debarment, and
Medi-Cal Checks
(Article 8.16)

Hotline Poster
(Article 8.17)

False Claims Act
(Article 8.18)

Code of Ethics
(Article 8.19)

Compliance
Program (Article
8.20)

Conflict of Interest
(Article 9.1)

Confidentiality
(Article 13.3)

Privacy and
Security Provisions
(Article 14)

Background Checks
(Article 16.21)

Background Checks (16.21)

Who am I required to run a background check on? What if I receive a result?

Background checks are required for all workforce members who work on the County contract, regardless of whether they will have access to client info (accountants, volunteers, interns, etc). A result on a background check does not automatically disqualify an individual from working on a County contract, but this should be handled on a case-by-case basis with provider accessing risk to operations.

What kind of documentation is good to keep?

In the event of an audit, the County may ask to see your policy for ordering and reviewing background checks, a record that they were completed and for whom, and who gave the review and signed off on the background checks.



Background Checks (16.21)

What is subsequent arrest notification (SAN)? Am I required to apply?

One option to meet the background check requirement is using SAN by applying for a Livescan Account with the Department of Justice. With SAN, you will receive a notification of an arrest within a week of the occurrence. With regular background checks, a result of an arrest may take months to appear on someone's record. Some organizations use vendors to complete background checks. **However, the County does not dictate to you or recommend how you should complete background checks.** The requirement is only for at-hire and annual checks.

More Background check resources:

[Background Check Requirements for HHSA Providers](#)

[Background Checks & Subsequent Arrest Notification FAQs](#)



Exclusion, Debarment, & Medi-Cal Checks

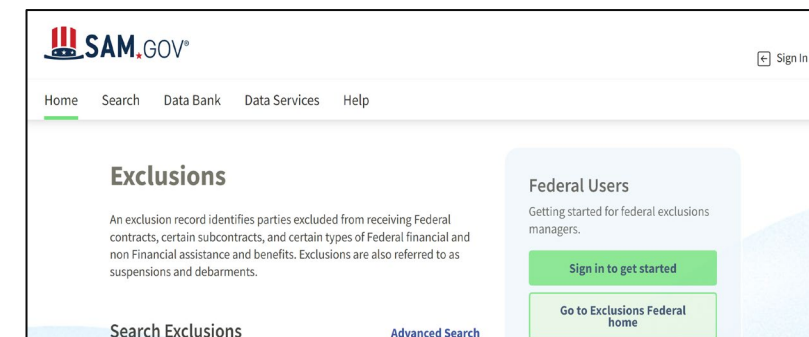
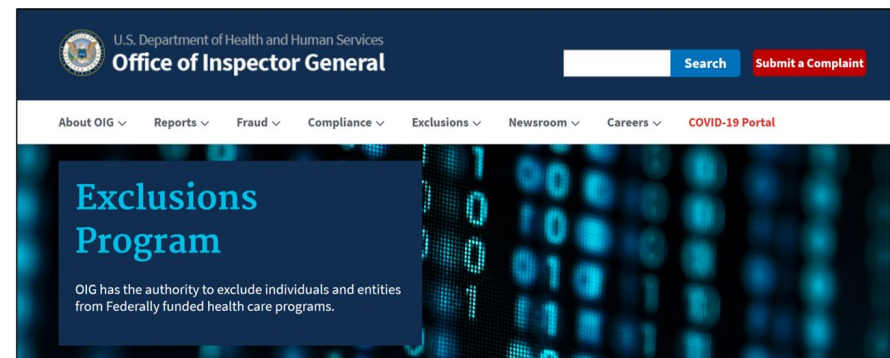
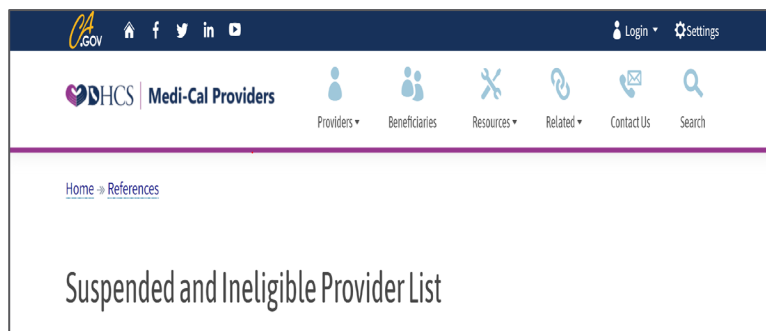


What is an EDM check?

