

TOOLS	
1A	Health Care Provider HIPAA Compliance Checklist
1B	Assessment of HIPAA “Covered Entity” Status
1C	Hybrid Entity Designation (<i>if applicable</i>)
1D	HIPAA Gap Self-Assessment
1E	Security Risk Analysis: Administrative Safeguards (OCR/ONC SRA Tool links)
1F	Security Risk Analysis: Technical Safeguards (OCR/ONC SRA Tool links)
1G	Security Risk Analysis: Physical Safeguards(OCR/ONC SRA Tool links)
1H	Required Elements of a HIPAA Notice of Privacy Practices
1I	Required Elements of a HIPAA Authorization
1J	Required Elements of a HIPAA BAA
1K	HIPAA BAA Tracking Tool
1L	OHCA Required Elements
1M	Accounting of Disclosures (AOD) Log
1N	HIPAA Incident Report <i>with</i> Log
1O	HIPAA Breach Assessment (<i>with “Low Probability” scoring tool</i>)
1P	HIPAA De-Identification and Limited Data Set (LDS) Standards Checklist
1Q	Destruction of ePHI Checklist
1R	HIPAA Security Reminders (<i>samples</i>)
1S	HIPAA Workforce Training (<i>PowerPoint</i>)
1T	Defining your “HIPAA Workforce”
1U	HIPAA Reproductive Health Care Compliance Elements *NEW! <i>6.25.24 Reproductive Health Care Final Rule *</i>
SAMPLE FORMS	
2A	HIPAA Authorization to Disclose PHI
2B	HIPAA Business Associate Agreement
2C	HIPAA Data Use Agreement (<i>for Limited Data Sets</i>)
2D	HIPAA OHCA Agreement (<i>for Organized Health Care Arrangements</i>)
2E	HIPAA Notice of Privacy Practices
2F	HIPAA Privacy Officer Job Description
2G	HIPAA Security Officer Job Description
2H	Resolution of Board of Trustees
2I	Workforce Acknowledgment and Agreement of HIPAA Obligations
2J	Confidentiality Agreement for 3 rd Party to not Re-Disclose PHI
2K	Certification by Entity to Destroy PHI
2L	Request for Restriction by Individual
2M	Reproductive Health Care Attestation (HIPAA) *NEW! <i>6.25.24 HIPAA Reproductive Health Care Final Rule *</i>
POLICIES & PROCEDURES	
GENERAL	
3A	Governance & Oversight:
	<i>Policy#G01: HIPAA Compliance Program</i>
	<i>Policy#G02: HIPAA Privacy Officer</i>
	<i>Policy#G03: HIPAA Security Officer</i>
	<i>Policy#G04: HIPAA Training (Workforce)</i>
	<i>Policy#G05: Complaints and Reporting HIPAA Non-Compliance</i>
	<i>Policy#G06: Sanctions</i>
PRIVACY (all PHI)	
4A	Individual Rights:
	<i>Policy#PP-01: Right to Access</i>
	<i>Policy#PP-02: Right to Request Amendment</i>
	<i>Policy#PP-03: Right to an Accountings of Disclosures</i>
	<i>Policy#PP-04: Right to Request Restrictions and Confidential Communications</i>
	<i>Policy#PP-05: Right to HIPAA Notice of Privacy Practices</i>
	<i>Policy#PP-06: Personal Representatives *6.25.24 update for HIPAA Reproductive Health Care Final Rule *</i>
4B	Use and Disclosure of PHI:
	<i>Policy#PP-07: Business Associates (BA) and Business Associate Agreements (BAAs)</i>
	<i>Policy#PP-08: Treatment</i>
	<i>Policy#PP-09: Payment</i>
	<i>Policy#PP-10: Health Care Operations</i>
	<i>Policy#PP-11: Family Members, Friends and Others Involved in the Individual’s Care</i>
	<i>Policy#PP-12: Emergency Situations</i>
	<i>Policy#PP-13: Victims of Abuse, Neglect or Violence</i>
	Policy#PP-14: Public Health <i>*6.25.24 update for HIPAA Reproductive Health Care Final Rule *</i>
	<i>Policy#PP-15: Research</i>
	<i>Policy#PP-16: De-Identified Information</i> ▲ <i>Updates for HIPAA Reproductive Health Care Privacy Final Rule</i>
	<i>Policy#PP-17: Prohibition on “Sale” of PHI</i>
	<i>Policy#PP-18: Marketing</i>
	Policy#PP-19: Healthcare Oversight Activities <i>*6.25.24 update for HIPAA Reproductive Health Care Final Rule *</i>
	<i>Policy#PP-20: Required by Law</i>
	Policy#PP-21: Judicial & Administrative Requests <i>*6.25.24 update for HIPAA Reproductive Health Care Final Rule *</i>
	Policy#PP-22: Law Enforcement Requests <i>*6.25.24 update for HIPAA Reproductive Health Care Final Rule *</i>
	<i>Policy#PP-23: Minimum Necessary</i>
	<i>Policy#PP-24: Reasonable Safeguards</i>
	<i>Policy#PP-25: Information Subject to Special Protection</i>
	Policy#PP-26: Deceased Individuals <i>*6.25.24 update for HIPAA Reproductive Health Care Final Rule *</i>
	Policy#PP-27: Reproductive Health Care Privacy <i>*NEW! 6.25.2024 Reproductive Health Care Final Rule *</i>
SECURITY (ePHI)	
5A	Administrative:
	<i>Policy#SAP-01: Security Management Process</i>
	<i>Policy#SAP-02: Security Risk Analysis</i>
	<i>Policy#SAP-03: Information System Activity Review</i>
	<i>Policy#SAP-04: Workforce Security</i>
	<i>Policy#SAP-05: Information Access Management</i>
	<i>Policy#SAP-06: Scope of Access by Workforce</i>
	<i>Policy#SAP-07: Authentication & Verification</i>
	<i>Policy#SAP-08: Security Incidents</i>
	<i>Policy#SAP-09: HIPAA Breach Response & Notification</i>
	<i>Policy#SAP-10: Contingency Plan</i>
	<i>Policy#SAP-11: Security Awareness & Training</i>
5B	Technical:
	<i>Policy#STP-01: Access Controls</i>
	<i>Policy#STP-02: Audit Controls</i>
	<i>Policy#STP-03: Data Integrity</i>
	<i>Policy#STP-04: Authentication</i>
	<i>Policy#STP-05: Transmission & Encryption</i>
5C	Physical:
	<i>Policy#SPP-01: Facility Access Controls</i>
	<i>Policy#SPP-02: Workstation Use and Security</i>
	<i>Policy#SPP-03: Device and Media Control</i>
	<i>Policy#SPP-04: Backup and Recovery</i>
	<i>Policy#SPP-05: Disposal of PHI and e-PHI</i>