



COLUMBIA UNIVERSITY
IRVING MEDICAL CENTER

Welcome to The Office of Faculty Affairs Forum

Wednesday, October 24, 2018



- * Partnering with the Office of Postdoctoral Affairs –
Ericka Peterson
- * U.S. Sanctions and CUIMC Visiting Scientists:
Understanding the Risks - **Michelle Avallone**
- * HIPAA Compliance Requirement for Visiting Officers -
Karen Pagliaro- Meyer
- * RAPS Upgrade Usage Tips – **Azeez Karim**
- * How are we doing with our SLA's?– **Dionida X. Ryce**
- * Important Reminders - **Dionida X. Ryce**



Partnering with the Office of Postdoctoral Affairs)



Ericka Peterson PhD, Director)

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Anna Womack PhD, Assistant Director)

Amanda Kelly, Office Manager (email for listserv))

OPA is located at 154 Haven Ave. Suite 313 '

www.postdocs.columbia.edu '

Notice of Appointment Renewal '

-) Together with HR and IT, working to provide Postdocs email notice 90, 60 and 30 days out; similar to notice DAs receive
-) Potential to alleviate visa issues with ISSO
-) Information also communicated at orientation
-) Setting expectations and taking responsibility



Use of Template Letters \$

- %Use of provided template letters from Provost/Faculty Affairs; Aware and accessible?
- %Why standardization is important
- %Add additional information regarding OPA to the current template; may alleviate some initial concerns and questions



Orientation/Welcome Packet

- Current in-person orientation runs every 6 weeks on alternating campuses; followed by social event:
 - MSD (late Nov/early Dec)
 - CUIMC (late Jan/early Feb)
- Other OPAs hold mandatory orientations; not possible based on scale and geographic limitations
- Request for “orientation packet”
 - Option 1 to create new OPA orientation page on website beyond what currently exists including links to other offices
 - Option 2 to create PDF file of relevant materials to be included with appointment letter



Revised Teaching Policy

- Postdoctoral appointees play a unique role at CU as their activities encompass both research and professional training (Annual Survey – 80% interested in teaching)
- University is committed to providing teaching opportunities to Postdocs and has established new Postdoctoral Teaching Guidelines to underscore this commitment while at the same time ensuring that such opportunities are offered and managed in accordance with all *applicable governmental regulations, funding agency requirements and University Policies*.
- These Guidelines cover only a Postdoc's full or partial responsibility for teaching a for-credit course at the University and they do not apply, for example, to teaching covered by the "Columbia University Guidelines for Incidental Career Development Activities for Postdoctoral Research Scientists, Scholars and Fellows" dated August 25, 2016.
- Postdocs who plan to participate in teaching activities must obtain the required approvals using the Postdoc Teaching Approval Form, with all required signatures, prior to commencement of the intended activity.
- Teaching is an integral part of the Postdoc training and necessary for career development as fewer strictly research positions are available; on target with our peers. Encourage!
- Expected by end of the year



Unionization Update

- Bargaining unit (n=2,057); of the 1,068 votes cast, 729 voted yes, 339 voted no
- Postdoctoral Research Scientists/Scholars
- Postdoctoral Research Fellows
- Associate Research Scientists/Scholars
- All campuses included
- Bargaining has not commenced
- Postdoctoral Clinical Fellows and Postdoctoral Residency Fellows are excluded



How can we partner with you?



COLUMBIA UNIVERSITY
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U.S. SANCTIONS AND CUMC VISITING SCIENTISTS: UNDERSTANDING THE RISKS

Michelle Avallone
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Research Compliance and Training
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October 24, 2018

SANCTIONS OVERVIEW

- U.S. Sanctions Programs
 - Administered by Treasury Dept.'s Office of Foreign Assets Control (OFAC)
 - Two types of sanctions:
 - Comprehensive: rule of thumb = everything is prohibited
 - Limited (or Targeted): transactions with certain "specially designated nationals" (SDNs) prohibited
 - SDNs: individuals or entities
 - Rule of thumb = all transactions with SDNs are prohibited
- Sanctions are dynamic
- Keep up-to-date
 - OFAC's website:
<https://www.treasury.gov/resource-center/sanctions/Programs/Pages/Programs.aspx>
 - RCT Sanctions website:
<https://research.columbia.edu/content/economic-sanctions>

