

Healthcare Communications HIPAA Checklist

Did you know the penalties for HIPAA non-compliance?

HIPAA violations can result in **significant financial penalties per incident**, depending on the level of culpability.

HIPAA Civil Penalty Structure (Per Violation)

Culpability Level	Minimum Penalty	Maximum Penalty	Annual Cap
1. No Knowledge	\$100	\$50,000	\$25,000
2. Reasonable Cause	\$1,000	\$50,000	\$100,000
3. Willful Neglect (Timely Corrected)	\$10,000	\$50,000	\$250,000
4. Willful Neglect (Not Timely Corrected)	\$50,000	\$50,000	\$1,500,000

☐ Business Associate Agreement (BAA) Requirement

- ☐ A **signed Business Associate Agreement (BAA)** is in place with all phone, fax, VoIP, and cloud communication vendors
- ☐ The BAA clearly defines vendor responsibilities for safeguarding PHI
- ☐ Vendors are prohibited from accessing or using PHI outside of permitted purposes
- ☐ BAAs are reviewed periodically and updated as services change

Key Legal Requirements & Best Practices

☐ Secure Transmission

- ☐ **Encryption:** Digital and cloud faxes are encrypted in transit (and at rest where applicable)
- ☐ **Secure Systems:** Use encrypted internet fax services or secure physical fax machines in locked areas

- ☐ **Verification:** Fax numbers are verified before sending to prevent misdirection
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☐ **Administrative Safeguards**

- ☐ **Policies & Training:** Written fax policies exist and staff are trained on proper PHI handling
 - ☐ **Access Controls:** Fax machines and software are restricted to authorized users only (no shared passwords)
 - ☐ **Audit Trails:** Logs track fax activity (who sent/received, when, and destination)
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☐ **Physical Safeguards**

- ☐ **Secure Location:** Physical fax machines are placed in restricted or locked areas
 - ☐ **Unattended Faxes:** PHI-containing faxes are never left unattended or publicly visible
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☐ **Fax Cover Sheets (Required for Physical/Hybrid Faxing)**

- ☐ **Confidentiality Disclaimer:** States the fax contains confidential medical information
 - ☐ **No PHI Displayed:** Patient names or identifiers are not shown on the cover sheet
 - ☐ **Required Details:** Sender/recipient names, fax numbers, date/time, and “destroy if misdirected” notice
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HIPAA Phone & Voicemail Compliance Requirements

☐ **Secure Phone Communications**

- ☐ PHI is only discussed with verified patients or authorized representatives
- ☐ Identity verification procedures are used before sharing PHI by phone
- ☐ Staff avoid discussing PHI in public or unsecured areas
- ☐ Minimum necessary information is shared during calls

☐ **Voicemail & Messaging Safeguards**

- ☐ Voicemail messages do not include sensitive PHI unless authorized
- ☐ Generic voicemail greetings are used (no diagnosis or detailed information)
- ☐ Secure voicemail systems require PINs or authentication
- ☐ Voicemail messages containing PHI are retained and deleted according to policy

☐ **Call Recording & Monitoring (If Used)**

- ☐ Call recording is disabled unless explicitly required and authorized
- ☐ Patients are notified if calls are recorded
- ☐ Recordings containing PHI are encrypted and access-controlled
- ☐ Retention policies align with HIPAA requirements

☐ **Phone System & Vendor Compliance**

- ☐ Phone and VoIP vendors sign a BAA
- ☐ Calls and voicemails are encrypted where supported
- ☐ System access is role-based (no shared extensions or logins)
- ☐ Audit logs exist for call activity and voicemail access

Disclaimer: This checklist is provided for informational purposes only and is not intended as legal or compliance advice. Organizations should consult qualified legal or compliance professionals to address their specific obligations under HIPAA.