

BASIC HIPAA COMPLIANCE CHECKLIST

HIPAA COMPLIANCE MEASURE	☐
The entire facility is HIPAA compliant	
Have a written consent form for disclosure of individual's health information	
Facility access is limited; facility is secure	
Patient files are only accessible to those who need clearance	
Printed medical records kept locked away and safe out of public view	
Notice of privacy practices posted	
All third-party access is restricted	
Official privacy officer has been designated	
Employees & business associates are aware of & in compliance with HIPAA rules	
Compliance training is provided to employees upon hiring & on a regular basis	
Strict social media usage policies at work	
Each individual has a unique 10 digit national provider identifier (NPI)	
Type 1 NPI for individuals, type 2 NPI for organizations	
All covered entities in practice have NPI	
Employees and business associates understand what practice must and may do under privacy rules	
Computer & device usage is compliant	
Activity audit rules in place	
Automatic logoff set up for all private files	
Computer access is restricted to those who need it, and access is frequently reviewed and updated	
Workstations have a protective surrounding and are not visible from unrestricted areas	

Tools in place for encryption and decryption of private information	
EHR is modern and compatible with latest software	
Frequent inventory of mobile hardware	
Texting - both parties have encryption programs that allow confidential information to be safely texted	
ePHI usage is compliant	
Policies in place to govern how ePHI is removed from mobile device before re-used	
Mechanism in place to authenticate ePHI	
Keep record of all uses and disclosures of ePHI	
Performed risk analysis for ePHI	
Breach safeguards & procedures in place	
Appropriate response planned in the case of accidental or purposeful release of private information	
Risk management policy in place	
Contingency plan has been tested	
Create and maintain written document of policies and procedures developed	
Understand penalties for violations	
Breaches are reported as noted by HHS	
Processes in place to provide breach information without unreasonable delay no later than 60 days following discovery of breach	
Notifications smaller than 500 individuals are submitted to HHS annually	