CURRENT COUNTRY-BASED SANCTIONS PROGRAMS

Comprehensive

- Cuba
- Iran
- North Korea
- Syria
- Crimea Region of the Ukraine

Limited / Targeted

- Balkans
- Belarus
- Burundi
- Central African Republic
- Darfur region
- Democratic Republic of the Congo
- Iraq
- Lebanon
- Libya
- Somalia
- Sudan
- South Sudan
- Russia
- Venezuela
- Yemen
- Zimbabwe

COMPREHENSIVELY SANCTIONED COUNTRIES



WHAT IS PROHIBITED?

- Restrictions vary among sanctions programs, but may include–
 - Participation in/ attendance at academic conferences in comprehensively sanctioned countries (e.g., Iran)
 - Uncompensated, academic interviews with sanctioned parties
 - Entering into contracts, agreements or research collaborations with universities or researchers in comprehensively sanctioned countries or with sanctioned parties
 - Making or receiving payments to comprehensively sanctioned countries or to sanctioned parties
 - Exporting or importing items to or from comprehensively sanctioned countries or sanctioned parties
 - Travel (e.g., Cuba, North Korea)

OTHER “RESTRICTED PARTY” LISTS

- It’s not just OFAC – other federal agencies maintain “Restricted Party” Lists
 - e.g., Commerce Dept., State Dept., HHS, EPA
- Be aware of “restricted universities”
 - e.g., China, comprehensively sanctioned countries
 - “Restricted Universities” List on RCT Website:
<https://research.columbia.edu/content/economic-sanctions>
- Restrictions may limit Columbia’s ability to engage with individuals affiliated with a restricted university, regardless of location
 - Research collaborations
 - Conference attendance
 - Professional trainings/ workshops
 - *Visiting scholars/scientists/officers*

RCT SANCTIONS WEBPAGE

Sanctions and Restricted Party Lists

Expand all

Collapse all

➤ OFAC Sanctions Programs

▼ [Other U.S. Restricted Party Lists](#)

In addition to OFAC, other U.S. Government Agencies maintain Restricted Party Lists. Entities and individuals who appear on these lists are “restricted parties” and certain transactions with these restricted parties are prohibited. It is important to check these Restricted Party Lists prior to engaging in a transaction. Columbia University and its personnel are prohibited from engaging in certain transactions with restricted parties without prior government authorization to do so.

Engaging in prohibited transactions with parties included on Restricted Party Lists can result in significant civil and criminal penalties, including fines, debarment, and imprisonment.

The Office of Research Compliance and Training has compiled a list of restricted universities, colleges, schools and research institutions. You can use your Columbia credentials to access the list [here](#).

Although RCT updates the list periodically it may not include entities recently added to federal restricted party lists. For access to the complete and most up-to-date lists, please use Visual Compliance (see below) or search the Commerce Department’s Consolidated Screening List [↗](#)

If the entity or individual with whom you intend to deal is a restricted party, contact Columbia’s [Research Export Control Officer](#).

RESTRICTED UNIVERSITIES - EXAMPLES

IRAN

- Amir Kabir University
- Baghyatollah Medical Sciences University
- Imam Hoseyn Comprehensive University
- Ferdowsi University of Mashad
- Imam Hossein University
- Iran University of Science & Technology
- Isfahan University of Technology
- Islamic Azad University
- Khajeh Nassir-al-Deentoosi University
- Malek Ashtar University
- Shahid Beheshti University
- Shahid Sattari Air Force University
- Sharif University of Technology
- Shiraz University
- Tarbiat Modares University
- University of Tehran

PAKISTAN

- Quaid-i-Azam University

ISRAEL

- Ben Gurion University

CHINA

- Beijing University of Aeronautics & Astronautics (aka Beihang University)
- National University of Defense Technology
- Northwestern Polytechnical University
- Sichuan University
- University of Electronic Science & Technology of China

NORTH KOREA

- Kanggye Defense College
- Kim Chaek University of Technology
- Kim Il Sung University
- Pyongyang Technical University
- University of Chemical Industry

