

## Action plan for HIPAA

Action plan for HIPAA (Health Insurance Portability and Accountability Act) compliance is essential for healthcare organizations, covered entities, and business associates to protect patient health information. Below is our company action plan template with a timeline to help PRK Foundation achieve HIPAA compliance:

### Action Plan for HIPAA Compliance

**Objective:** Ensure compliance with the Health Insurance Portability and Accountability Act (HIPAA) to safeguard protected health information (PHI).

**Timeline:** 05/30/2018 and is continuous

**Responsible Parties:** Identify the individuals or teams responsible for each task.

#### Key Tasks:

##### 1. HIPAA Training and Awareness

- Start Date: 05/30/2018 and Beginning of each quarter and all new hires.
- Responsible: All employees, Board members and Staff.
- Conduct HIPAA training for all employees to raise awareness of PHI security and privacy.

##### 2. HIPAA Privacy Officer Appointment

- Start Date: 05/30/2018
- Responsible: Compliance Director
- Appoint a HIPAA Privacy Officer responsible for overseeing privacy policies and procedures.

##### 3. Risk Assessment

- Start Date: 05/30/2018 and is reviewed at the beginning of each quarter
- Responsible: Compliance Director
- Conduct a risk assessment to identify vulnerabilities and threats to PHI.

##### 4. Develop HIPAA Policies and Procedures

- Start Date: 05/30/2018 and is updated as laws and regulation change
- Responsible: Compliance Director
- Create or update policies and procedures that address HIPAA requirements, including privacy, security, and breach notification.

## 5. **Business Associate Agreements**

- Start Date: 05/30/2018 and is reviewed at the beginning of each quarter
- Responsible: President
- Review and update business associate agreements to ensure compliance with HIPAA.

## 6. **Security Risk Management**

- Start Date: 05/30/2018
- Responsible: Compliance Director
- Implement security measures to protect electronic PHI (ePHI), including encryption, access controls, and audits.

## 7. **Documentation and Record-Keeping**

- Start Date: 05/30/2018
- Responsible: Secretary
- Maintain accurate records of HIPAA policies, procedures, training, and risk assessments.

## 8. **Incident Response Plan**

- Start Date: 05/30/2018
- Responsible: Compliance Director and Board of Directors
- Develop and implement an incident response plan to address security breaches and report them as required by HIPAA.

## 9. **Physical Security**

- Start Date: 05/30/2018
- Responsible: Off duty police officers, Veterans and security officers when needed
- Assess and improve physical security measures to protect access to PHI.

## 10. **Audit Controls**

- Start Date: 05/30/2018
- Responsible: Compliance Director and Board of Directors
- Implement audit controls to monitor access to ePHI and track any unauthorized access.

## 11. **Security Awareness**

- Start Date: 05/30/2018
- Responsible: Compliance Director

- Conduct security awareness training for employees to prevent security incidents.

#### **12. Ongoing Compliance Monitoring**

- Start Date: 05/30/2018
- Responsible: Compliance Director
- Establish procedures for ongoing compliance monitoring and audits.

#### **13. Reporting and Documentation of Breaches**

- Start Date: 05/30/2018
- Responsible: Board of Directors, Compliance Director all Employees
- Establish a process for promptly reporting and documenting any security breaches as required by HIPAA.

#### **14. Periodic HIPAA Assessments**

- Start Date: 05/30/2018
- Responsible: Compliance Director
- Schedule regular assessments to ensure ongoing compliance with HIPAA regulations.

#### **Review Points:**

- Conduct regular reviews quarterly to assess progress and make adjustments as necessary.
- Ensure that corrective actions are taken promptly if HIPAA violations are identified.

HIPAA compliance is an ongoing process, and it's crucial to stay updated with any changes in regulations and continuously improve your compliance efforts. This action plan is for our organization's needs and requirements. Specific dates and responsible parties are assigned each task and progress monitor regularly to maintain HIPAA compliance.