

HHS Office for Civil Rights in Action



July 12, 2016 OCR's Phase Two HIPAA Audits Have Begun

Phase Two of OCR's HIPAA audit program, which officially began a couple of months ago, has officially kicked into high gear. Selected covered entities have now received notification letters regarding their inclusion in the desk audit portion of the audit program. Letters were delivered on Monday, July 11, 2016 via email to 167 health plans, health care providers and health care clearinghouses (covered entities). The desk audits will examine the selected entities' compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy, Security, and Breach Notification Rules.

The desk audits are focused examinations of documentation of entity compliance with certain requirements of the HIPAA Rules (see table below). OCR selected these provisions for focus during the desk audits because our pilot audits, as well as our enforcement activities, have surfaced these provisions as frequent areas of noncompliance. Entities received two email communications, which were sent to the contact information confirmed by the entity during the pre-audit phase of the program. Nevertheless, these emails may be incorrectly classified as spam in the recipient's email service. Covered entities should monitor their spam filtering and junk mail folders for emails from OSOCRAudit@hhs.gov. One e-mail includes a notification letter providing instructions for responding to the desk audit document request, the timeline for response, and a unique link for each organization to submit documents via OCR's secure online portal. A second email contains an additional request to provide a listing of the entity's business associates and also provides information about an upcoming webinar, where OCR will explain the desk audit process for auditees and take their questions. Entities have 10 business days, until July 22, 2016, to respond to the document requests. Desk audits of business associates will follow this fall.

For more information, see <http://www.hhs.gov/hipaa/for-professionals/compliance-enforcement/audit/index.html>.

Requirements Selected for Desk Audit Review

Privacy Rule	Notice of Privacy Practices & Content Requirements [§164.520(a)(1) & (b)(1)]
	Provision of Notice – Electronic Notice [§164.520(c)(3)]
	Right to Access [§164.524(a)(1), (b)(1), (b)(2), (c)(2), (c)(3), (c)(4), (d)(1), (d)(3)]
Breach Notification Rule	Timeliness of Notification [§164.404(b)]
	Content of Notification [§164.404(c)(1)]
Security Rule	Security Management Process -- Risk Analysis [§164.308(a)(1)(ii)(A)]
	Security Management Process -- Risk Management [§164.308(a)(1)(ii)(B)]

To learn more about non-discrimination and health information privacy laws, your civil rights, and privacy rights in health care and human service settings, and to find information on filing a complaint, visit us at <http://www.hhs.gov/ocr/>

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This email is being sent to you from the OCR-Security-List listserv, operated by the Office for Civil Rights (OCR) in the US Department of Health and Human Services.

This is an announce-only list, a resource to distribute information about the HIPAA Privacy and Security Rules. For additional information on a wide range of topics about the Privacy and Security Rules, please visit the OCR Privacy website at <http://www.hhs.gov/ocr/privacy/index.html>. You can also call the OCR Privacy toll-free phone line at (866) 627-7748. Information about OCR's civil rights authorities and responsibilities can be found on the OCR home page at <http://www.hhs.gov/ocr/office/index.html>.

If you believe that a person or organization covered by the Privacy and Security Rules (a "covered entity") violated your health information privacy rights or otherwise violated the Privacy or Security Rules, you may file a complaint with OCR. For additional information about how to file a complaint, visit OCR's web page on filing complaints at <http://www.hhs.gov/ocr/privacy/hipaa/complaints/index.html>.

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