SYRIA

- Damascus University
- Higher Institute for Applied Science Technology
- University of Aleppo

VISITING SCHOLARS/SCIENTISTS/OFFICERS

- Important to identify visiting scholars/scientists/officers from
 - Comprehensively sanctioned countries
 - Cuba, Iran, North Korea, Syria, Crimea Region
 - Restricted universities
- Case-by-case review required
 - Escalate to Office of Research Compliance & Training (RCT)
 - RCT will reach out to sponsoring faculty member
 - Risks may be manageable with proper planning
 - Additional approvals may be required

RESTRICTED PARTY SCREENING (RPS)

- *Visual Compliance* - online screening software
 - University-wide license
 - Comprehensive & updated lists
 - “Dynamic screening”
 - Audit trail
- ISSO uses *Visual Compliance* for screening
- Best to identify and escalate *prior to sending invitation letter*
- Contact Research Compliance & Training to open *Visual Compliance* account

VISUAL COMPLIANCE

The screenshot displays the 'Visual Compliance' web application interface, titled 'RESEARCH EDITION' and 'eCustoms'. The user is logged in as 'MICHELLE AVALLONE, IVY - COLUMBIA UNIVERSITY'. The interface is divided into several sections:

- Navigation Bar:** Includes tabs for 'CCL/ECCN', 'ITAR/USML', 'Inventory', 'RPS', 'Regulations', 'Schedule B', 'Resources', and 'Home'. Below this are three main sections: 'RESTRICTED PARTY SCREENING', 'AUTHORITIES CONSULTED', and 'SANCTION PROGRAMS'.
- Individual and Company Screening:** A form with fields for Name, Company, Address, City, State, and Country. It also includes a Comment field, search options (Exact, Phonic, Fuzzy Level), and checkboxes for Stemming, Thesaurus, Field Specific, and Remove business words. A 'SCREEN' button is present.
- Blocked Foreign Nationals by Country:** A section for displaying a checklist of blocked foreign nationals in a given country, with a dropdown for 'Select country for checklist ...' and a 'GO' button.
- Blocked Entities and Fugitive Lists:** A section for displaying a checklist of entities on a selected government list, with a dropdown for 'Select list to display ...' and a 'GO' button.
- Footer:** Contains 'TERMS OF USE', 'CONTACT US', 'LOG OFF', 'E-MAIL US', 'Last Update: DEC 6 2013', 'Copyright © 1981-2013 eCustoms Inc.', and icons for 'RPS Manager', 'Training', and 'Help'.

Individual and Company Screening

Name:

Company:

Address:

City: **State:**

Country:

Comment:

Exact Phonic Fuzzy Level

Stemming Thesaurus Field Specific

Remove business words

ECCN for country controls check:

Export Sanctions GSA

Police PEP/OIG International [Reset Defaults](#)

GSA data is updated in full every business day direct from SAM/EPLS.
Fuzzy searches including GSA are automatically limited to level 2.
Business endings is not selectable when already set as your profile default.
Fuzzy or phonic search with thesaurus often produces erratic results.

Blocked Foreign Nationals by Country

Display a checklist of blocked foreign nationals in a given country:

Many foreign nationals are not identified by country in the official sources.
This query searches the Export, Sanction, and International list groups.

Blocked Entities and Fugitive Lists

Display a checklist of entities on the selected government list:

SDN not available here on account of size, please use PDF instead.

GSA data is updated in full every business day direct from SAM/EPLS.

[RPS Changes](#) [GSA Changes](#) [Blocked Vessels](#) [IAEA Facilities](#) [Risk Country](#)

The method of queuing, validating, submitting and processing RPS queries used in Visual Compliance is protected under:
U.S. Patent 8,484,659 - Distributed processing of binary objects via message queues including a failover safeguard.

[TERMS OF USE](#) [CONTACT US](#) [LOG OFF](#) [E-MAIL US](#) Last Update: DEC 6 2013
Copyright © 1981-2013 eCustoms Inc.

