

## 2022 HEALTH INFORMATION PRIVACY AND SECURITY NEW YEAR'S RESOLUTIONS

To start off the New Year, here are some potential health information privacy and security resolutions. You can use these Annual, Quarterly, and Monthly lists to map out your privacy and security tasks for the year, and then check them off as you complete them. We have included empty rows for you to add your own resolutions.

As with any New Year's resolutions, these are intended to represent potential best practices for the coming year – failing to meet one or more of these resolutions does not necessarily mean that you are out of compliance with HIPAA or other laws.

Additionally, this list is not intended to be comprehensive of all statutory and regulatory requirements. Checking off all these resolutions does not guarantee compliance. While this list is focused on health information privacy and security, we hope that other sectors will also find it useful.

If you have any questions, you may contact Adam Greene at (202) 973-4213 or AdamGreene@dwt.com

	ANNUAL TASKS				
✓	Task	Estimated Completion	Actual Completion		
	<b>Right of Access Policy</b> – Confirm that a policy is in place regarding an individual's right of access to protected health information in a designated record set. (HIPAA, 45 C.F.R. § 164.524) Does it address timing of responses to requests, permissible fees, bases for denials, form of denials, and appeal rights? [Other policies are addressed below, but this particular policy should be a top priority.]	Quarter			
	<b>Documentation of Access Fees</b> – If you charge patients or plan members for copies of protected health information under the right of access, then create or update documentation of the basis for fees, demonstrating that they are limited to your costs (other than if you charge a \$6.50 fee for electronic copies). (HIPAA, 45 C.F.R. § 164.524(c)(4))	Quarter			
	<b>Insurance Checkup</b> – Check cybersecurity coverage (including coverage of ransomware)	Quarter			
	<b>Risk Analysis</b> – Conduct a Security Rule risk analysis of all confidential/critical information (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(A))	Quarter			
	<b>Risk Management Plan</b> – Create or update a risk management plan to reduce identified risks (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(B))	Quarter			
	<b>Breach Response Table Top</b> – Conduct breach response table top exercise and update breach response plan accordingly	Quarter			
	<b>Test Disaster Recovery Plan</b> – Test backups and disaster recovery plan (HIPAA, 45 C.F.R. § 164.308(a)(7)(ii)(D))	Quarter			
	<b>Website Privacy Policy Checkup</b> – Check website privacy policy(ies) to verify coverage of all collection and use of information collected through website(s) (It doesn't hurt to take another look at the terms of use as well)	Quarter			
	Internal Privacy and Security Policies Checkup — Revisit internal privacy and security policies to verify applicability to operations, such as determining whether social media, remote access, and portable media are addressed adequately. Also revisit "problem areas"	Quarter			
	<b>Evaluation of Security Rule Compliance</b> – Conduct a review of compliance with the HIPAA Security Rule (if applicable), such as by checking that policies and procedures address all Security Rule requirements (HIPAA, 45 C.F.R. § 164.308(a)(8))	Quarter			
	<b>Technical Evaluation</b> – Perform a penetration test of information security controls (HIPAA, 45 C.F.R. § 164.308(a)(8))	Quarter			

	ANNUAL TASKS		
<b>✓</b>	Task	Estimated Completion	Actual Completion
	<b>TCPA Checkup</b> – Check if performing any automated calling and texting and, if so, verify compliance with Telephone Consumer Protection Act	Quarter	
	<b>Vendor Checkup</b> – Verify (such as by reviewing accounts payable) that appropriate privacy and security safeguards (including HIPAA business associate agreements, if applicable) are in place with all vendors and that business associate-related risks are included in the Security Risk Analysis	Quarter	
	<b>Group Plan Checkup</b> – Check that group health plan documents and privacy, security, and breach notification policies comply with HIPAA, including listing all employees or classes of employees or other persons with access to plan protected health information (HIPAA, 45 C.F.R. § 164.504(f)(iii)(A))	Quarter	
	<b>Privacy Officer</b> – Check that designations for the privacy officer and any privacy contacts are up to date and are reflected in any notice of privacy practices (45 C.F.R. § 164.530(a)) (optional for HIPAA business associates)	Quarter	
	<b>Security Officer</b> – Check that designation is up to date (45 C.F.R. § 164.308(a)(2))	Quarter	
	<b>HIPAA Hybrid Entity Designation</b> – Consider whether to designate as a hybrid entity (if you have components unrelated to health care/health plan coverage) or update existing designation (HIPAA, 45 C.F.R. § 164.105(a))	Quarter	
	<b>Affiliated Covered Entity Designation</b> – Consider whether to designate as an affiliated covered entity (if you have multiple legal entities that qualify as HIPAA covered entities) or update existing designation (based on any new acquisitions) (HIPAA, 45 C.F.R. § 164.105(b))	Quarter	
	Internal Business Associate Agreements — If you have legal entities (such as a parent company) that is not a covered entity but supports entities that are, verify that an internal business associate agreement is in place and up to date	Quarter	
	<b>Small Breach Reports</b> – Submit all 2021 small breach reports to HHS (HIPAA, 45 C.F.R. § 164.408(c))	Quarter	
	<b>Privacy Training</b> – Train relevant workforce members on privacy policies and procedures (HIPAA, 45 C.F.R. § 164.530(b))	Quarter	
	<b>Security Training</b> – Train relevant workforce members on security policies and procedures (HIPAA, 45 C.F.R. § 164.308(a)(5)(1))	Quarter	

