Office of Civil Rights HIPAA Audit - Entity Screening Questionnaire (ESQ) Overview for OSI Practices

Entity Screening Questionnaire from the Office of Civil Rights (OCR) is a notice of the OCR’s process as they formalize the formal random audit program for all healthcare entities. The information below reviews the ESQ, process with steps to take, and basic guidance on the questions OSI doctors will most-likely see on the questionnaire.

*The ESQ is to be completed using the link in the ESQ email sent to the Health Care Provider contact email. It is important to note that the link in the email is unique for each recipient. If there are any issues or problems, the doctor should contact OCR directly via email at OSOCRAudit@HHS.gov.*

COMPONENTS

I. **Objective and Instructions** – Includes a short description of the process and what information will be needed to gather prior to starting.

II. **Contact Information and Entity Type Information** – Verification of contact information, address, phone number, and type of entity (health care provider, health plan, health care clearinghouse, or business associate). There are four entity options (Check all that apply):

   - **Health Care Provider**: an individual that provides health care services to patients. Most OSI clients would only fall into this category.
   - **Health Plan**: an individual or group that provides or pays the costs of medical care (these are normally health insurance companies – OSI clients would not be considered Health Plans).
   - **Health Care Clearinghouse**: an entity that process health information received from one entity and translates it to a standard or non-standard format for transmission to another entity – OSI clients would not be considered Health Care Clearing houses.
   - **Business Associate**: a non-covered entity (A covered entity is one of the three above) that uses, or has access to, PHI while providing services to a covered entity (OSI is considered a non-covered entity).

III. **Questionnaire** – Many of the questions on the template only apply to specific entity types. While the OCR template is comprised of 30 questions, the actual questionnaire will be only 13 – 16 questions in total. OSI doctors should be selecting Health Care Provider as their entity type, so only Health Care Provider questions will be shown. All information presented on the questionnaire is required.

IV. **Review and Submit** – The final section will review all questions, along with the answers provided. If there are any errors, go back and correct them using the QUESTIONNAIRE button at the top of the screen and adjusting the answers, review again, and submit the questionnaire once finished.

PROCESS

I. Review the questionnaire template and information.

II. Gather all information needed before completing the questionnaire. However, if the questionnaire is started and missing information is needed to answer a question, click the SAVE button at the
bottom of the screen to save the progress and return later to complete the questionnaire using the same email link provided by the OCR.

III. Follow the link in the email sent by the OCR (Note: Each recipient has a unique link)

IV. Read instructions and overview page.

V. Verify all contact information is correct and fill in any missing or incorrect information. If there are multiple phone numbers available and would like to include, there is a link to add phone numbers with type (cell, work, home, etc.). Only one is required and it should be one at which the doctor can be reached during business hours.

VI. At the bottom of the contact page is a place to add an additional, secondary, contact along with an email address and phone number. It would be worthwhile to include a second contact that would be reliable, an office manager perhaps. This should not be an OSI contact – it needs to be a contact within the practice.

VII. Once completed, click CONTINUE to move forward to the Questionnaire.

VIII. All questions require an answer. If there is a question for which the answer is not applicable, it should be answered, “Not applicable.” For example, if asked how many beds are in the facility (a reference to hospital beds for patients), the answer would be “Not applicable.”

IX. Once all questions are completed REVIEW all entries made. If there are any errors, click the QUESTIONNAIRE button at the top of the page to return to the questionnaire, make any corrections, and continue onto the REVIEW page.

X. Once the review is satisfactory, Click SUBMIT. A confirmation that the questionnaire was submitted and the OCR email address should there be any questions will appear.

QUESTIONS
OSI clients are considered Health Care Providers. The questions reviewed below are those likely to be on a questionnaire for the Health Care Provider entity type selection.

Notes:
- OCR questions may change, be added, or removed, as the OCR fine tunes their process. As such, the questions below are provided as a guide and may not exactly match what is presented on the questionnaire.
- Contact and Entity Information includes the legal name of the entity (i.e. legal name of the LLC, corporation, etc. of the doctor’s practice), the name of the doctor/primary contact and the entity information selection.

Q: Entity is Public or Private
- OSI’s current clients would answer PRIVATE as they are not a publicly traded company.

Q: Entity is Single Location Only (the primary operations and any support activities are co-located) or Multi-Location (the organization has multiple service delivery sites and/or separate support facilities)?
- OSI doctors should select the proper response. A location would include any office in which business is conducted, not just where clinical work is performed.

Q: Is your organization part of, affiliated with, or otherwise owned or controlled by another organization?
- OSI doctors typically own their own practices (usually in the form of an LLC or corporate).
- If YES is selected (meaning another company owns the practice or this is a partnership with multiple doctors), two additional fields will need to be completed: The name of the owning company or individual and the nature of the ownership – such as 50% partner, corporation, etc.

Q: Are you a HIPAA covered Entity? Yes or No
   - OSI doctors will answer YES. A covered entity is one of the three listed in the HIPAA regulations (health care provider, health plan, or health care clearinghouse).

Q: Does your organization or another entity on your behalf, conduct health care transactions (such as submitting a claim for payment, checking patient health plan eligibility or benefit coverage, or receipt of payment or remittance advice) in electronic form?
   - OSI doctors will answer YES. As a health care provider, either they, or a business associate (in many cases OSI) will be performing these tasks. The only way the answer will be NO to this question is if the practice uses paper only and does not use any online or electronic services for any item listed in the question.

Q: What type of health care provider are you (hospital, urgent care, skilled nursing, etc.)?
   - OSI doctors should answer with their specialty, Orthodontist, Pediatric Dentist, etc.

Q: How many patient visits in the prior fiscal year?
   - This information should be available in the dental practice management software.

Q: How many patient beds do you have (if applicable)?
   - The answer should be “Not Applicable” or Zero (if a number is required).

Q: What is the current number of clinicians on staff or with privileges in the facility(ies)?
   - This includes the OSI doctor, as well as any associates or other doctors working within the practice, all locations. This does not include office managers, front desk staff, clinical assistants...etc. – only the doctors.

Q: Do you maintain or transmit protected health information in electronic format? Yes or No
   - Answer YES, unless the practice is entirely paper-based with no electronic version of patient information.

Q: Do you use electronic medical records? Yes or No
   - Answer YES. A dental practice management package (DPM) is a subset of an electronic medical record (EMR) and would be considered appropriate for this question. The only potential NO answer would be a practice is entirely paper-based.

Q: What is the total revenue for the most recent fiscal year?
   - This is a single dollar amount of top-line revenue for the practice’s last full fiscal year. If the practice is new and has not closed a full fiscal year, then the answer would be zero.