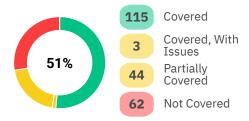
## **Controls Assessment Printable Report**

#### **Standards Coverage**



CC1.1	CC1.2	CC1.3	CC1.5
CC2.1	CC2.2	CC2.4	CC2.8
CC2.11	CC2.12	CC2.13	CC2.14
CC2.15	CC3.1	CC4.1	CC5.1
CC5.2	CC7.1	CC7.2	CC7.3
CC7.4	CC7.5	CC7.6	CC7.7
CC7.8	CC7.16	CC7.17	CC7.18
CC7.19	CC7.20	CC8.1	CC8.2
CC8.3	CC8.4	CC8.5	CC8.6
CC8.7	CC8.8	CC8.10	CC8.13
CC8.14	CC8.15	CC8.16	CC8.18
CC8.24	CC8.30	CC8.41	CC8.42
CC9.2	CC9.4	CC10.1	CC11.1
CC13.1	CC13.5	CC13.6	CC14.1
CC14.2	CC14.4	CC14.7	CC14.8
CC14.9	CC14.10	CC14.12	CC14.13
CC14.15	CC14.18	CC16.1	CC17.1
CC17.2	CC17.5	CC17.6	CC17.7
CC17.8	CC17.9	CC17.10	CC17.11
CC17.12	CC18.2	CC18.6	CC18.7
CC18.8	CC18.10	CC18.11	CC18.12
CC18.13	CC18.14	CC18.15	CC18.16

CC18.17	CC18.18	CC18.19	CC19.1
CC19.3	CC19.4	CC19.5	CC19.6
CC19.7	CC19.8	CC19.14	CC19.15
CC19.16	CC19.17	CC19.19	CC19.20
CC19.21	CC19.22	CC20.1	CC20.2
CC20.3	CC20.4	CC20.5	CC20.6
HPR-1	HPR-2	HPR-3	HPR-4
HPR-5	HPR-6	HPR-7	HPR-8
HPR-9	HPR-10	HPR-11	HPR-12
HPR-13	HPR-14	HPR-15	HPR-16
HPR-17	HPR-18	HPR-19	HPR-20
HPR-21	HPR-22	HPR-23	HPR-24
HPR-25	HPR-26	HPR-27	HPR-28
HPR-29	HPR-30	HPR-31	HPR-32
HPR-33	HPR-34	HPR-35	HPR-36
HPR-37	HPR-38	HPR-39	HPR-40
HPR-41	HPR-42	HPR-43	HPR-44
HPR-45	HPR-46	HPR-47	HPR-48
HPR-49	HPR-50	HPR-51	HPR-52
HPR-53	HPR-54	HPR-55	HPR-56
HPR-57	HPR-58	HPR-59	HPR-60
HPR-61	HPR-62	HPR-63	HPR-64
HPR-65	HPR-66	HPR-67	HPR-68
HPR-69	HPR-70	HPR-71	HPR-72
HPR-73	HPR-74	HPR-75	HPR-76
HPR-77	HPR-78	HPR-79	HPR-80
HPR-81	HPR-82	HPR-83	HPR-84
HPR-85	HPR-86	HPR-87	HPR-88
HPR-89	HPR-90	HPR-91	HPR-92

HPR-93	HBNR-1	HBNR-2	HBNR-3
HBNR-4	HBNR-5	HBNR-6	HBNR-7
HBNR-8	HBNR-9	HBNR-10	HBNR-11
HBNR-12	HBNR-13	HBNR-17	HBNR-18
HBNR-19	CSS1	CSS2	CSS3

#### **Inventories**

Establish and maintain inventories of organizational systems (including hardware, hardware, portable media, mobile devices, i..

No

#### **Active Standards**

#### **NIST CSF**

ID.AM-1

ID.AM-2

ID.AM-3

ID.AM-4

#### **Data Locations**

Locate and identify all organizational data, including data stored on local devices, mobile devices, servers, mass storage, p..

Yes, With

#### **Active Standards**

#### **NIST CSF**

ID.AM-3

## **Data Flow Mapping**

Create a map of how data flows within and in/out of the organization.

Yes, Fully

#### **Active Standards**

#### **NIST CSF**

ID.AM-3

**NIST CSF** 

PR.DS-2

## 3/22/22, 5:29 PM Controls Assessment **Baseline Configurations** Yes, Fully Establish and maintain baseline configurations of organizational systems (including hardware, portable media, mobile devices,.. **Active Standards NIST CSF** DE.AE-1 PR.IP-1 Implement Logging/Audit Controls Yes, Fully Ensure that audit/log records are implemented to record and examine activities on local devices, network devices, and cloud s.. **Active Standards NIST CSF** PR.PT-1 **Physical Access Policies** Yes, Fully Implement policies and procedures to safeguard the facility and the equipment therein from unauthorized physical access, tamp.. **Active Standards NIST CSF** PR.IP-5 **In-transit Data Protection** Yes, Fully Ensure data-in-transit is protected. **Active Standards**

