# HIPAA Series: Part IV- NASW HIPAA TOOLKIT

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The HIPAA regulations mandate the use of certain policies and forms by practitioners who are subject to the regulations. These forms and policies are provided to assist social workers in their compliance with HIPAA requirements.\* These documents are meant as a basic template and should be customized to fit an individual social worker's practice.\*\*

#### PRIVACY RULE (Refer to HIPAA Series: Part I – Privacy Rule)

Notice of Privacy Practices Policy, Instructions for Use, Sample Receipt and Acknowledgement of Notice of Privacy Practice Authorization/Consent Policy Authorization to Release Mental Health Treatment Information Authorization to Release Substance Abuse Treatment Information Business Associate Policy and Business Associate Agreement Accounting of Disclosures Policy and Accounting of Disclosures Log Request for Restrictions Policy and Request for Restrictions Agreement

## SECURITY RULE (Refer to HIPAA Series: Part II - Security Rule)

Authorization for Electronic Communication

#### Administrative Safeguards

<u>Risk Analysis</u> <u>Security Risk Analysis Policy</u> <u>Security Risk Analysis Checklist</u> <u>Risk Management (Required)</u> <u>Disciplinary Action/Sanction Policy (Required)</u> <u>Information System Activity Review (Required)</u> <u>Assigned Security Officer (Required)</u> <u>Security Officer Policy</u> <u>Sample Security Officer Job Description</u>

Authorization and/or Supervision (Addressable)

Workforce Clearance Procedure (Addressable) Termination Procedure (Addressable) Isolating Health Care Clearinghouse (Required) Access Authorization (Addressable) Access Establishment and Modification (Addressable) Security Awareness, Training and Reminders (Addressable) Security Reminders Security Awareness, Training, and Reminder Policy Protection from Malicious Software (Addressable) Log-in Monitoring (Addressable) Password Management (Addressable) Response and Reporting (Required) Data Backup Plan (Required) **Disaster Recovery Plan (Required) Emergency Mode Operation Plan (Required)** Testing and Revision Procedures (Addressable) Applications and Data Criticality Analysis (Addressable) **Evaluation (Required)** Business Associates Contracts (Required) **Business Associate Policy** Sample Business Associate Agreement

#### **Physical Safeguards**

<u>Contingency Operations (Addressable)</u> <u>Facility Security Plan (Addressable)</u> <u>Access Control and Validation Procedures (Addressable)</u> <u>Maintenance Records (Addressable)</u> <u>Workstation Use (Required)</u> <u>Workstation Security (Required)</u> <u>Disposal (Required)</u> <u>Media Re-use (Required)</u> <u>Accountability (Addressable)</u>

Data Backup and Storage (Addressable)

#### **Technical Safeguards**

Unique User Identification (Required) Emergency Access Procedure (Required) Automatic Logoff (Addressable) Encryption and Decryption (Addressable) Audit Controls (Required) Mechanism to Authenticate ePHI (Addressable) Person or Entity Authentication (Required) Integrity Controls (Addressable) Encryption (Addressable)

### BREACH NOTIFICATION RULE (Refer to HIPAA Series: Part III - Breach Notification Rule)

Breach Notification Policy Authorization to Notify Client of Breach via Telephone/Email Breach Risk Assessment Breach Notification - to Client Breach Notification - to HHS Breach Incident Log

\*This material is provided solely as a resource for NASW members. It does not constitute legal advice and references only federal, not state, law. Changes in applicable laws or regulations may require revision. Social workers should contact their personal attorneys for legal advice pertaining to HIPAA compliance, the HITECH Act, and the U.S. Department of Health and Human Services rules and regulations.

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