The Exclusion, Debarment and Medi-Cal (EDM) check reviews 3 databases (2 Federal, 1 State) for individuals who are excluded from working on government contracts. As a provider, it is your responsibility to check these three databases monthly to see if any of your employees' names are in any of these databases.

Who gets checked?

Just like with background checks, this check applies to all employees working on County contracts, paid or unpaid.



Exclusion, Debarment, & Medi-Cal Checks



What kind of documentation is good to keep?

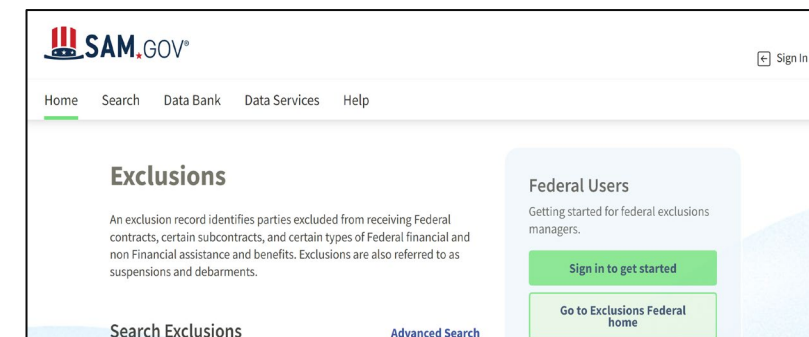
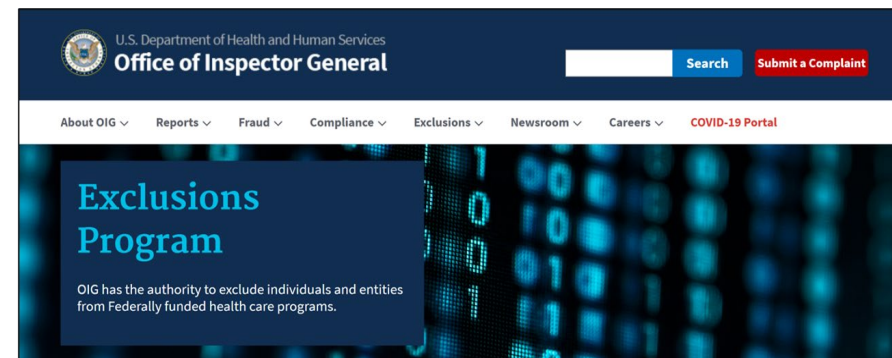
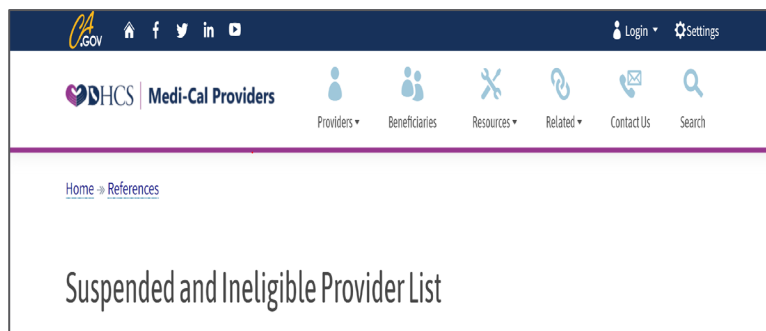
The County will not normally ask you to keep documentation of every EDM check you complete every month. However, the County may ask to see documentation or data to provide assurance that checks for all staff working on County contracts are cleared monthly. Please work with your COR to determine exactly what kind of documentation may be requested.

More EDM check resources:

[Exclusion, Debarment, & Medi-Cal Sanction Checks Requirements for HHSA Providers](#)

[Exclusion, Debarment, & Medi-Cal Sanction Checks Helpful Hints for HHSA Providers](#)

[Exclusion, Debarment & Medi-Cal Sanction Checks FAQ](#)



Privacy, Confidentiality, and Data Security (Article 14)



Annual Article 14 monitoring tool:

- Article 14, the Information Privacy and Security Provisions Article, is a collection of clauses that protect private data and information.
- It is the HHSA-approved set of provisions that encompass Federal and State requirements related to the Privacy and Security of Protected Information.
- It has three sections, including the privacy and security requirements established under the Health Insurance Portability and Accountability Act (HIPAA) as well as applicable State requirements.
- Know your State Agreement requirements (not just HIPAA).