ID.AM-5

# Monitor, Control, and Protect Communications No Monitor, control, and protect organizational communications (i.e., information transmitted or received by organizational info.. **Active Standards NIST CSF** PR.PT-4 **Implement Subnetworks** Implement subnetworks for publicly accessible system components that are physically or logically separated from internal netw.. **Active Standards Business Continuity & Disaster Recovery Plans** No Write effective Business Continuity and Disaster Recovery plans that meet all regulatory requirements and are in place and ma.. **Active Standards NIST CSF** PR.IP-9 **Resource Criticality** No Establish and communicate the criticality of all resources. **Active Standards NIST CSF**

## **Organizational Priorities** No Establish and communicate priorities based on the organization's mission, objectives, activities, legal requirements, and reg.. **Active Standards NIST CSF** ID.BE-3 **Dependencies** Yes, Fully Identify and document all dependencies for each critical function. Include technology, people, and facilities. **Active Standards NIST CSF** ID.BE-4 **Resliency Requirements** No Establish resilience requirements to support the delivery of critical services. **Active Standards NIST CSF** ID.BE-5 **Business Impact Analysis** No Conduct Business Impact Anlyses (BIA) with all departments to measure the financial, regulatory, and reputational impact of i.. **Active Standards NIST CSF** ID.RA-5

## **Likelihood Analysis**

No

Determine the likelihood of an incident based on historical information and other resources.

### **Active Standards**

**NIST CSF** 

ID.RA-5

## **Data Backup Plan**

Write a comprehensive data backup plan that identifies the locations of all business-critical and regulated data, and the det..

Yes, Fully

### **Active Standards**

**NIST CSF** 

PR.IP-10

### **Backups**

Ensure all business-critical and regulated data is backed up regularly to meet the organization's recovery priorities. Includ..

Yes, Partially

#### **Active Standards**

**NIST CSF** 

PR.IP-4

## **Restoration Testing**

Ensure that backups are fully tested on a regular schedule to ensure that recoveries can take place as planned.

Yes, Partially

#### **Active Standards**

**NIST CSF** 

PR.IP-4

## **Recovery Capability Testing**

Ensure that restoration testing proves that the RTO and RPO's can be met. If not, adjust the RTO and RPO to what has been pro..

Yes, Partially

#### **Active Standards**

**NIST CSF** 

PR.IP-10

## **Workforce Training**

Implement workforce training that covers all required policies and procedures.

Yes, Partially

## **Active Standards**

**NIST CSF** 

PR.AT-1

### **Vulnerability Scans**

Scan for vulnerabilities and encryption status in organizational systems and applications periodically and when new vulnerabi..

Yes, Partially

#### **Active Standards**

**NIST CSF** 

DE.CM-8

## **Vulnerability Plan**

Ensure that a written vulnerability management plan is developed and implemented.

Yes, Partially

#### **Active Standards**

**NIST CSF** 

PR.IP-12

# **Identify Threats** Identify and document threats, both internal and external. **Active Standards NIST CSF** ID.RA-3 **Threat and Vulnerability Information** Yes, Fully Receive and respond to threat and vulnerability information from information sharing forums and sources and communicate to st.. **Active Standards NIST CSF** ID.RA-2 **Risk Determination** Determine risk using threats, vulnerabilities, likelihoods, and impacts. **Active Standards NIST CSF** ID.RA-5 **Risk Responses** Yes, Fully Risk responses are identified and prioritized. **Active Standards NIST CSF** ID.RA-6

# **Risk Management** Establish and manage risk management processes as agreed to by organizational stakeholders. **Active Standards NIST CSF** ID.RM-1 **Risk Tolerance** Organization risk tolerance is determined and clearly expressed. **Active Standards NIST CSF** ID.RM-2 **Risk Tolerance Alignment** No Risk management aligns with all legal and regulatory requirements, the organization's role in critical infrastructure, and a.. **Active Standards NIST CSF** ID.RM-3 **Newly-Identified Vulnerabilities** Ensure that newly identified vulnerabilities are mitigated or documented as accepted risks. **Active Standards NIST CSF** RS.MI-3

# **Triage Events** Analyze and triage events to support event resolution and incident declaration. **Active Standards NIST CSF** DE.AE-2 **Event Data Correlation** Yes, Fully Ensure that event data are aggregated and correlated from multiple sources and sensors. **Active Standards NIST CSF** DE.AE-3 **Event Impact Determination** Yes, Fully Ensure that the impact of events is determined. **Active Standards NIST CSF** DE.AE-4 ID.RA-4 RS.AN-2 **Incident Alert Thresholds** Yes, Fully Ensure that incident alert thresholds are established. **Active Standards NIST CSF** DE.AE-5

# **Physical Environment Monitoring** Yes, Fully **Active Standards NIST CSF** DE.CM-2 **Personnel Activity Monitoring** Yes, Fully Ensure that personnel activity is monitored to detect potential cybersecurity events. **Active Standards NIST CSF** DE.CM-3 **Malicious Code Detection** Yes, Fully Ensure that malicious code is detected. **Active Standards NIST CSF** DE.CM-4 **Mobile Code Detection** Yes, Fully Ensure that unauthorized mobile code is detected. **Active Standards NIST CSF** DE.CM-5

DE.DP-3

## **Monitor Service Provider Activity** No Ensure that external service provider activity is monitored to detect potential cybersecurity events. **Active Standards NIST CSF** DE.CM-6 Monitoring Ensure that monitoring the network for unauthorized personnel, connections, devices, and software is performed. **Active Standards NIST CSF** DE.CM-1 DE.CM-7 **Detection Compliance** Yes, Fully Ensure that detection activities comply with all applicable requirements. **Active Standards NIST CSF** DE.DP-2 **Test Detection Processes** Yes, Fully Ensure that detection processes are tested. **Active Standards NIST CSF**