[RPS Manager](#) [Training](#) [Help](#)

KEY TAKE-AWAYS

- Contact RCT when you are aware of -
 - Any activities involving **comprehensively** sanctioned countries
 - **Cuba, Iran, North Korea, Syria, Crimea Region**
 - Includes inviting visiting scholars/scientists/officers from comprehensively sanctioned countries
 - Potential visiting scholar/scientist/officer from restricted university
 - Best if identified and escalated for review before invitation letter is sent
- RCT will help you open a *Visual Compliance* account and put in place appropriate procedures/ trainings

QUESTIONS?

- Contact RCT if you have any questions

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Research Compliance and Training (RCT):

<https://research.columbia.edu/content/office-research-compliance-and-training>

RCT Sanctions webpage:

<https://research.columbia.edu/content/economic-sanctions>

Sanctions, Export Controls and More!

WHAT WE DO

Advice and Consultations

We are available to consult and provide advice on many research compliance topics.

Conflict of Interest

A conflict of interest (COI) exists where a researcher's outside interests or activities could improperly affect, or give the appearance of affecting, the researcher's activities at Columbia.

Export Controls

U.S. laws and regulations that restrict the shipment or transfer of certain information, commodities, services, and other items (including software) for reasons of foreign policy and national security, as determined by the U.S. government.

ReaDI Program

A program designed to provide several tools to ensure robust data and research integrity.

Unmanned Aerial Vehicle (Drones)

The FAA regulates the use of unmanned aerial vehicles ("UAVs", a.k.a. drones) within the U.S. This includes UAVs used in Columbia research. Columbia University also restricts the use of UAVs on Columbia campus.

Anti-Boycott

U.S. federal regulations prohibit the University or its personnel from agreeing to participate in any international boycott not supported by the U.S. government.

Data Management and Security

Valuable information regarding research data at Columbia, including management, security, storage and ownership of data.

Fiscal Responsibility

Columbia researchers and administrators are expected to exercise the utmost responsibility in managing research funds provided to the University, including issues related to compensation and effort reporting.

Research Misconduct

University policies and procedures that define misconduct, outline the process for investigating allegations, and explain the consequences of committing misconduct.

Anti-Corruption

Columbia University policy prohibits the unlawful bribery of government officials or private persons in connection with University activities.

Economic Sanctions

Certain entities and individuals, both domestic and foreign, are subject to sanctions or other restrictions under U.S. law that may restrict researchers' ability to engage in a project, collaboration or other transaction.

International Research

To help researchers plan for risks and requirements that may be associated with international projects, the University has established Risk Management Procedures.

Training

The University's comprehensive compliance training programs ensure that those involved in research are aware of what is expected and required of them.



Columbia University Compliance Hotline

866-627-3768

compliance.columbia.edu/hotline

Anonymous Reporting Available

24 hours a day / 7 days a week

Operated by a third-party provider

Jeff Kestler
University Compliance
Officer
jk@gc.columbia.edu

Stephanie Barber
Compliance Director
sb@gc.columbia.edu



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HIPAA Compliance

Faculty Affairs Forum

Wednesday, October 24, 2018

In the News

NewYork-Presbyterian Hospital to pay \$2.2 million for 'egregious disclosure' of PHI in HIPAA violation

NYP's actions while filming the TV show 'NY Med' blatantly violated HIPAA rules, said Jocelyn Samuels of the Office for Civil Rights.

\$999,000 in HIPAA Penalties for Three Hospitals for Boston Med HIPAA Violations

Anthem's \$16M HIPAA settlement largest in history

Written by Morgan Haefner | October 16, 2018 | [Print](#) | [Email](#)

MD Anderson to pay \$4.3 million settlement with OCR for HIPAA violations

The cancer research center argued it didn't need to encrypt its data as it was for research, but a federal judge upheld the OCR fine.

By [Jessica Davis](#) | June 19, 2018 | 03:12 PM



HIPAA Definition of a Breach

A HIPAA breach is defined as:

- the acquisition, access, use, or disclosure of Protected Health Information in a manner not permitted which compromises the security or privacy of the Protected Health Information (PHI)
 1. access to, or use or disclosure of **unsecured** PHI;
 2. access, use or disclosure that violates the “Privacy Rule” (i.e., Subpart E of 45 C.F.R. 164);
 3. no exceptions that apply:
 - encryption, unreadable, secure, a covered entity etc.



