

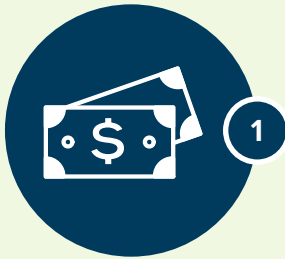
Top 5 HIPAA myths you need to debunk now!



We have been monitoring HHS Office for Civil Rights (OCR) settlements as part of the HIPAA Right of Access Initiative (16 settlements and counting) and want to dispel some myths about HIPAA enforcement.

Myths can be scary. It would be pretty frightening to run into Bigfoot while taking a stroll through the woods, but sometimes myths have the opposite effect, and we become complacent, thinking Bigfoot will never sneak up behind us. He's just a myth, right?

As we offer our top 5 HIPAA myths, we invite you to decide whether to address gaps in compliance now, or wait until you are in the middle of the woods, facing Bigfoot, and wondering what to do next.



MYTH #1

OCR doesn't target organizations like mine.

The prevailing wisdom has been that OCR only pursues settlements with large organizations. As we review the types of organizations that have been targeted in the recent past, we find that they include social services/behavioral health organizations, more than one primary care practice, a psychiatric medical group practice, and a few hospital/health systems. With settlements ranging from \$10,000 to \$200,000 plus up to two years of monitoring by the OCR, can you really afford to take a chance?



MYTH #2

I have privacy policies, procedures, and training protocols documented, so I'm all set if OCR comes calling.

Are you really all set? When did you last review your policies and procedures? Are you sure what your staff actually does is HIPAA compliant? If you don't regularly review your policies and procedures and train your staff, can you really say you're all set?

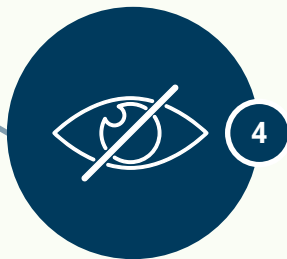


MYTH #3

HIPAA gives me 30 days to respond to a patient request, so it's ok to wait to respond.

Did you try to ship a package during the 2020 holiday season? If so, do you remember checking your tracking number daily to see if your gift was any closer to its destination? Now imagine it was your health records you were waiting for. Frustration builds, goodwill wanes, and you start looking for a higher authority to get involved.

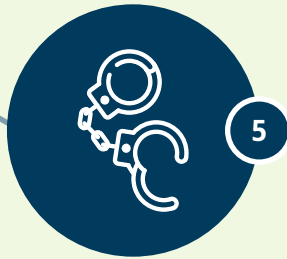
And beware: if proposed Privacy Rule changes to HIPAA are finalized, the period of time covered entities will have to fulfill patient requests will be reduced from 30 to 15 days.



MYTH #4

If I ignore the problem, it will go away.

Right of Access settlement #10 dispels this myth: A medical group was approached by OCR to resolve a complaint in March 2019. Then again in April 2019. This issue was not resolved until October 2020. Now, in addition to a monetary settlement, the group's Corrective Action Plan (CAP) will be monitored by the OCR for two years. That's a lot of time, energy, and money that could have been better spent if they worked to resolve the complaint quickly.



MYTH #5

COVID-19 Myth: OCR will give me a "get out of jail free" card during the pandemic.

As one of our co-workers said, "Just because they are looking aside does not mean they are looking away." The most recent settlement we have seen to OCR's Right of Access Initiative was announced February 10, 2021, showing that the initiative is still a priority despite the pandemic.



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wherever you are based, we look forward to working together.

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Are you ready to assess or improve your compliance with HIPAA Right of Access rules now? Contact **our HIPAA compliance consulting team** and we will help you keep OCR settlements at bay.

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