## **Detection Information Communications** Yes, Fully Ensure that event detection information is communicated to appropriate parties. **Active Standards NIST CSF** DE.DP-4 **Improve Detection Processes** Yes, Fully Ensure that detection processes are continuously improved. **Active Standards NIST CSF** DE.DP-5 **Incident Response Plan** Yes, Fully Ensure that an effective Incident Response Plan is in place and managed. **Active Standards NIST CSF** RS.RP-1 **Contain Incidents** Yes, Fully Ensure that incidents are contained. **Active Standards NIST CSF** RS.MI-1

# Mitigate Incidents Yes, Fully Ensure that incidents are mitigated. **Active Standards NIST CSF** RS.MI-2 **Perform Forensics** Yes, Fully Ensure that forensics are performed. **Active Standards NIST CSF** RS.AN-3 **Categorize Incidents** Yes, Fully Ensure that incidents are categorized consistent with response plans. **Active Standards NIST CSF** RS.AN-4 **Understand Incident Impact** Yes, Fully Ensure that the impact of an incident is understood. **Active Standards NIST CSF** ID.RA-4

RS.CO-2

## **Investigate Detection System Notifications** Yes, Fully Ensure that notifications from detection systems are investigated. **Active Standards NIST CSF** RS.AN-1 **Personnel Incident Responsibilities** Yes, Fully Ensure that personnel know their roles, limitations, and order of operations when a response is needed. **Active Standards NIST CSF** RS.CO-1 **Incident Reporting Determination** Yes, Fully Determine that the incident meets the requiremends for reporting. **Active Standards NIST CSF** RS.CO-2 **Incident Documentation & Reporting** Ensure that events are documented and reported consistent with established criteria, including all legal and regulatory requi.. **Active Standards NIST CSF**

# **Incident Information Sharing** Ensure that information is shared consistent with response plans. **Active Standards NIST CSF** RS.CO-3 **Stakeholder Incident Coordination** Yes, Fully Ensure that coordination with stakeholders occurs consistent with response plans, legal advice, law enforcement requirements,.. **Active Standards NIST CSF** RS.CO-4 **Stakeholder Information Sharing** Yes, Fully Ensure that voluntary information sharing occurs with external stakeholders to achieve broader cybersecurity situational awar.. **Active Standards NIST CSF** RS.CO-5 **Response Plan Lessons Learned** Yes, Fully **Active Standards NIST CSF** RS.IM-1

# **Update Response Strategies** Yes, Fully Ensure response strategies are updated. **Active Standards NIST CSF** RS.IM-2 **Organization's Supply Chain Role** Yes, Fully Identify and communicate the organization's role in the supply chain. **Active Standards NIST CSF** ID.BE-1 Organization's Critical Infrastructure Role Identify and communicate the organization's role in critical infrastructure. **Active Standards NIST CSF** ID.BE-2 Workforce Cybersecurity Roles & Responsibilities Yes, Fully Establish and document cybersecurity roles and responsibilities within the workforce. **Active Standards NIST CSF** ID.AM-6

## **Roles & Responsibilities Coordination** Yes, Fully Coordinate and align information security roles & responsibilities with internal roles and external partners. **Active Standards NIST CSF** ID.GV-2 **Detection Roles & Responsibilities** Yes, Fully Ensure that roles and responsibilities for detection are well defined to ensure accountability. **Active Standards NIST CSF** DE.DP-1 **Privileged Users** Yes, Fully Ensure privileged users understand roles & responsibilities **Active Standards NIST CSF** PR.AT-2 **Third-Parties** Yes, Fully Ensure third-party stakeholders (e.g., suppliers, customers, partners) understand roles & responsibilities **Active Standards NIST CSF** PR.AT-3

# **Senior Executives** Yes, Fully Ensure senior executives understand roles & responsibilities. **Active Standards NIST CSF** PR.AT-4 **Physical Security Personnel** Yes, Fully Ensure physical security personnel understand their roles & responsibilities and are trained to perform them. **Active Standards NIST CSF** PR.AT-5 **Follow Incident Recovery Plan** Ensure the recovery plan is executed during or after an event. **Active Standards NIST CSF** RC.RP-1 **Recovery Plan Lessons Learned** Yes, Fully Ensure recovery plans incorporate lessons learned. **Active Standards NIST CSF** RC.IM-1

# **Update Recovery Strategies** Yes, Fully Ensure recovery strategies are updated. **Active Standards NIST CSF** RC.IM-2 **Manage Public Relations** Yes, Fully Ensure public relations are managed. **Active Standards NIST CSF** RC.CO-1 **Reputation Repair** Yes, Fully Ensure that the organization's reputation after an event is repaired. **Active Standards NIST CSF** RC.CO-2 **Communicate Recovery Activities** Ensure that recovery activities are communicated to internal stakeholders and executive and management teams. **Active Standards NIST CSF** RC.CO-3