What is Protected Health Information (PHI)

Individually Identifiable Health Information:

(1) Except as provided in paragraph (2) of this definition, that is:

- (i) Transmitted by electronic media;
- (ii) Maintained in electronic media; or
- (iii) Transmitted or maintained in any other form or medium.

(2) *Protected Health Information* excludes individually identifiable health information in:

- (i) Education records covered by the Family Educational Rights and Privacy Act, as amended, 20 U.S.C. 1232g;
- (ii) Records described at 20 U.S.C. 1232g(a)(4)(B)(iv); and
- (iii) Employment records held by a covered entity in its role as employer.”



OCR Financial Penalties for HIPAA Violations (2008-2018)

Year	Settlements and CMPs	Total Fines
2018	1	\$24,947,000
2017	1	\$19,393,000
2016	2	\$23,505,300
2015	3	\$6,193,400
2014	6	\$7,940,220
2013	6	\$3,740,780
2012	6	\$4,850,000
2011	6	\$6,165,500
2010	13	\$1,035,000
2009	10	\$2,250,000
2008	7	\$100,000
Total	59	\$100,120,200

Largest Ever Penalties for HIPAA Violations

Year	Covered Entity	Amount	Settlement/CMP
2018	Anthem Inc	\$16,000,000	Settlement
2016	Advocate Health Care Network	\$6,550,000	Settlement
2017	Memorial Healthcare System	\$5,500,000	Settlement
2014	New York and Presbyterian Hospital and Columbia University	\$4,800,000	Settlement
2018	University of Texas MD Anderson Cancer Center	\$4,348,000	Civil Monetary Penalty
2011	Cignet Health of Prince George's County	\$4,300,000	Civil Monetary Penalty
2016	Feinstein Institute for Medical Research	\$3,900,000	Settlement
2018	Fresenius Medical Care North America	\$3,500,000	Settlement
2015	Triple S Management Corporation	\$3,500,000	Settlement
2017	Children's Medical Center of Dallas	\$3,200,000	Civil Monetary Penalty



University of Texas MD Anderson Cancer Center

- **4th largest settlement**
- **The devices contained the protected health data of 33,500 patients**
- **Incidents occurred in 2012 and 2013**
- **Data stored on devices were research data**



OCR Settlements 2017 (over \$19 million)

