

# Risk Management Process Policy

## Introduction

**STRATEQ HEALTH, INC.** has adopted this Risk Management Process Policy in order to recognize the requirement to comply with the Health Insurance Portability and Accountability Act ("HIPAA"), as amended by the Health Information Technology for Economic and Clinical Health ("HITECH") Act of 2009 (Title XIII of division A and Title IV of division B of the American Recovery and Reinvestment Act "ARRA") and the HIPAA Omnibus Final Rule (Effective Date: March 26, 2013).

**STRATEQ HEALTH, INC.** hereby acknowledges our duty and responsibility to protect the privacy and security of Individually Identifiable Health Information ("IIHI") generally, and Protected Health Information ("PHI") as defined in the HIPAA Regulations, under the regulations implementing HIPAA, other federal and state laws protecting the confidentiality of personal information, and under principles of general and professional ethics. We also acknowledge our duty and responsibility to support and facilitate the timely and unimpeded flow of health information for lawful and appropriate purposes.

## Scope of Policy

This policy governs the establishment and maintenance of a Risk Management Process for **STRATEQ HEALTH, INC.** All personnel of **STRATEQ HEALTH, INC.** must comply with this policy. Demonstrated competence in the requirements of this policy is an important part of the responsibilities of every member of the workforce.

Officers, agents, employees, Business Associates, contractors, affected vendors, temporary workers, and volunteers must read, understand, and comply with this policy in full and at all times.

## Assumptions

- STRATEQ HEALTH, INC.** hereby recognizes its status as a Business Associate under the definitions contained in the HIPAA Regulations.
- STRATEQ HEALTH, INC.** must comply with HIPAA and the HIPAA implementing regulations pertaining to the establishment and management of an appropriate risk management process, in accordance with the requirements at § 164.302 to § 164.318.
- Full compliance with HIPAA is mandatory and failure to comply can bring severe sanctions and penalties. Possible sanctions and penalties include, but are not limited to: civil monetary penalties, criminal penalties including prison sentences, and loss of revenue and reputation from negative publicity.

- ❑ The establishment and maintenance of an appropriate risk management process will generally reduce our privacy and security risk, can reduce the likelihood of creating HIPAA violations, whether inadvertent or intentional.

## Policy Statement

Officers, agents, employees, contractors, temporary workers, and volunteers must read, understand, and comply with this policy.

- ❑ It is the Policy of **STRATEQ HEALTH, INC.** to establish, implement, and maintain an appropriate risk management process.
- ❑ Such a risk management process shall be under the direct control and supervision of the designated Privacy Official, or other responsible party (if no Privacy Official has been designated), and shall involve legal counsel, information technology, records management, senior management, and any other parties or persons deemed to be appropriate to the process.
- ❑ Business and information-technology “best practices”, along with the research and recommendations of the National Institute for Standards and Technology (“NIST”), shall be included in the development and execution of the risk management process.
- ❑ **STRATEQ HEALTH, INC.**’s risk management process shall strive to identify, analyze, prioritize, and minimize identified risks to information privacy, security, integrity, and availability. The nature and severity of various risk and risk elements shall be identified and quantified, with the goal of reducing risk as much as is practicable. The risk management process shall be ongoing, and shall be updated, analyzed, and improved on a continuous basis.
- ❑ The results of the risk management process shall be input into management’s decision-making processes, in order to help reduce our overall risk and to comply with HIPAA and other applicable laws and regulations.

## Procedures

- ❑ Ensure the confidentiality, integrity, and availability of all electronic protected health information that is in our possession.
- ❑ Protect against any reasonably anticipated threats or hazards to the security or integrity of such information.
- ❑ Protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required under our policy.

## Compliance and Enforcement

All managers and supervisors are responsible for enforcing this policy. Employees who violate this policy are subject to discipline up to and including termination in accordance with **STRATEQ HEALTH, INC.**’s Sanction Policy.