## **Legal and Regulatory Requirements** Yes, Fully Identify and manage all legal and regulatory requirements. **Active Standards NIST CSF** ID.GV-3 **Written Cybersecurity Policies** Yes, Fully Write policies addressing all cybersecurity requirements. **Active Standards NIST CSF** ID.GV-1 Risk Assessment/Risk Analysis Yes, Fully Periodically conduct an accurate and thorough assessment of the risks to organizational operations (including mission, functi... **Active Standards NIST CSF** ID.RA-1 **Prioritize Risks** Yes, Fully Prioritize risks according to the defined risk categories, risk sources, and risk measurement criteria. **Active Standards NIST CSF** ID.GV-4

# **Identity Management** Manage identities and credentials for authorized devices and users. **Active Standards NIST CSF** PR.AC-1 **Physical Access Management** Yes, Fully Manage and protect physical access to assets. **Active Standards NIST CSF** PR.AC-2 **Remote Access Management** No Manage remote access to assets. **Active Standards NIST CSF** PR.AC-3 **Access Permission Management** No Manage access permissions, incorporating the principles of least privilege and separation of duties. **Active Standards NIST CSF** PR.AC-4

# **Network Segregation** No Protect network integrity, incorporating network segregation where appropriate. **Active Standards NIST CSF** PR.AC-5 **HR Cybersecurity Alignment** No Ensure that cybersecurity is included in human resources practices (e.g., deprovisioning, personnel screening). **Active Standards NIST CSF** PR.IP-11 **Unique User Identification** Yes, Fully Assign a unique name and/or number for identifying and tracking user identity. **Active Standards Identity Authentication** Yes, Fully Implement procedures to verify that a person or entity seeking access to data is the one claimed. **Active Standards Identify System Users** Yes, Fully Identify information system users, processes acting on behalf of users, or devices. **Active Standards**

# **Escort & Monitor Visitors** Yes, Fully Escort visitors and monitor visitor activity. **Active Standards Facility Security Plan** No Implement documented policies and procedures to safeguard the facility and the equipment therein from unauthorized physical a.. **Active Standards Physical Access Devices** No Control and manage physical access devices. **Active Standards Physical Access Logs** No Maintain audit logs of physical access. **Active Standards Protect Data** No Ensure data-at-rest (stored) is protected. **Active Standards NIST CSF** PR.DS-1

Manage Assets No
Ensure assets are formally managed throughout removal, transfers, and disposition.
Active Standards
NIST CSF
PR.DS-3
Ensure Adequate Capacity No
Ensure there is adequate capacity to ensure availability is maintained.
Active Standards
NIST CSF
PR.DS-4
Protect Against Data Leaks
Protections against data leaks are implemented.
Active Standards
NIST CSF
PR.DS-5
Integrity Checking
Integrity Checking  No  Use integrity checking mechanisms to verify software, firmware, and information integrity.
No
Use integrity checking mechanisms to verify software, firmware, and information integrity.

## **Separate Development & Testing Environments** No Separate development and testing environment(s) from the production environment. **Active Standards NIST CSF** PR.DS-7 Implement Life Cycle No Implement a System Development Life Cycle to manage systems. **Active Standards NIST CSF** PR.IP-2 **Change Controls** No Ensure configuration change control processes are in place. **Active Standards NIST CSF** PR.IP-3 **Data Destruction** No Ensure data is destroyed according to policy, including deleting data no longer required for business purposes, and beyond an.. **Active Standards NIST CSF** PR.IP-6

## **Improve Processes** No Continuously improve data protection processes. **Active Standards NIST CSF** PR.IP-7 **Share Effectiveness Information** No Share the effectiveness of protection technologies with appropriate parties. **Active Standards NIST CSF** PR.IP-8 **Protect & Restrict Removable Media** No Ensure that removable media is protected and its use restricted according to policy. **Active Standards NIST CSF** PR.PT-2 **Control & Limit Access** No Ensure that access to systems and assets is controlled, incorporating the principle of least functionality. **Active Standards NIST CSF** PR.PT-3

### **Install Patches & Updates**

Ensure that all software and firmware are updated with patches and updates within 7 days of becoming available, unless warnin..

No

#### **Active Standards**

#### Disposal

Implement policies and procedures to address the final disposition of electronic data and/or the hardware or electronic media..

Yes, Fully

#### **Active Standards**

## **Update Protection**

Update malicious code protection mechanisms when new releases are available.

Yes, Partially

#### **Active Standards**

### **Incident Management Process**

Establish an operational incident-handling capability for organizational systems that includes preparation, detection, analys..

No

### **Active Standards**

#### **NIST CSF**

PR.IP-9

#### **Scan Files**

Perform periodic scans of the information system and real-time scans of files from external sources as files are downloaded, ..

Yes, Partially

#### **Active Standards**

## 3/22/22, 5:29 PM Controls Assessment Perform & Control Maintenance & Repairs Yes, Fully Ensure maintenance and repair of organizational assets is performed and logged in a timely manner, with approved and controll.. **Active Standards NIST CSF** PR.MA-1 Manage Remote Maintenance Yes, Fully Ensure that remote maintenance of organizational assets is approved, logged, and performed in a manner that prevents unauthor.. **Active Standards NIST CSF** PR.MA-2 Cyber Security Standard 1 **Active Standards** Avis Supply Contract v1.0 ASC1

Cigna Insurance Policy v2.2

CP1

CISO's Requirements Gold

CS1

## Cyber Security Standard 2 Yes, Fully **Active Standards** Avis Supply Contract v1.0 ASC2 Cigna Insurance Policy v2.2 CP2 CISO's Requirements Gold CS2 Cyber Security Standard 3 Yes, Fully **Active Standards** Avis Supply Contract v1.0 ASC3 Cigna Insurance Policy v2.2 CP3 CP4 CISO's Requirements Gold CS3 **Administrative Requirements** Yes, Fully Administrative Requirements. A covered entity is required to comply with the administrative requirements of the Breach Notif.. **Active Standards Definitions: Breach - exceptions Unsecured PHI** Yes, Fully Breach means the acquisition, access, use, or disclosure of PHI in a manner not permitted under subpart E of this part which .. **Active Standards**

#### Notice to Individuals

A covered entity shall, following the discovery of a breach of unsecured protected health information, notify each individual..

