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HIPAA Made Easy!

THE ULTIMATE HEALTHCARE GUIDE

to Easily Understanding a HIPAA Risk Assessment

UNDERSTANDING A HIP RISK ASSESSMENT

As you already know, HIPAA requires every covered entity to conduct an annual risk assessment of their organization. This assessment helps to ensure your healthcare organization is compliant and doing everything possible to keep patient information private.

In order to protect PHI, it's important to first understand where you are vulnerable. A HIPAA Risk Assessment will help you answer the following critical questions:

- Where is patient information stored, accessed, created or modified?
- Is PHI at risk of being breached? If so, what are the threats to this information?
- Do these threats pose imminent risk? How likely are these threats?
- What is the impact of these threats? Does it affect compliance?
- What additional security measures can be implemented to protect PHI?

Risk Assessments should be performed once a year or when major changes to systems occur such as implementation of an EMR or Digital X-ray system.

BREAKDOWN OF A HIPAA RISK ASSESSMENT

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When your patients come to you about their medical problems, they expect a thorough evaluation before a diagnosis is made. This is the same premise when it comes to mitigating risks within your healthcare organization...

Before a treatment plan can be executed, every covered entity needs a comprehensive assessment to find weaknesses and vulnerabilities within their organization when it comes to the security of patient health information.

That's why we've broken down the HIPAA Risk Assessment into six key components, **ALTARS**: **Assets, Location, Threats, Assessment, Risk and Secondary Protection.** This checklist details the exact steps every entity needs to complete for a proper and mandatory HIPAA Risk assessment.

6 KEY STEPS IN A HIPAA RISK ASSESSMENT

✓ **ASSETS**

Know what current assets contain patient data.

✓ **LOCATION**

Know where the patient data is located on all of the assets.

✓ **THREATS**

Know what types of threats are possible to the patient data.

✓ **ASSESSMENT**

Verify what types of countermeasures you currently have in place.

✓ **RISK**

Determine the level of risk that current patient data is subject.

✓ **SECONDARY PROTECTION**

Plan on what type of Defense in Depth Strategy needs to be employed to bring risk level to tolerable level.

***Take compliance to the next level with security training for your staff!**

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HIPAA Compliance By the Numbers

79%

of Meaningful Use Audits have resulted in failure according to CMS

CMS

#1

leading cause of healthcare data breaches in 2017 was hacking

HIPAA Journal

89%

of covered entities had at least one data breach in the last year

MicroMD

Preliminary Findings from Covered Entities on HIPAA Compliance Audits...

According to the HIPAA Journal, the OCR found that healthcare organizations were still failing to comply with HIPAA rules during their 2017 enforcement activities. They stated that entities were failing in the following areas “safeguarding PHI on portable devices, conducting an organization-wide risk analysis, implementing a security risk management process, and entering into HIPAA-compliant business associate agreements with all vendors.”

33.33% of entities failed to send out breach notifications in a timely manner

Little to no entities were considered fully compliant with the HIPAA Privacy and Security Rules

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A Special Offer Just for You...

FREE Security & Compliance Training for Your Staff!

Phillip Long,
CEO & CISSP

Training Videos
The content goes over security PHI & HIPAA regulations

Testing
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Admin Reporting
Administrators can view compliance reports & see testing scores

Reminders
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BONUS: Complimentary HIPAA Consultation to discuss any other HIPAA concerns

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