	ANNUAL TASKS				
<b>✓</b>	Task	Estimated Completion	Actual Completion		
	<b>Breach Notification Training</b> – Train relevant workforce members on breach notification policies and procedures (HIPAA, 45 C.F.R. § 164.414(a))	Quarter			
		Quarter			

	QUARTERLY TASKS		
<b>✓</b>	Task	Estimated Completion	Actual Completion
	Information Blocking – [Health care providers, health information exchanges/networks, health IT developers of certified health IT] Document that any practices that interfere with access, exchange, or use of electronic health information falls within an Information Blocking Rule regulatory exception or, in the case of a health care provider, is otherwise reasonable. [Information Blocking Rule, 45 C.F.R. part 171]	Quarter 1	
	<b>Risk Management Plan Update</b> – Update most recent risk management plan	Quarter 1	
	<b>Encryption</b> – Document that all devices containing protected health information are encrypted (or that there is documentation for why encryption is not reasonable and appropriate). (HIPAA, 45 C.F.R. § 164.312(a)(1)(ii)(iv))	Quarter 1	
	<b>Vulnerability Scanning</b> – Conduct a network vulnerability scan (HIPAA, 45 C.F.R. § 164.308(a)(8))	Quarter 1	
		Quarter 1	
		Quarter 1	
		Quarter 1	
	<b>Information Blocking</b> – [Health care providers, health information exchanges/networks, health IT developers of certified health IT] Document that any practices that interfere with access, exchange, or use of electronic health information falls within an Information Blocking Rule regulatory exception or, in the case of a health care provider, is otherwise reasonable. [Information Blocking Rule, 45 C.F.R. part 171]	Quarter 2	
	Risk Management Plan Update – Update most recent risk management plan	Quarter 2	
	<b>Encryption</b> – Document that all devices containing protected health information are encrypted (or that there is documentation for why encryption is not reasonable and appropriate). (HIPAA, 45 C.F.R. § 164.312(a)(1)(ii)(iv))	Quarter 2	
	<b>Vulnerability Scanning</b> – Conduct a network vulnerability scan (HIPAA, 45 C.F.R. § 164.308(a)(8))	Quarter 2	
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		Quarter 2	
		Quarter 2	

	QUARTERLY TASKS		
<b>✓</b>	Task	Estimated Completion	Actual Completion
	Information Blocking – [Health care providers, health information exchanges/networks, health IT developers of certified health IT] Document that any practices that interfere with access, exchange, or use of electronic health information falls within an Information Blocking Rule regulatory exception or, in the case of a health care provider, is otherwise reasonable. [Information Blocking Rule, 45 C.F.R. part 171]	Quarter 3	
	Risk Management Plan Update – Update most recent risk management plan	Quarter 3	
	<b>Encryption</b> – Document that all devices containing protected health information are encrypted (or that there is documentation for why encryption is not reasonable and appropriate). (HIPAA, 45 C.F.R. § 164.312(a)(1)(ii)(iv))	Quarter 3	
	<b>Vulnerability Scanning</b> – Conduct a network vulnerability scan (HIPAA, 45 C.F.R. § 164.308(a)(8))	Quarter 3	
		Quarter 3	
		Quarter 3	
		Quarter 3	
	Information Blocking – [Health care providers, health information exchanges/networks, health IT developers of certified health IT] Document that any practices that interfere with access, exchange, or use of electronic health information falls within an Information Blocking Rule regulatory exception or, in the case of a health care provider, is otherwise reasonable. [Information Blocking Rule, 45 C.F.R. part 171]	Quarter 4	
	Risk Management Plan Update – Update most recent risk management plan	Quarter 4	
	<b>Encryption</b> – Document that all devices containing protected health information are encrypted (or that there is documentation for why encryption is not reasonable and appropriate). (HIPAA, 45 C.F.R. § 164.312(a)(1)(ii)(iv))	Quarter 4	
	Vulnerability Scanning – Conduct a network vulnerability scan (HIPAA, 45 C.F.R. § 164.308(a)(8))	Quarter 4	
		Quarter 4	
		Quarter 4	
		Quarter 4	

	MONTHLY TASKS		
<b>✓</b>	Task	Estimated Completion	Actual Completion
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	January	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	January	
		January	
		January	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	February	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	February	
		February	
		February	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	March	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	March	
		March	
		March	

	MONTHLY TASKS		
<b>√</b>	Task	Estimated Completion	Actual Completion
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	April	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	April	
		April	
		April	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	May	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	May	
		May	
		May	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	June	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	June	
		June	
		June	

	MONTHLY TASKS		
<b>✓</b>	Task	Estimated Completion	Actual Completion
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	July	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	July	
		July	
		July	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	August	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	August	
		August	
		August	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	September	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	September	
		September	
		September	

	MONTHLY TASKS		
<b>✓</b>	Task	Estimated Completion	Actual Completion
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	October	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	October	
		October	
		October	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	November	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	November	
		November	
		November	
	<b>System Activity Review</b> – Document review of information system activity (e.g., audit logs) (HIPAA, 45 C.F.R. § 164.308(a)(1)(ii)(D))	December	
	<b>Security Reminder</b> – Send out a security reminder, such as related to password management, phishing, logging off, etc. (HIPAA, 45 C.F.R. § 164.308(a)(5)(ii)(A))	December	
		December	
		December	

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