Yes, Fully

#### **Active Standards**

#### **Timeliness of Notification**

A covered entity shall provide the notification without unreasonable delay and in no case later than 60 calendar days after d..

Yes, Fully

#### **Active Standards**

#### **Content of Notification**

The notification required by paragraph (a) of this section shall include, to the extent possible: (A) A brief description o..

Yes, Fully

#### **Active Standards**

#### **Notification by a Business Associate**

(a) Standard. (1) General Rule. A business associate shall, following the discovery of a breach of unsecured protected health..

Yes, Fully

### **Active Standards**

#### **Law Enforcement Delay**

If a law enforcement official states to a covered entity or business associate that a notification, notice, or posting requir..

Yes, Fully

#### **Active Standards**

#### **Burden of Proof**

In the event of a use or disclosure in violation of subpart E, the covered entity or business associate, as applicable, shall..

Yes, Fully

#### **Active Standards**

## **Training**

All workforce members must receive training pertaining to the Breach Notification Rule.

Yes, Partially

#### **Active Standards**

### **Complaints to the Covered Entity**

All covered entities must provide a process for individuals to complain about its compliance with the Breach Notification Rul..

Yes, Fully

#### **Active Standards**

#### **Sanctions**

All covered entities must sanction workforce members for failing to comply with the Breach Notification Rule.

Yes, Fully

#### **Active Standards**

## **Refraining from Retaliatory Acts**

All covered entities must have policies and procedures in place to prohibit retaliatory acts.

No

### **Active Standards**

### Waiver of rights

All covered entities must have policies and procedures in place to prohibit it from requiring an individual to waive any righ..

Yes, Fully

#### **Active Standards**

#### **Policies and Procedures**

All covered entities must have policies and procedures that are consistent with the requirements of the Breach Notification R..

Yes, Fully

#### **Active Standards**

#### **Documentation**

All covered entities must have policies and procedures in place for maintaining documentation.

Yes, Fully

#### **Active Standards**

#### Definitions: Breach - Risk Assessment.

Breach means the acquisition, access, use, or disclosure of PHI in a manner not permitted which compromises the security or p..

Yes, Partially

#### **Active Standards**

### **Uses and Disclosures**

Ensure that the covered entity or business associate does not use or disclose protected health information, except as permitt..

No

#### **Active Standards**

#### **HIPAA Privacy Rule**

§164.502(a)(1)

## Disclosures by whistleblowers

It is not considered a violation of the Privacy Rule if a staff member or business associate discloses PHI, as long as they b..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.502(j)(1)

### Disclosures by workforce members who are victims of a crime

The Privacy Rule is balanced to protect an individual's privacy while allowing important law enforcement functions to continu..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.502(j)(2)

#### **Business associate contracts**

The HIPAA Rules generally require that covered entities and business associates enter into contracts with their business asso..

No

### **Active Standards**

**HIPAA Privacy Rule** 

§164.504(e)

### Requirements for group health plans

A "group health plan" is one type of health plan and is a covered entity (except for self-administered plans with fewer than ..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.504(f)

#### Permitted uses and disclosures

A covered entity is permitted, but not required, to use and disclose protected health information, without an individual's au..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.506(a)

#### Consent for uses and disclosures

The Privacy Rule permits, but does not require, a covered entity voluntarily to obtain patient consent for uses and disclosur..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.506(b); (b)(1); and (b)(2)

## Authorizations for uses and disclosures is required

An "authorization" is required by the Privacy Rule for uses and disclosures of protected health information not otherwise all..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.508(a)(1-3) and §164.508(b)(1-2)

### **Compound authorizations -- Exceptions**

Compound authorizations. An authorization for use or disclosure of protected health information may not be combined with any ..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.508(b)(3)

# Prohibition on conditioning of authorizations

A covered entity may not condition the provision to an individual of treatment, payment, enrollment in the health plan, or el..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.508(b)(4)

# Uses and Disclosures for which an Authorization is Required – Documentation and Content

Documentation. A covered entity must document and retain any signed authorization under this section. Implementation specifi..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.508(b)(6) and §164.508(c)(1-4)

# **Covered Entities: Required Disclosures**

Ensure that the covered entity discloses protected health information as required to an individual and to the Office for Civi..

