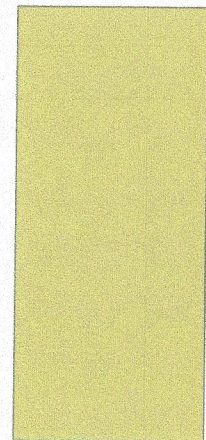


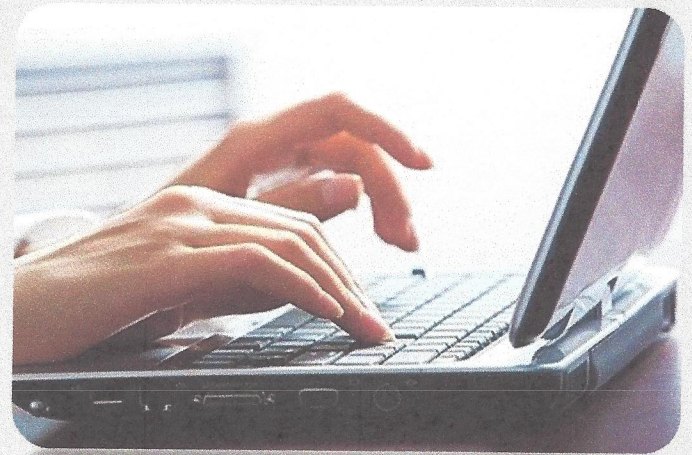
# 4-STEP PROGRAM TO HIPAA COMPLIANCE

BROTHERS, HAWN & COUGHLIN, LLP



# AWARENESS

- Understand the new rules.
- Perform a “HIPAA gap” analysis
  - Look at in-house policies
  - Do an acceptable-use policy of computers in your organization
  - What are grounds for termination?
- Prioritize actions to achieve compliance
  - Got to's, needs to's and nice to's



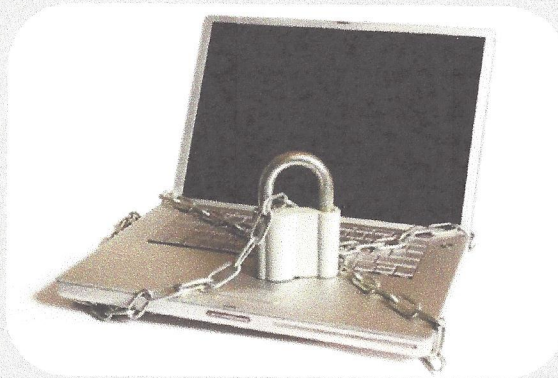
# AWARENESS

- Implement privacy & security initiatives
  - Administrative, technical and physical controls
    - Physical safeguard: Is anybody at the front, asking who they are, why they are there
      - Keeping physical log of who's there, and why
    - Administrative controls
      - Acceptable use policy of computers
      - SANS.org has education and material about HIPPA rules, templates, sharing group for best practices on privacy and security development
    - Technical controls
      - Meeting with network administrator, listen to them about why they see and fee feel is going on
      - Social networking sites are often griped about as a time
  - Review/update annually
    - Look at polices and work with consultant to see if they're up to date or if new rules have been established

# PREPARATION

- Perform a PHI data risk analysis
  - Hire out if you don't know how to, lawyers, consultants
  - Look at state government for example security plans
- Update BA Agreements
- Explore cyber liability insurance
  - Transfer the cost of remediating a data breach
  - Major insurers have cyber liability coverage
    - AIG, Zurich (A-Z)
    - Legal defense, breach notification costs, credit monitoring (things you offer people who have been victims)
    - Benefit: they'll do a HIPPA privacy and security assessment for you!
    - Can give discount if you have a response plan in place

# PREPARATION



- Develop/test an incident response plan
  - Document which pulls together the actions the organization will take when breach is caught
  - Who is on the response team (IT, HR, PR, account management)? Who calls the lawyer, and when?
  - Goes through scenarios (what happens if someone's laptop gets stolen?) to anticipate before a breach happens

# RESOURCES AND WEBSITES

Oregon HIPAA Forum	<a href="http://www.oregonhipaaforum.org">http://www.oregonhipaaforum.org</a>
Oregon Health Authority	<a href="http://public.health.oregon.gov/DISEASES_CONDITIONS/COMMUNICABLE_DISEASE/LOCAL_HEALTH_DEPARTMENTS/Pages/hipaa.aspx">http://public.health.oregon.gov/DISEASES_CONDITIONS/COMMUNICABLE_DISEASE/LOCAL_HEALTH_DEPARTMENTS/Pages/hipaa.aspx</a>
Office for Civil Rights	<a href="http://www.hhs.gov/ocr/hipaa">http://www.hhs.gov/ocr/hipaa</a>
Dept. Health and Human Services	<a href="http://www.hhs.gov/hipaafaq/use/index.html">http://www.hhs.gov/hipaafaq/use/index.html</a>

# RESPONSE TO BREACH

- Anatomy of a data breach
- Roles
  - Who will take various roles?
    - Communication to patient
    - Communication to OCR
    - Communication to technology staff/consultant
    - Communication to attorneys
- Best practices