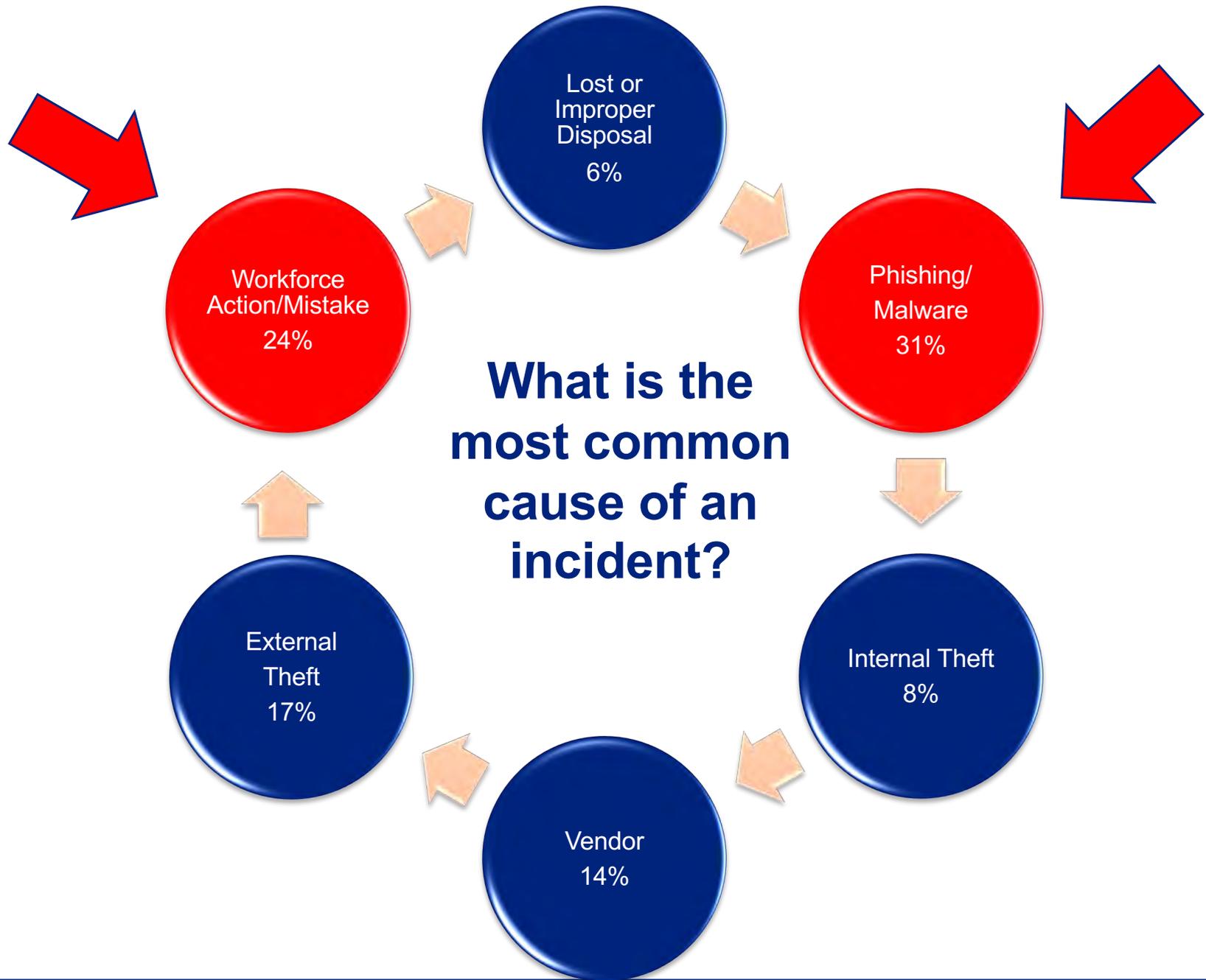
	<u>Name</u>	<u>Issue</u>	<u>Fine</u>	<u>Date</u>
1.	<u>Presence Health</u>	Failure to file report of unsecured protected health information 836 individuals	\$475,000	1/9/2017
2.	<u>MAPFRE Life Insurance - Puerto Rico</u>	Unencrypted USB drive 2,209 individuals	\$2.2 mil	1/18/2017
3.	<u>Children's Medical Center - Dallas</u>	Multiple unencrypted devices 3,800 individuals	\$3.2 mil	2/1/2017
4.	<u>Memorial Healthcare System Florida</u>	Audit controls - failure to terminate user accounts impermissibly accessed 115,143 individuals	\$5.5 mil	2/16/2017
5.	<u>Metro Community Provider Network (MCPN)</u>	Lack of security management process to safeguard ePHI 3,200 individuals	\$400,000	4/12/2017
6.	<u>The Center for Children's Digestive Health (CCDH)</u>	Disclosure of PHI to business associate FileFax, Inc. No BAA signed 10,728 individuals	\$31,000	4/20/2017
7.	<u>CardioNet</u>	Impermissible disclosure of unsecured PHI, Stolen unencrypted laptop 1,391 individuals	\$2.5 mil	4/24/2017
8.	<u>Memorial Hermann Health System (MHHS)</u>	Unauthorized disclosure to media without patient authorization 1 individual	\$2.4 mil	5/10/2017
9.	<u>St. Luke's-Roosevelt Hospital Center, Inc</u>	Unauthorized disclosure of PHI to patient's employer (HIV) 1 individual	\$387K	5/23/2017
10.	<u>21st Century Oncology</u>	Impermissible access of network database that included patient information – files purchased by FBI informant 2,213,597 individuals	\$2.3 mil	12/28/2017

OCR Settlements – Year to Date 2018

	<u>Name</u>	<u>Issue</u>	<u>Fine</u>	<u>Date</u>
1.	<u>Fresenius Medical Care</u>	5 separate breach reports 230,000 individuals	\$3.5 mil	2/1/2018
2.	<u>Filefax</u>	Sale of PHI 2,150 individuals	\$100 K	2/13/2018
3.	<u>MD Anderson</u>	Theft of unencrypted devices containing PHI 33,500 individuals	\$4.3 mil	6/18/2018