Yes, Partially

### **Active Standards**

**HIPAA Privacy Rule** 

§164.502(a)(2)

## Use and Disclosure for Facility Directories; Opportunity to Object

Standard: Use and disclosure for facility directories. (1) Permitted uses and disclosure. Except when an objection is express..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.510(a)(1) and §164.510(a)(2)

# **Uses and Disclosures for Facility Directories in Emergency Circumstances**

Emergency circumstances. (i) If the opportunity to object to uses or disclosures cannot practicably be provided because of th..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.510(a)(3)

## Permitted uses and disclosures

Standard: Uses and disclosures for involvement in the individual's care and notification purposes (1) Permitted uses and dis..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.510(b)(1)

# Uses and disclosures with the individual present

Standard: Uses and disclosures for involvement in the individual's care and notification purposes Uses and disclosures with ..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.510(b)(2)

## Limited uses and disclosures when the individual is not present

Limited uses and disclosures when the individual is not present. If the individual is not present, or the opportunity to agre..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.510(b)(3)

3/22/22, 5:29 PM Controls Assessment

# Uses and disclosures for disaster relief purposes No Standard: Uses and disclosures for involvement in the individual's care and notification purposes Uses and disclosures for d.. **Active Standards HIPAA Privacy Rule** §164.510(b)(4) Uses and disclosures when the individual is deceased Yes, Fully Standard: Uses and disclosures for involvement in the individual's care and notification purposes. Uses and disclosures when .. **Active Standards HIPAA Privacy Rule** §164.510(b)(5) Uses and disclosures required by law No A covered entity may use or disclose protected health information to the extent that such use or disclosure is required by la.. **Active Standards HIPAA Privacy Rule** §164.512(a) Uses and disclosures for public health activities No Standard: Uses and disclosures for public health activities. (1) Permitted uses and disclosures. A covered entity may use or.. **Active Standards HIPAA Privacy Rule** §164.512(b)

# Disclosures about victims of abuse, neglect or domestic violence

Standard: Disclosures about victims of abuse, neglect or domestic violence (1) Permitted disclosures. Except for permitted re..

Yes, Fully

### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(c)

## **Disclosures to Business Associates**

A covered entity may disclose protected health information to a business associate and may allow a business associate to crea..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.502(e)

# Uses and disclosures for health oversight activities

Standard: Uses and disclosures for health oversight activities (1) Permitted disclosures. A covered entity may disclose prot..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(d)

# Disclosures for judicial and administrative proceedings

Permitted disclosures. A covered entity may disclose protected health information in the course of any judicial or administra..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(e)

§164.512(f)(4)

# Disclosures for law enforcement purposes Yes, Fully Adult abuse, neglect, or domestic violence may be reported to a law enforcement official authorized by law to receive such re.. **Active Standards HIPAA Privacy Rule** §164.512(f)(1) Disclosures for law enforcement purposes - for identification and location -Yes, Fully Permitted disclosures: Limited information for identification and location purposes. Except for disclosures required by law, ... **Active Standards HIPAA Privacy Rule** §164.512(f)(2) Disclosures for law enforcement purposes-- PHI of a possible victim of a crime Yes, Fully Permitted disclosure: Victims of a crime. Except for disclosures required by law, a covered entity may disclose protected hea.. **Active Standards HIPAA Privacy Rule** §164.512(f)(3) Disclosures for law enforcement purposes-- an individual who has died as a result of suspected criminal conduct No Permitted disclosure: Decedents. A covered entity may disclose protected health information about an individual who has died .. **Active Standards HIPAA Privacy Rule**

# Disclosures for law enforcement purposes: crime on premises

Permitted disclosure: Crime on premises. A covered entity may disclose to a law enforcement official protected health informa..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(f)(5)

## Disclosures for law enforcement purposes

Permitted disclosure: Reporting crime in emergencies. A covered health care provider providing emergency health care in resp..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(f)(6)

#### Uses and disclosures about decedents

Standard: Uses and disclosures about decedents. (1) Coroners and medical examiners. A covered entity may disclose protected ..

Yes, Fully

### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(g)

# Uses and disclosures for cadaveric organ, eye or tissue donation

Standard: Uses and disclosures for cadaveric organ, eye or tissue donation purposes. A covered entity may use or disclose p..

Yes, Fully

### **Active Standards**

**HIPAA Privacy Rule** 

§164.512(h)

**HIPAA Privacy Rule** 

§164.512(k)(1)

# 3/22/22, 5:29 PM Controls Assessment **Business Associates: Permitted Uses and Disclosures** Yes, Fully A business associate may use or disclose protected health information only as permitted or required by its business associat... **Active Standards HIPAA Privacy Rule** §164.502(a)(3) Uses and disclosures for research purposes -- Permitted Uses and Disclosures Yes, Fully Standard: Uses and disclosures for research purposes (1) Permitted uses and disclosures. A covered entity may use or disclose.. **Active Standards HIPAA Privacy Rule** §164.512(i)(1) Uses and disclosures for research purposes -- Documentation of Waiver Approval No Standard: Uses and disclosures for research purposes (2) Documentation of waiver approval. For a use or disclosure to be perm.. **Active Standards HIPAA Privacy Rule** §164.512(i)(2) Uses and disclosures for specialized government functions -- Military No Standard: Uses and disclosures for specialized government functions. (1) Military and veterans activities (i) Armed Forces .. **Active Standards**

# 3/22/22, 5:29 PM Controls Assessment Uses and disclosures for specialized government functions -- National Security and intelligence activities No National security and intelligence activities. A covered entity may disclose protected health information to authorized feder.. **Active Standards HIPAA Privacy Rule** §164.512(k)(2) Uses and disclosures for specialized government functions -- Protective Services Yes, Fully Protective services for the President and others. A covered entity may disclose protected health information to authorized Fe.. **Active Standards HIPAA Privacy Rule** §164.512(k)(3) Uses and disclosures for specialized government functions - Correctional institutions Yes, Fully Medical suitability determinations.- A covered entity that is a component of the Department of State may use protected health.. **Active Standards HIPAA Privacy Rule** §164.512(k)(5) Uses and disclosures for specialized government functions – Providing public benefits

Covered entities that are government programs providing public benefits. (i) A health plan that is a government program provi..

