Heritage Provider Network & Affiliated Medical Groups	Program: HIPAA Compliance				
	Policy No.	Effective Date: 01	fective Date: 01/01/2012		- 1 -
	Authored by: Compliance Sub Commi	Date: ttee 01/01/2012	Revised by: Sandy Finley	-	Date: 02/02/2015
	Approved by: Compliance Committee	Date: 02/02/2015			
Title of Policy: Privacy Inspection Walk Through					

PURPOSE:

Conduct a walk through to ensure compliance with the HIPAA policies and procedures and safeguard protected health information.

POLICY:

As required by HIPAA regulations, Heritage Provider Network and its Affiliated Medical Groups will implement appropriate administrative, technical, and physical safeguards to reasonably safeguard Protected Health Information from any intentional or unintentional use or disclosure that violates the Privacy Rule.

RESPONSIBILITY:

Compliance Officer and Corporate Compliance Officer

PROCEDURES:

- 1. Following the *Privacy Inspection Assignment Sheet*, the Compliance Officer will conduct an annual walk-through inspection of the respective groups.
- 2. Using the *Privacy Walk-Through Checklist*, all areas of concern will be reviewed and a mark placed in the appropriate column: "Agree", "Disagree", or "N/A." The "Comments" column will be used for clarification or explanation as needed.
- 3. All completed checklists will be turned in to the Compliance Officer who will bring them to the Compliance Committee for discussion.
- 4. Recommendations will be made by the Compliance Committee and will be taken back to the respective department heads for action/resolution.
- 5. The Minutes of the Compliance Committee will reflect problem identification and resolution reflective of the privacy walk-through activities.

REFERENCE: HIPAA Privacy Rules, CFR 164.502, CFR 164.530