Resolution Agreements





Visiting faculty, staff and students

- Must sign Confidentiality Agreement
- May only access clinical electronic information for an IRB protocol where they're listed as approved personnel
- May not access clinical information without business reason – treatment, payment or healthcare operations
- Cannot remove (take) patient or research information



Visiting faculty, staff and students

- HIPAA training is mandatory and is assigned within a week of UNI creation
- Forward the UNI@columbia.edu alias account to the UNI@cumc.columbia.edu email account
- Before the visiting faculty member completes their visit:
 - verify that they have returned all patient or research information (e.g., USBs, paper documents and anything stored on personal devices)
 - All access to information systems has been disabled and UNI has been terminated/inactivated



HIPAA Privacy Guidance

**PLEASE
ENSURE THAT
THIS DOOR
IS LOCKED
BEFORE YOU
LEAVE!**

Assure that doors & cabinets are locked/secured



Do not remove protected health information from CUIMC



No photos and/or posting on Social Media



Do not take photos or videos without authorization



Avoid unintentional disclosures

- Do not discuss patient information in public



Do not use text messaging for patient information



Report if you think you have witnessed a privacy breach

Unauthorized Access of Medical Information

- Workforce members are not permitted to access medical information of anyone, including friends, family members, coworkers or VIP patients without a business reason
- **Accessing patient information without a business reason will result in disciplinary action**
- Patient has the right to request audit of their record if unauthorized access is alleged
- Audit reports identify unusual access patterns



HIPAA Information Security Guidance

- **Never** share your password
- Sign-off from an application after use
- **Encrypt all electronic devices**
- Think before you click! Phishing mails
- Promptly report loss or theft of electronic devices, improper use or privacy breach
- Use **#encrypt** on subject line for email messages with PHI that will be sent to an outside email address (@cumc.columbia.edu & @NYP.org)
- Do **not** use personal email accounts for Columbia business
- Do not use Cloud storage that has not been registered in RSAM / approved by IT Security (Dropbox is **not** approved)
- Register **all information systems** with the Information Security Office, regardless of whether they contain ePHI <https://rsam.cumc.columbia.edu>



KEEP YOUR FRIENDS CLOSE & YOUR PASSWORDS CLOSER

By LastPass



73%

most likely won't reset their password after sharing it with someone.

Is sharing passwords risky?

27% say NO

70% say that's because they only share with people they trust.



73% say YES

What About the Workplace?



are more likely to share work passwords than personal passwords.

Why do we share work passwords?



In case of an emergency



It's a shared team account



To delegate work to others



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Encryption

ENCRYPT EVERYTHING

- **USBs**
- Laptops
- Desktops
- Personal computers
- Cell phones
- iPads & tablets
- External hard drives
- **#encrypt** on subject line for email sent outside of CUIMC or NYP



Why is Encryption so important?

In accordance with the HITECH Act Breach Notification Rule

- Encrypting Protected Health Information is considered a safe harbor provision of the Breach Notification Rule
- **If Protected Health Information is encrypted then Breach Notification is not required following an impermissible use or disclosure of patient information**



18 Identifiers as defined by the Privacy Rule

1. Name
 2. Geographic Location (**including city, state, zip**)
 - 3. Elements of Dates (except year)**
 4. Telephone Number
 5. Fax Number
 6. E-mail Address
 7. Social Security Number (including partial numbers derived from SSN)
 8. Medical Record or Prescription Numbers
 9. Health Plan Beneficiary Number
 10. Account Number
 11. Certificate/license Number
 12. VIN and Serial Numbers, License Plate Number
 13. Device identifiers, serial numbers
 14. Web URLs
 15. IP Address Numbers
 16. Biometric Identifiers (finger prints)
 17. Full face, comparable photo images (**i.e. unique photo**)
 - 18. Unique Identifying numbers (i.e. coded data)**
-



Question

What do you think is the most significant threat at the medical center?