Yes, Fully

**Active Standards** 

**HIPAA Privacy Rule** 

§164.512(k)(6)

# Disclosures for workers' compensation

Standard: Disclosures for workers' compensation. A covered entity may disclose protected health information as authorized by ..

Yes, Fully

#### **Active Standards**

#### **HIPAA Privacy Rule**

§164.512(l)

# Requirements for De-Identification of PHI & Re-Identification of PHI

Implementation specifications: Requirements for de-identification of protected health information. A covered entity may deter..

No

#### **Active Standards**

#### **HIPAA Privacy Rule**

§164.502(d)

§164.514(b) & §164.514(c)

# Standard: Minimum Necessary & Minimum Necessary Uses of PHI

Standard: Minimum necessary (1) Minimum necessary applies. When using or disclosing protected health information or when req..

No

### **Active Standards**

### **HIPAA Privacy Rule**

§164.502(b)

§164.514(d)(1)-§164.514(d)(2)

# Health Plan prohibited uses and disclosures of genetic information for underwriting purposes

Yes, Fully

Health plans may not use or disclose genetic information for underwriting purposes.

#### **Active Standards**

#### **HIPAA Privacy Rule**

§164.502(a)(5)(i)

## Minimum Necessary - Disclosures of PHI

Implementation specification: Minimum necessary disclosures of protected health information. (i) For any type of disclosure ..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.514(d)(3)

## Minimum Necessary requests for protected health information

Implementation specifications: Minimum necessary requests for protected health information. (i) A covered entity must limit a..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.514(d)(4)

## Minimum Necessary - Other content requirement

Implementation specification: Other content requirement. For all uses, disclosures, or requests to which the requirements in ..

Yes, Partially

### **Active Standards**

**HIPAA Privacy Rule** 

§164.514(d)(5)

## **Limited Data Sets and Data Use Agreements**

Standard: Limited data set. A covered entity may use or disclose a limited data set that meets the requirements, if the cover..

Yes, Partially

## **Active Standards**

**HIPAA Privacy Rule** 

§164.514(e)

3/22/22, 5:29 PM Controls Assessment

# **Uses and Disclosures for Fundraising**

Fundraising communications. (1) Standard: Uses and disclosures for fundraising. A covered entity may use, or disclose to a b..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.514(f)

# Uses and Disclosures for Underwriting and Related Purposes

Standard: Uses and disclosures for underwriting and related purposes. If a health plan receives protected health information ..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.514(g)

## **Verification Requirements**

Standard: Verification requirements. Prior to any disclosure, a covered entity must: Verify the identity of a person requesti..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.514(h)

# **Notice of Privacy Practices**

Right to notice. An individual has a right to adequate notice of the uses and disclosures of protected health information tha..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.520(a)(1) & (b)(1)

# 3/22/22, 5:29 PM Controls Assessment **Content requirements** Yes, Fully Required elements. The covered entity must provide a notice that is written in plain language and that contains the elements .. **Active Standards HIPAA Privacy Rule** §164.520(a)(1) & (b)(1) **Provisions of Notice - Health Plans** Yes, Fully Implementation specifications: Provision of notice. A covered entity must make the notice required by this section available .. **Active Standards HIPAA Privacy Rule** §164.520(c)(1) **Deceased individuals** Yes, Fully PHI related to deceased individuals is protected for 50 years after their death. **Active Standards HIPAA Privacy Rule** §164.502(f) Provisions of Notice - Certain Covered Health Care Providers

Specific requirements for certain covered health care providers. A covered health care provider that has a direct treatment r..

No

**Active Standards** 

**HIPAA Privacy Rule** 

§164.520(c)(2)

#### **Provision of Notice - Electronic Notice**

Specific requirements for electronic notice. (i) A covered entity that maintains a web site that provides information about t..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.520(c)(3)

# **Joint Notice by Separate Covered Entities**

Implementation specifications: Joint notice by separate covered entities. Covered entities that participate in organized heal..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.520(d)

#### **Documentation**

Implementation specifications: Documentation. A covered entity must document compliance with the notice requirements, by reta..

Yes, Partially

# **Active Standards**

**HIPAA Privacy Rule** 

§164.520(e)

# Right of an Individual to Request Restriction of Uses and Disclosures

Standard: Right of an individual to request restriction of uses and disclosures. (i) A covered entity must permit an individ..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.522(a)(1)

## **Restricted Uses and Disclosures**

A covered entity that has agreed to a restriction pursuant to § 164.522(a)(1) may not use or disclose the protected health in..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.502(c)

# **Terminating a Restriction**

Implementation specifications: Terminating a restriction. A covered entity may terminate a restriction, if: (i) the individ..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.522(a)(2)

#### **Documentation**

Implementation specification: Documentation. A covered entity must document a restriction.

