



OCR HIPAA Audit Participant Survey

The Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services (HHS) is responsible for administering and enforcing the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy, Security, and Breach Notification Rules. Between 2016 and 2017, your organization was selected as an auditee as part of OCR's HIPAA Audit Program. Your participation provided OCR with important information on covered entities and their business associates compliance with selected standards and implementation specifications of the Privacy, Security, and Breach Notification Rules.

OCR is requesting Audit Program participants to complete the below survey. The survey is voluntary and anonymous, and we encourage your open and honest feedback. Your participation in this survey will help OCR evaluate the effectiveness of the last audit and identify areas of improvement for future audits.

Please respond to all questions on behalf of the regulated entity that you represent, and not in your individual capacity as an employee, except where such perspective is necessary in order to answer the question fully. The responses provided will not be used by OCR in connection with any enforcement activity relating to a specific entity. Under the Freedom of Information Act, OCR may be required to release information received in response to this survey.

The survey will be closed in 60 days.

Thank you in advance for your candor and willingness to participate in this survey to provide insights that will help OCR to evaluate and improve the HIPAA Audit Program.

1. Did representatives of OCR clearly communicate the objectives of the audit after your entity was selected to participate? *

- Yes, from the start.
- Yes, after participating in a webinar or searching out other OCR guidance.
- Yes, but only in response to our entity's questions.
- No, (please explain below).

2. If you answered "No" to Q#1, please explain your response:

3. Did your entity feel it was adequately informed throughout the audit process? *

- Yes.
- No, should have been more frequently and thoroughly informed.

4. If you answered "No" to Q 3 above, please provide explanation or additional comments below:

5. Were OCR's instructions regarding providing data in response to the audit questions clear and easy to follow? *

- Yes.
- No, (please explain below).

6. If you answered "No" to Q 5 above, please explain your response:

7. The audit questions were: *

- written clearly.
- required minor clarification.
- required substantial clarification.

8. Providing the requested data was: *

- not burdensome.
- somewhat burdensome.
- overly burdensome.

9. Did the online submission portal for submitting materials to OCR function as expected? *

- Yes.
- No (please explain below).

10. If you answered "No" to Q 9 above, please explain your response:

11. Was the online portal for submitting materials to OCR easy to use and user-friendly? *

- Yes.
- No.

12. Did your entity utilize OCR's audit protocol to prepare its responses, found at <https://www.hhs.gov/hipaa/for-professionals/compliance-enforcement/audit/protocol/index.html>? *

- Yes, and it was helpful.
- Yes, but it was not helpful.
- No, did not need to refer to it.
- No, was unaware of it.

13. Did your entity use other OCR reference and guidance materials in addition to the Audit Protocol to assist in responding to the audit questions? *

Yes, (please describe below).

No.

14. If you answered "Yes" to Q 13 above, please provide additional information:

15. Did your entity use reference materials outside of those provided by OCR to clarify what was expected from participating in the audit? *

Yes, (please describe below).

No.

16. If you answered "Yes" to Q 15 above, please provide additional information:

17. Did your entity utilize the opportunity to respond to OCR about the preliminary audit report? *

- Yes, and the communication was helpful.
- Yes, but the communication was not helpful.
- No, did not have any information to add.

18. After your entity was selected to participate in the OCR audit *but before the audit was complete*, did your entity make any changes to its HIPAA practices, policies, and/or procedures? *

- Yes
- No

19. If yes, what changes were made? Check all that apply: *

- Notice of Privacy Practices (including content and provision of notice).
- Right of Access.
- Breach Notification (including timeliness, content, and BA notification to CE).
- Security Risk Analysis
- Security Risk Management.
- Other (please describe below).
- No changes were made.

20. If you answered "Other" in response to Q 19 above, please describe:

21. Did your entity make changes to its HIPAA practices, policies, and/or procedures based on OCR's audit findings (*i.e.* after the audit was completed)? *

Yes

No

22. If your entity made changes to its HIPAA practices, policies, and/or procedures based on OCR's audit findings, please select what changes your entity made: *

Notice of Privacy Practices (including content and provision of notice).

Right of Access.

Breach Notification (including timeliness, content, and BA notification to CE).

Security Risk Analysis

Security Risk Management.

Other (please describe below).

No changes were made.

23. If your entity made changes in response to its participation in OCR's audit (whether during the audit or after the audit was completed), please describe whether the changes made are *

- still employed.
- have since been revised.

24. Has your entity observed a decrease in HIPAA related complaints following the changes made pursuant to OCR's audit? *

- Yes, it has decreased.
- No, it has not decreased.
- It has neither increased nor decreased.
- Not applicable.

25. Has your entity observed a decrease in workforce members violating your entity's HIPAA policies following the changes made pursuant to OCR's audit? *

- Yes, it has decreased.
- No, it has not decreased.
- It has neither increased nor decreased.
- Not applicable.

26. If another audit of your entity was conducted by OCR today, do you believe the results would be generally the same? *

- Yes, because our HIPAA policies or procedures were compliant, and we have not made any changes since then.
- Yes, because our HIPAA policies or procedures were found to be deficient, and we have not made any changes since then.
- No, because our HIPAA policies or procedures were not compliant, but we have since made changes.

27. Approximately how many hours did it take to respond to the audit requests? *

- less than 10 hours.
- between 10 and 20 hours.
- between 20 and 40 hours.
- over 40 hours.

28. Did the audit process accurately and fairly evaluate your entity's compliance with the parts of the HIPAA Rules on which it was assessed? *

- Yes
- No (please explain below).

29. If you answered "No" to Q 28 above, please provide an explanation:

30. Has the audit process improved your entity's overall understanding of HIPAA compliance? *

Yes

No

31. Has the information provided by OCR during and after the audit process helped your entity better implement HIPAA compliance after the audit? *

Yes (please explain below).

No (please explain below).

32. Please explain your response to Q 31 above:

33. Did your participation in the audit contribute to your understanding of OCR's enforcement authority and jurisdiction? *

Yes (please explain below).

No (please explain below).

34. Please explain your response to Q 33 above:

35. If offered the opportunity to participate in another audit that focused on compliance with different parts of the HIPAA Rules, would your entity elect to do so?

Yes

No

Unsure

36. What other provisions of the HIPAA Rules, if any, should OCR include in future audits?

37. What do you believe was the most beneficial aspect of the audit and why?

38. What do you believe was the least beneficial aspect of the audit and why?

39. If you could change any part of the audit process, what would you change and why?

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