

Opinion Letter Regarding HIPAA Compliance

October 5, 2021

Henry County
Board of Supervisors
100 E. Washington Street
Mount Pleasant, Iowa 52641

On behalf of Henry County Iowa, (“Henry”) Carosh Compliance Solutions has conducted a risk assessment of your organization as required by 45 CFR 164.308(a)(1)(ii)(A) of the HIPAA and HITECH Acts, as amended. This opinion relates solely to the location(s) assessed. The Carosh Compliance Solutions assessment utilized a questionnaire and methodology aligned with the compliance requirements of the healthcare industry. Areas covered in the assessment include those areas described in “Appendix A” attached. Carosh relied on representation from the management of Henry as to the accuracy and completeness of information provided in the Assessment Questionnaire. No testing was performed by Carosh to validate the information provided, to us, by Henry.

Carosh Assessments allow Henry to realize the benefits of aligning with best practices and leveraging the NIST 800-30 Risk Management Guide, COBIT, HITECH and HIPAA regulations. Compliance is designed to occur along an incremental path towards compliance and an ongoing Risk Management process. Henry is actively moving along the HIPAA and HITECH compliance path in a measured way, realizing the benefits of a common means to assess security controls and communicate compliance.

Relying on information published by the Department of Human and Health Services (“HHS”), Henry meets the requirements under 45 CFR 164.308(a)(1), including the requirement to “Implement security measures sufficient to reduce risks and vulnerabilities to a reasonable and appropriate level to comply with 45 CFR §164.306(a).”

Further relying on statements published by HHS, Henry’s risk management process may be used to drive the timeline for the implementation of security updates and correction of security deficiencies. To realize HIPAA compliance,

Henry need not attest that a specific security update has been implemented or a specific security deficiency has been corrected by the date of this letter, as the timing of security updates and deficiency corrections is driven by the Henry’s risk management process.

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Thank you for this opportunity to assist Henry in pursuing HIPAA and HITECH compliance and its overall Risk Management effort. Please do not hesitate to contact Carosh Compliance Solutions LLC at Compliance@Carosh.com, or (312) 239-0529, should you have any questions or comments.

Congratulations on engaging in this process, giving your clientele confidence in the security and privacy of their protected health information.

Sincerely,



Roger Shindell, MS, CHPS, CISA, CIPM
President & CEO

Appendix A

Security

§164.306 - General Rules

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§164.308 - Administrative Safeguards

§164.310 - Physical Safeguards

§164.312 - Technical Safeguards §164.314 - Organizational Requirements

§164.316 - Policies and Procedures and Documentation Requirement

Privacy

§164.502 - Uses and Disclosures of Protected Health Information, General Rules

§164.504 - Uses and Disclosures of Protected Health Information - Organizational Requirements

§164.508 - Uses and Disclosures for an Authorization is Required

§164.512 - Uses and Disclosures for which consent, an authorization, or opportunity to agree or object is not required

§164.514 - Other Requirements Related to Uses and Disclosures of Protected Health Information

§164.522 - Rights to Request Privacy Protection for Protected Health Information

§164.524 - Access of Individuals to Protected Health Information

§164.526 - Amendment of Protected Health Information

§164.528 - Accounting of Disclosures of Protected Health Information

§164.530 - Administrative Requirements

§164.400 - HITECH Specifications

Additional Areas

Preventing Health Care Fraud and Abuse

Impact of the Use of Mobile Devices on HIPAA Compliance

Impact of Social Media on HIPAA Security

Business Associate and Sub-contractor Relationships