- A. Cyber attack or malware
- B. A malicious internal threat (faculty, staff or student)
- C. Workforce member mistake
- D. Vendors accessing patient information



Answer

Workforce member mistake is the most significant threat

- human error / lack of training (i.e. phishing)
- failing to encrypt data
- failing to destroy or properly dispose of data
- failing to proper authorization to release data
- sending patient information (email, paper, fax) to unintended recipient



Frequently Asked Questions

- Text Messaging
- Case Reports
- Photos / Images
- Authorizations
- Incidental Uses and Disclosures
- Click through agreements – efax, batch emails, etc.
- Covered Entity / OHCA / Hybrid Entity



Although we sometimes feel like the
HIPAA police, we are here to help!



Privacy Questions: HIPAA@cumc.columbia.edu

Security Questions: security@cumc.columbia.edu



Karen Pagliaro-Meyer
Chief Privacy Officer
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Office: 212-305-7315
Cell: 646-596-0264



RAPS Upgrade Usage Tips

Usage Tips:

- “Applicant Status”, can only be changed by the two user groups below:
 “Applicant Reviewer” and “VP/Dean/Director”
- “Hiring Proposal”, Once the applicant is at the “Selectee” status, only the two user groups below can access the Hiring Proposal:
 “Department Administrator” and “VP/Dean/Director”
- “Search Committee Member”: the user name for the individual should always be their UNI.



RAPS Upgrade Usage Tips

Links for administrators:

- New RAPS site:

<https://pa334.peopleadmin.com/hr/>

- Previous RAPS site:

<https://academicjobs.columbia.edu/userfiles/jsp/shared/frameset/Frameset.jsp?time=1540236387684>

Reminders:

- The previous RAPS version will continue to be active in order for previous searches to be completed. All new postings must be conducted in the new version.
 - No data from the previous RAPS version will be migrated to the new version.
 - Applicants will have to make a new profile in order to apply to a position in the new version of RAPS.
-



OFA Service Level

Dates: June 13, 2018 – Sept. 28, 2018

Transactions	Expected total # business days for approval	Actual # business days for approval
New Hires	3	2.30
New Hires with NYP Appointment	6	6
LOA	12 (10)*	12
LOA Extension	26 (24)*	11
Postdoctoral Extension	13 (10)*	5.8
Visitor Registration Form	10	5
Position Classification Form	5	3
Lateral Transfer (PAF)	2	1
Contract Renewal (PAF)	2	1
Rehire (PAFs)	2	1
Termination (PAFs)	2	1

Note: the above timeframes assume that transactions have been submitted with all required information and there is no need for corrections.

*The figures in the parentheses represent the number of days required for Provost Office review and approval.



Important Reminders/Notices

- **Notification of LON, Termination and LOA of International Personnel**
ISSO must receive notification of Terminations and Resignations of international personnel via the termination form. When an LON is issued to an international personnel member, ISSO should be copied on the executed version. Prior to placing a foreign national on a leave of absence, departments must consult ISSO on the feasibility of doing so.
- **Offer Letter Templates** - Offer Letters templates for Officers of Research (PDRF, PDRS and ARS) must be used at all times. The Postdoc offer letter templates that were on the postdoc affairs website have been removed and are in the process of being revised. Once the new ones are made available, you will be notified and will be required to use them going forward.
- **Staff Associate Postings** — Requirement for the Staff Associate position cannot exceed the standard BA/BS plus 4yrs of experience when the job is posted.
- **Revised (fillable) Short Term Visitor Form** These are now available at <http://www.cumc.columbia.edu/hr/policies-procedures> and must be used effective immediately. As of November 1st all visitor applications submitted on the old form will be returned.



Important Reminders/Notices

- **Short Term Visitor Application Workflow Management System** — OFA and CUMC-HR are piloting a workflow management system for the Short Term Visitor Application process. The project is being managed by Wayne Tang in the dept of Surgery and there are 7 departments participating in the pilot phase. We are hoping to soon make this available for widespread use.
- **Updated Guidelines for Faculty Promotion on the “at CUMC” Track** - The promotion guidelines for faculty in the “at CUMC track” have been revised. Key changes are the addition of a personal statement to be developed by the faculty candidate, and defined criteria for referee letters. The referee letter template has been updated online as PDF, and the MS Word version will soon follow.



QUESTIONS

