HIPAA Library and Flow Chart

If you need instruction in evaluating your practice and setting up privacy and security components for your practice then go to our Toolbox page.

If you already have a practical understanding of the regulations concerning protected health information but you need to generate the necessary forms then our HIPAA Form Library is what you need.

The HIPAA Form Library comes on a CD and contains not only the forms you need for registering and tracking the PHI of your clients but also policies that are required for your employee handbook. A Decision Flow Sheet is included that details every aspect of where forms should be used. The files are created in Microsoft Word and can be modified to show your practice name and other individualized information. By special request we will generate the files in other software formats. Please contact us for special ordering in that case.

The following forms are contained on the CD:

**HIPAA Patient Forms**
*Notice of Privacy Practices*
*Consent for the Use or Disclosure of Protected Health Information*
*Authorization for the Use and Disclosure of Protected Health Information*
*Patient Record of Disclosures*
*Request for Accounting of Disclosures of Protected Health Information*
*Request for Inspection of Protected Health Information*
*Request for Amendment of Protected Health Information*
*Request for Use by Patient When Access to PHI is Denied Based on a Reviewable Reason*
*Confidential Channel Communication Request*
*Designation of Personal Representative*
*Consent Form for Use of Language Interpreter*
*Complaint Form*

**HIPAA Office Use Forms**
*Confidential Report of Concern*
*Compliance Report Investigation Form*
*Business Associate Agreement*
*Fax Audit*
*Readiness Checklist*
*Denial of Release of PHI to Attorneys or Others Letter*

**Policy and Procedure Forms**
HIPAA Training Record
Confidentiality Pledge Record
Information Security Officer Job Description
**Flow of Form Utilization related to Patient**

**Forms to be Completed by Patient before receiving services**
*Notice of Privacy Practices
*Consent for the Use or Disclosure of Protected Health Information

**If Patient requires translator in order to participate in treatment**
*Consent Form for Use of Language Interpreter

**If Patient wishes to specify how communication is to be directed**
*Confidential Channel Communication Request

If PHI is needed for disclosure other than Treatment, Payment, or Other Health Care Operations
*Authorization for the Use and Disclosure of Protected Health Information

**If PHI is requested from attorney without appropriate authorization form**
*Denial of Release of PHI to Attorneys or Others Letter

**If Patient wishes to designate representative governing their PHI**
*Designation of Personal Representative

**If Patient or their Representative wants an accounting of release of PHI**
*Request for Accounting of Disclosures of Protected Health Information

**If Record of Disclosure of PHI is released to Patient or their Representative**
*Patient Record of Disclosures
If Patient or their Representative wants to review their PHI
*Request for Inspection of Protected Health Information
If Patient or their representative want to modify any part of the PHI then they are asked to complete the amendment form below
If request for PHI review is denied based on non-reviewable reasons then they are advised and no further action is taken
If request for PHI review is denied based on reviewable reasons then they are advised to complete the appeal form

If Request for a change to PHI by Patient or their Representative
*Request for Amendment of Protected Health Information
*If request is denied then patient is advised by CPO as to reason
*If request is accepted than amendment is added to existing record

If Request for a change to PHI is Denied and Patient wants to appeal
*Request for Use by Patient When Access to PHI is Denied Based on a Reviewable Reason

If Patient or their Representative Wants to Complain about Privacy Practices
*Complaint Form
When the office receives the above complaint form the CPO shall investigate and complete the *Compliance Report Investigation Form documenting the incident

If someone other than Patient or their Representative wants to report a concern about the use or disclosure of PHI
*Confidential Report of Concern
When the office receives the above complaint form the CPO shall investigate and complete the *Compliance Report Investigation Form documenting the incident

Flow Sheet Progression Related to Office Personnel

For Use with New Office Personnel
*New employee is given copy of personnel handbook
*They must sign confidentiality agreement and certify that they have reviewed contents before starting work
*New employee must complete HIPAA Privacy and Security Training
*New employees must complete safety training
*Folder to be created for each new employee containing
  *HIPAA Training Record
  *Office Safety Training Record
  *Confidentiality Agreement
  *Personnel handbook Review Acknowledgement