Yes, Fully

### **Active Standards**

**HIPAA Privacy Rule** 

§164.522(a)(3)

# **Confidential Communications Requirements**

Standard: Confidential communications requirements. (i) A covered health care provider must permit individuals to request an..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.522(b)(1)

3/22/22, 5:29 PM Controls Assessment

## Right to access

Standard: Access to protected health information. (1) Right of access. Except as otherwise provided, an individual has a righ..

No

#### **Active Standards**

## **HIPAA Privacy Rule**

 $\S164.524(a)(1), (b)(1), (b)(2), (c)(2), (c)(3), (c)(4), (d)(1), (d)(3)$ 

## Personal representatives

The personal representative stands in the shoes of the individual and has the ability to act for the individual and exercise ..

Yes, Fully

#### **Active Standards**

## **HIPAA Privacy Rule**

§164.502(g)

#### **Denial of Access**

Implementation specifications: Denial of access. If the covered entity denies access, in whole or in part, to protected healt..

Yes, Fully

# **Active Standards**

## **HIPAA Privacy Rule**

§164.524(d) (2)

# Unreviewable grounds for denial

Standard: Access to protected health information. (2) Unreviewable grounds for denial. A covered entity may deny an individua..

No

#### **Active Standards**

#### **HIPAA Privacy Rule**

§164.524(a)(2)

3/22/22, 5:29 PM Controls Assessment

# Reviewable grounds for denial

Standard: Access to protected health information. (3) Reviewable grounds for denial. A covered entity may deny an individual ..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.524(a)(3)

#### Review of denial of access

Standard: Access to protected health information. (4) Review of a denial of access. If access is denied on a permitted ground..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.524(a)(4) & (d)(4)

#### **Documentation**

Implementation specification: Documentation. A covered entity must document the following and retain the required documentati..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.524(e)

# Right to Amend

Standard: Right to amend. (1) Right to amend. An individual has the right to have a covered entity amend protected health inf..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.526(a)(1)

# **Denying the Amendment**

Standard: Right to amend. (2) Denial of amendment. A covered entity may deny an individual's request for amendment, if it det..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.526(a)(2)

# **Accepting the Amendment**

Implementation specifications: Accepting the amendment. If the covered entity accepts the requested amendment, in whole or in..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.526(c)

# **Denying the Amendment**

Implementation specifications: Denying the amendment. If the covered entity denies the requested amendment, in whole or in pa..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.526(d)

# Right to an Accounting of Disclosures of PHI

Right to an accounting of disclosures of protected health information. (1) An individual has a right to receive an accountin..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.528(a)

## **Confidential communications**

Health plans and covered health care providers must permit individuals to request an alternative means or location for receiv.

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.502(h)

# **Content of the Accounting**

Implementation specifications: Content of the accounting. The covered entity must provide the individual with a written accou..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.528(b)

# **Provision of the Accounting**

Implementation specifications: Provision of the accounting. (1) The covered entity must act on the individual's request for a..

Yes, Partially

# **Active Standards**

**HIPAA Privacy Rule** 

§164.528(c)

#### **Documentation**

Implementation specification: Documentation. A covered entity must document the following and retain the documentation: (1) ..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.528(d)

# Personnel designations

(a)(1) Standard: Personnel designations. (i) A covered entity must designate a privacy official who is responsible for the d..

Yes, Partially

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(a)

# **Training**

Standard: Training. A covered entity must train all members of its workforce on the policies and procedures with respect to p..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(b)

# **Safeguards**

Standard: Safeguards. A covered entity must have in place appropriate administrative, technical, and physical safeguards to p..

Yes, Partially

# **Active Standards**

**HIPAA Privacy Rule** 

§164.530(c)

# **Complaints to the Covered Entity**

Standard: Complaints to the covered entity. A covered entity must provide a process for individuals to make complaints conce..

No

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(d)(1)

# 3/22/22, 5:29 PM Controls Assessment **Complaints to the Covered Entity** No Implementation specification: Documentation of complaints. A covered entity must document all complaints received, and their .. **Active Standards HIPAA Privacy Rule** §164.530(d)(2) **Sanctions** Yes, Fully Standard: Sanctions. A covered entity must have and apply appropriate sanctions against members of its workforce who fail to .. **Active Standards HIPAA Privacy Rule** §164.530(e)(1) Mitigation Yes, Fully Standard: Mitigation. A covered entity must mitigate, to the extent practicable, any harmful effect that is known to the cove... **Active Standards HIPAA Privacy Rule** §164.530(f) Uses and disclosures consistent with notice No Uses and disclosures of protected health information must be consistent with the entity's

notice of privacy practices.

**Active Standards** 

**HIPAA Privacy Rule** 

§164.502(i)

# Refraining from Intimidating or Retaliatory Acts

Standard: Refraining from intimidating or retaliatory acts. A covered entity— (1) May not intimidate, threaten, coerce, di..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(g)

# Waiver of rights

Standard: Waiver of rights. A covered entity may not require individuals to waive their HIPAA rights, as a condition of the ..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(h)

#### **Policies and Procedures**

Standard: Policies and procedures. A covered entity must implement policies and procedures with respect to protected health i..

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(i)

#### **Documentation**

Standard: Documentation. A covered entity must: (i) Maintain the policies and procedures in written or electronic form; (ii) ...

Yes, Fully

#### **Active Standards**

**HIPAA Privacy Rule** 

§164.530(j)