



# HIPAA Security Privacy Policies (Document No. 0503124)

*Resources for organizations seeking to comply with HIPAA security*

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## Overview of HIPAA Security Privacy Policies

Status	Administrative 164.308	Physical 164.310	Technical 164.312
REQUIRED 164.306 164.314 164.316 164.318	Risk Analysis Risk Management Sanction Policy IS Activity Review Security Responsibility Workforce Security Clearinghouse Functions Response and Reporting Data Backup Plan Disaster Recovery Plan Critical Business Processes Emergency Mode Operations Business Associates Evaluation	Workstation Security Device & Media Disposal Media Re-Use	Unique User Id Emergency Access Audit Controls Authentication
ADDRESSIBLE Authorization & Supervision Workforce Clearance Terminating Access Granting Access Establish & Modify Access Security Reminders/Training Malicious Software Log-In Monitoring Password Management Testing and Revision Application & Data Criticality	Restore Lost Data Physical Access Access Controls Maintenance Records Media Movement Copy EPHI		Automatic Logoff Encryption No Alteration of Data Integrity Controls Encrypt transmissions

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**Note:**

Policies will vary based on the type of covered entity (hybrid entity, organized health care arrangement, a health plan, etc.).