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HIPAA Security Risk Analysis, Policies and Procedures: Making Sure You Find Risks to Health Information
Webinar #T5010

DATE AND TIME

February 1, 2018
12:30 - 2:00 p.m. CT

OVERVIEW

HIPAA has been a law for more than 20 years now, and the rules in place call for extensive policies and procedures to ensure compliance with the HIPAA Security Rule. But not all entities have done the work necessary to conduct an accurate and thorough assessment of the risks to the security of Protected Health Information (PHI), and develop and implement their security policies and procedures. Even if they have all the best practices in place, entities must have the supporting policies and procedures to ensure consistency in service and compliance with the law, and they need to be aware of the risks they face and be ready to respond to changes in the risk landscape.

This session will focus on the conduct of an information security risk analysis, as required under the HIPAA Security Rule, and development and implementation of the necessary policies and procedures for HIPAA Security Rule compliance. Suggested ways a risk analysis may be conducted, and the tools that may be used, will be explored. The necessity for undertaking an information flow analysis to find risks will be explained. Identified risks must be managed, and the means to do so using a set of spreadsheets in a workbook will be described. The program will discuss the requirements and the issues involved with HIPAA security risk analysis, policies, and procedures, and help define the path entities can follow to bring their compliance up to the level at which it should be today.

TARGET AUDIENCE

Compliance officers, privacy and security officers, health information management leadership and staff, information security, and patient relations, as well as staff in patient intake and front-line patient relations. Also, others interested in or responsible for patient communications, information management, and privacy and security of PHI under HIPAA.

OBJECTIVES

1. Explain what a HIPAA Security risk analysis is, how you can conduct one and what you can learn from it.
2. Discuss the essential policies and procedures that must be in place for HIPAA Security Rule compliance.
3. Describe how to consider new information security risks and what can cause them.
4. Differentiate between policies and procedures and what belongs in each.
5. Discuss the importance of comparing your policies and procedures to your actual practices and making the necessary adjustments to synchronize them.

FACULTY

Jim Sheldon-Dean, Founder & Director of Compliance Services
Lewis Creek Systems, LLC

Jim Sheldon-Dean is a frequent speaker regarding HIPAA, including speaking engagements at numerous national healthcare association conferences and conventions, and the annual NIST/OCR HIPAA Security Conference. Jim has more than 16 years of experience specializing in HIPAA compliance, more than 34 years of experience in policy analysis and implementation, business process analysis, information systems and software development, and eight years of experience as a Vermont certified volunteer emergency medical technician. Mr. Sheldon-Dean has no real or perceived conflicts of interest that relate to this presentation.

PRICE

$195 per connection for members.
$390 per connection for non-members.

Note: The fee is for one phone line with unlimited participants. For example, 10 employees can participate for only $19.50 ea!

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