

Compliance Risk Analysis

For the Office of:		
Date:	Inspected by:	

HIPAA Security		ırity	
Item #	YES	NO	HIPAA Security Analysis
HS1			Have we kept an updated inventory of hardware and software we own (Inventory Log Form)?
HS2			Can we identify where ePHI is located (desktops/laptops, handhelds, portable media, servers, etc)?
HS3			Can we locate the Inventory Log in a disaster (fire, flood, explosion, theft, etc)?
HS4			Do we know the approximate monetary value of our hardware and software?
HS5			Do we have an emergency contact list completed with information for our workforce members and service providers?
HS6			Do we know who is responsible for modifying user access and assigning passwords? Name of assigned person:
HS7			Do our employees' system access levels correspond with their job descriptions?
HS8			Are all passwords changed on a regular basis and do we use strong passwords?
HS9			Have we established procedures for assigning, changing, and safeguarding passwords?
HS10			Do any of our employees take home portable computers or other devices that contain ePHI?
HS11			Are our employees who work with laptops, PDAs, or cell phones aware of encryption requirements?
HS12			Has initial HIPAA Security training for all new hires and continuing training been completed and documented?
HS13			Have we implemented sanctions in our policies against employees who don't abide by our policies?
HS14			Are we properly and consistently enforcing these policy sanctions?
HS15			Do we have established audit controls that monitor system activity?
HS16			Do we continually review our audit control logs for inappropriate use or activity?
HS17			Does our system monitor unsuccessful log-in attempts and are we notified of this activity?
HS18			Are log-in attempts limited to a certain number of tries?
HS19			Do we immediately deactivate an employee's access upon termination or change of job assignment? (see proper secure termination procedure in the Reference Guide)
HS20			Do we periodically give our employees HIPAA Security reminders? (Newsletters, Blog, etc)
HS21			Do our employees know the location of our HIPAA Security policies? (Policy/Audit Manual)
HS22			Have we installed anti-virus and other malware protection software on our computers?

Item#	YES	NO	HIPAA Security Analysis	
HS23			Do we use the installed protection to guard against, detect, and report any malicious software?	
HS24			Are our employees prohibited from installing unauthorized software or downloading games?	
HS25			Have our employees been trained to report all security incidents to their HIPAA Security Officer?	
HS26			Do we have established policies and a Maintenance Log documenting repairs to physical components related to security (doors, locks, hardware, alarms, keys, etc)?	
HS27			Do we have established policies for damaging or erasing data on hardware of electronic media prior to disposal?	
HS29			Do our computers automatically log off after a specific period of inactivity?	
HS30			Do we periodically back-up all of our data to reasonably safeguard sensitive material?	
HIPA	HIPAA Privacy			
Item #	YES	NO	HIPAA Privacy Analysis	
HP1			Are our Business Associate Agreements customized and current?	
HP2			Does our organizational culture promote and encourage the protection of PHI?	
НР3			Do our employees know the location of our HIPAA Privacy policies? (Policies/Audit Manual)	
HP4			Have all of our employees been trained on our HIPAA Privacy policies and procedures?	
HP5			Do we have documentation of our patients being offered a Notice of Privacy Practice Acknowledgement form?	
	HR			
Item #	YES	NO	Human Resources Analysis	
HR1			Are we following State and Federal guidelines on minimum wage and minimum wage for exempt employees?	
HR2			Are all required compliance posters posted in the appropriate areas?	
HR3			Have all of our I-9 forms been reviewed and are up-to-date?	
HR4			Are our organizational policies and procedures current?	
HR5			Have our Employee's paid time off (sick days and vacation days) been reviewed and accounted for?	
OSHA				
Item #	YES	NO	OSHA Analysis	
OSHA1			Have we conducted an internal safety and health audit?	
OSHA2			Does our organizational culture promote and encourage safety?	
OSHA3			Is our safety and health documentation current and well communicated?	
OSHA4			Do we conduct regular and comprehensive employee training on OSHA standards?	
OSHA5			Do we have policies in place that protect contractors and temporary workers?	
231173			Do we have policies in place that protect contractors and temporary workers:	

For Questions Email: support@hcsiinc.com Page 2

Comments & Corrective Action

This page is to be used to document any of the Risk Analysis items that were marked "NO". Please document the item number and the corrective action you plan on taking in order to bring the item into compliance. If any of the items were "Non Applicable", please mark "NO" and give comment.

Item #	Comments and Corrective Action Plan

This document is not intended to be an exhaustive or definitive source on safeguarding health information from privacy or security risks. It is also not intended to be legal advice or offer recommendations based on a provider's specific circumstances. For more information about HIPAA privacy and security rules, please contact HCSI at (801) 947-0183 or support@hcsiinc.com.