

# Preparing for the Anticipated OCR Privacy and Security Audits

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# Agenda

Current enforcement procedures

Status of audit program

Challenges for HIPAA audits





# **Enforcement & Compliance**

- Complaints
- Compliance reviews
- Breach reports
- Audits





# Complaints

- OCR currently investigates all timely complaints that allege Privacy or Security Rule violations
  - Complaints must be filed within 180 days
  - Administratively resolved when untimely, no jurisdiction, or no violation alleged
- Complaints are investigated by regional office based on location of covered entity
  - Exception based on regional caseload



# Compliance Reviews

- Initiated by OCR, often in response to media reports
- Subsequent complaints may be added to compliance review
- Generally focused on specific issue





## **Breach Reports**

- All large breaches (500 or more) are verified and investigated
- Regions have discretion on small breaches
- Summary of results posted on website





# Investigation

- Steps include:
  - Notification of covered entity
  - Data request(s) and interviews
  - Corrective action where indications of non-compliance
- Generally focused on complaint allegation, media report, or cause of breach





#### **Audits**

#### **HITECH Act § 13411**

The Secretary shall provide for periodic audits to ensure that covered entities and business associates ... comply with [the HITECH Act, Privacy, and Security Rules].





#### **OCR HIPAA Audit Contract**

 Purpose: To evaluate and compare compliance audit program configurations and recommend to OCR several feasible and effective program structure alternatives to implement HITECH § 13411

#### Timeline:

- Nov, 2009 Request for proposal
- Mar. 2010 Contract awarded to Booz Allen Hamilton
- March Aug. 2010 BAH research period
- Aug. 2010 BAH issues final report to OCR





# **Audit Program Elements**

Planning	Testing	Reporting	Maintenance
<ul> <li>Select Audited Entities</li> <li>Create Documentation and Analysis Tools</li> <li>Identify and Train Staff</li> <li>Establish Level of Effort</li> <li>Conduct Pre-Audit Planning</li> </ul>	<ul> <li>Perform Tests and Evaluate Results</li> <li>Draft Communications</li> </ul>	<ul> <li>Communicate Results of Audit</li> <li>Report Findings</li> <li>Permit Dispute of Findings</li> </ul>	<ul> <li>Request Corrective Action</li> <li>Transition from Audit to Enforcement</li> <li>Conduct Appeals</li> <li>Encourage Compliance of other Audited Entities</li> </ul>





#### **Planning Questions**

- Defining universe of covered entities and business associates
  - No central list exists
- Choosing option(s) for selecting audited entities
  - Random selection
  - Statistical representativeness
  - Based on complaints
  - Consideration of geographical data
  - Corrective action plans



#### **Planning Questions**

- Determining scope of audits
- Creating audit documentation tools
  - Standardized vs. customized for each covered entity or business associate
- Identifying and training staff
  - Government staff vs. contractors
- Determining frequency of audits
- Allocating resources
  - Number of auditors per audit
  - Duration of site visits





#### **Testing Questions**

- Determining amount of advanced notice
- Determining amount of documentation needed
- Organizing documentation (e.g., crosswalks)
- Determining whom to interview





# Reporting Questions

- Preparing comprehensive final report
- Preparing recommendations
- Providing a means to dispute findings
- Determining whether to publicly release report
  - Transparency vs. exposure of vulnerabilities



#### **Maintenance Questions**

 Ensuring that corrective action is taken

 Determining whether enforcement is appropriate





#### Want more information?

The OCR website:

http://www.hhs.gov/ocr/privacy/

My contact:

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