

## General Information

<b>Policy Name:</b>	HIPAA Audit Controls
<b>Category:</b>	Risk Management
<b>Applies To:</b>	Anyone who has access to ePHI for job duties
<b>Key Words:</b>	HIPAA, Audits, ePHI, EMR, Records
<b>Associated Forms &amp; Policies:</b>	<u>HIPAA: System Access Audits (P0700)</u>
<b>Original Effective Date:</b>	05/01/12
<b>Review Dates:</b>	01/12/18, 01/10/22, 01/10/23, 01/08/24
<b>Revision Dates:</b>	01/29/16, 01/11/20
<b>This Version's Effective Date:</b>	01/11/20

## Policy

### Audit Control Mechanisms

Crouse Hospital must have audit control mechanisms in place to record and/or examine any activity within Hospital systems that utilize electronic Protected Health Information (ePHI). This is to ensure access to any ePHI within Hospital systems is done in an authorized and controlled manner. Failure to utilize these controls could result in the disclosure or breach of Hospital ePHI.

Only authorized individuals should have access to Hospital audit control mechanisms. Authorization will be given on a case-by-case basis to ensure unauthorized individuals do not have access. Review of access to Hospital audit controls should be performed on a regular basis. If any application or system that utilizes ePHI does not have any auditing control mechanisms, Crouse Hospital will need to review any and all options to implement audit controls on that application or system to ensure ePHI access is capable of being reviewed.

### Auditing Activity

Crouse Hospital will perform regular audits on their main Electronic Medical Record (EMR) systems to discover any and all possible unauthorized access to ePHI. Reviews should be performed on a continual basis to ensure proper auditing is being conducted for Crouse Hospital's main EMR systems as well as any other system on a case-by-case basis. For more information on audits that are performed within the Hospital, refer to HIPAA: System Access Audits (P0700).

## Procedure

Not Applicable

## References

HIPAA Security Rule 45 CFR § 164.312(b) – Audit Controls

HIPAA Security Rule 45 CFR § 164.308(a)(1)(ii)(D) – Information System Activity Review

HIPAA Security Rule 45 CFR § 164.316 – Policies and procedures and documentation requirements  
CMS Minimum Security Requirements – Acceptable Risk Safeguards

## Definitions

**Audit:** An inspection of a patient file to determine whether or not an individual accessed the final inappropriately and/or in an unauthorized manner.

**electronic Protected Health Information (ePHI):** Any protected health information (PHI) that is covered under Health Insurance Portability and Accountability Act of 1996 (HIPAA) security regulations and is produced, saved, transferred or received in an electronic form.

## Addendums, Diagrams & Illustrations

Not Applicable