



# eALERT



February 19, 2014

## **HIPAA: Back to Basics Annual Breach Reporting Deadline is March 1**

*This is the first in a series of bulletins going “Back to Basics” on HIPAA compliance. With the recent changes to HIPAA resulting from the Omnibus Final Rule, this is a good time to reevaluate your organization’s compliance with all aspects of HIPAA.*

Covered entities must submit notice of breaches of protected health information involving less than 500 individuals on the Department of Health and Human Services (HHS) website by March 1, 2014. This applies to all breaches discovered by the covered entity during 2013. Notices must be submitted electronically at the following address: <http://ocrnotifications.hhs.gov/>. A separate form must be completed for every breach.

A breach is treated as “discovered” by a covered entity on the first date on which it was known to a member of the covered entity’s workforce or an agent of the covered entity or, by exercising reasonable diligence, would have been known to such workforce member or agent. This means that, if a breach occurred in 2012 but was not discovered by a member of the covered entity’s workforce until 2013, the notice to HHS must be submitted by March 1, 2014.

Covered entities must complete all sections of the electronic form. This includes information regarding the covered entity, the business associate (if applicable), the breach and actions taken in response to the breach. The covered entity must also attest to the accuracy of all information submitted.

If additional information regarding a breach is discovered following submission of the initial notice, the covered entity may file an addendum at the same Web address. The covered entity should select “Addendum to Previous Report,” located at the top of the form, in such instances.

A notice of any breach involving 500 or more individuals must be filed concurrently with the notice to the affected individuals, within 60 calendar days after discovery of the breach. Such notices are filed at the same HHS Web address provided above.

### **Resources**

The following additional resources are available to provide you with further detail on breaches of protected health information and other aspects of HIPAA compliance:

▶ A comprehensive online compliance and audit program offered by Bricker & Eckler LLP, INCompliance and QMCG. This new program is a subscription service that includes the following:

- Sample policies and procedures necessary to comply with the privacy, security and breach rules, including the Final Rule
- Checklists, forms and other helpful tools to assist you with documenting your compliance program
- A self-audit program that contains many helpful tools, tips and checklists to assist you in auditing your HIPAA compliance program
- Three hours of consulting time to assist you with the modifications required to comply with the Final Rule, or your other HIPAA compliance questions

[Click here](#) to subscribe to the program.

▶ INCompliance offers customized HIPAA consulting services, including audits, breach investigations, training programs and compliance program development to help you maintain compliance in today's rapidly changing health care environment. [Click here](#) for additional information on our services.

*This E-Alert was prepared by Chris Bennington. Chris can be reached 513.870.6572 or [cbennington@incomplianceconsulting.com](mailto:cbennington@incomplianceconsulting.com). Please contact any INCompliance consultant for more information at [info@incomplianceconsulting.com](mailto:info@incomplianceconsulting.com). This E-Alert may be accessed on the INCompliance website.*