More info about Article 14 and the requirements for handling data (how to store, transfer information, encryption, etc.) can be found here:

[HHSA: Priv and Sec. FAQs](#)

[HHSA: Article 14 and state agreements](#)

Privacy Incident Reporting



- As a Provider, you need to report violations of privacy requirements to the County.
- Breaches or suspected security incidents must be reported within one business day.
- While most reporting happens within 24 hours of the incident, some need to happen **immediately upon discovery (500 or more individuals involved)**.
- Reports may be accompanied by a Serious Incident Report to COR.

Access our Privacy and Security Incident Reporting system (PIRD), where you can submit these privacy reports here:

[Submit a Privacy Incident Report](#)

Please keep your COR informed of all privacy incidents as you submit a report to PIRD

The screenshot shows the "Privacy and Security Incident Reporting" (PIRD) system interface. At the top, there's a header for the "Health & Human Services Agency" with a search bar and navigation links: MENU, PROGRAMS, ALL SERVICES A-Z, FACILITIES, ADVISORY BOARDS, and CONTACT US. The main content area is titled "Privacy and Security Incident Reporting" and features two primary action buttons: "Report a New Incident" (orange) and "Update or View an Incident" (green). The "Report a New Incident" section includes a description: "Report a new privacy incident or information breach by submitting a Privacy Incident Report (PIR) to the Agency Compliance Office." and a warning: "* Do not include any client-identifying information." Below this is a "Report" button. The "Update or View an Incident" section includes a description: "Update or view the status of an existing Privacy Incident Report (PIR)." and input fields for "PIR#" and "Access ID #". Below these fields is a "Submit" button. At the bottom, there's a footer with assistance information: "Need assistance? Refer to the Desk Aid for report instructions. For questions not related to a privacy incident, please contact us by email at compliance.hhsa@sdcounty.ca.gov or by phone at (619) 338-2807."

False Claims Act (8.18)

- As a Provider, you are required to provide your staff with an annual training (at minimum) on False Claims.
- This training should, at minimum, discuss what a False Claim is, how to identify them, how to report them, and whistleblower protections.
- The County does not require a specific training format. The content is what is essential. If your organization does not have a training template, you may use the County's template. If you use the County's template, make sure that you switch out the County's logos with your organization's.
- For documentation's sake, keep a record of when the training was completed and who was in attendance. Please work with your COR if you have any questions.

The County's training template and more info about False Claims:

[HHSA False Claims Act Requirements](#)

[HHSA Provider Training: False Claims Act](#)



Code of Ethics / Conduct

- As a Provider, you are required to have a Code of Ethics / Conduct. If you do not have one, you may look at the County's Code of Conduct to develop as your own. If you decide to adopt the County's, make sure that you switch out the County's logos with your organization's.

The County's Code of Conduct and more info about the Code of Ethics requirements:



Hotline Posters (8.17)

- As a Provider, you are required to post hotline posters, which will let staff know where to call if they have an ethics complaint / report.
 - These posters can be posted in common work areas, or anywhere an employee can quickly access the info, such as:
 - break rooms
 - kitchens
 - meeting area
 - near the clock-in machine (if that is used)
 - company intranet or internet site
 - If working remotely, you can also email the posters out to staff or keep it in a shared folder.



Encrypted Email Tunnels, or TLS (Transport-layer Security)



- All emails containing County client information must be encrypted prior to sending.
- This is usually a one-click process that requires you pressing the 'encrypt' button before sending an email.
- To skip this step, you can establish an encryption tunnel between your organization and the County, so all emails sent between these two entities are automatically encrypted.
- If your organization does not currently have an encryption tunnel, and you are interested in setting one up, reach out to us. There is a 1-page form that can be filled out by your IT department to establish an encrypted connection.



How can we help?



- We are happy to provide targeted consultancy to your organization and can help with:
 - Walk throughs
 - Trainings for staff
 - Trainings for Privacy/Security Officers
 - Advise on Policies, Procedures, and Forms
- If you have any concerns that your organization's policies, procedures, and/or forms are in need of a refresh to meet the County's regulatory standards, please reach out to us early on. We are here to help!

More resources for compliance, information security, and privacy policies:

[Compliance](#)

[Information Security](#)

[Privacy](#)



Provider Fundamentals



More questions? Ask us!



Website:

www.cosdcompliance.org



Phone Number:

(619) 237-8571



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