

Risk Analysis Policy

Introduction

STRATEQ HEALTH, INC. has adopted this Risk Analysis 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 Risk Analysis 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 risk analysis, in accordance with the requirements at § 164.308(a)(1).
- Risk analysis is an integral part of this organization's overall Risk Management Process Policy and process.

Policy Statement

- ❑ It is the Policy of **STRATEQ HEALTH, INC.** to conduct periodic assessments of potential risks and vulnerabilities to the confidentiality, integrity, and availability of electronic Protected Health Information ("ePHI") that we are entrusted with.
- ❑ Responsibility for conducting periodic risk analyses shall be with the designated HIPAA Official or HIPAA Privacy Officer, or other responsible party (if no Privacy Official has been designated), who shall establish a plan and procedures for the conduct of such analyses.

Procedures

- ❑ All such risk analyses and assessments shall be conducted periodically, but at least annually.
- ❑ The risk analysis process shall be modeled upon the risk analysis process recommended by the National Institute for Standards and Technology ("NIST").
- ❑ The results of risk analyses and assessments shall become an integral part of management's decision-making process, and shall guide decisions related to the protection of Protected Health Information
- ❑ All such risk analyses and assessments shall be documented in accordance with this organization's Documentation Policy and HIPAA Regulations.

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.