Who Is This For?

Designed for **healthcare leaders and vendors** responsible for IT, compliance, and risk oversight, including:

- CIOs, CISOs, IT Directors
- Compliance & privacy officers
- Healthcare executives
- Vendors and MSPs that access or manage ePHI
- Organizations preparing for CMS/ OCR audits or executive and board-level review

Free HIPAA Readiness Review

Meet with our security team and get clarity on what the new HIPAA enforcement changes require for your organization.

- See how the requirements apply to you
- Identify gaps against the new prescriptive standards
- Understand risk exposure, documentation needs, and what action you need to take now

Scan the QR code to schedule your free review.

Start Your HIPAA Self-Check

Not ready to book the review yet? Start here.

Scan the QR code to **Download the HIPAA Security Rule Impact Matrix** and:

- Identify where your current safeguards fall short of enforcement
- See what documentation, testing, and proof will be required
- Stay current as HIPAA Security Rule enforcement guidance evolves

The **Most Significant** HIPAA Security Rule Enforcement Changes in Over a Decade Are Coming

Flexibility is GONE. Proof is REQUIRED.

ARE YOU READY?

CONTINUOUS

What's Changing?

The HIPAA Security Rule update **moves away from flexible, "addressable" standards**, establishing mandatory requirements with clear regulatory expectations.

Here are several of the key enforcement changes:

- MFA everywhere ePHI is accessed (not just VPN or remote access)
- Encryption at rest AND in transit
- Vulnerability scanning at least every 6 months
- Annual penetration testing
- 72-hour restoration of critical systems
- Annual compliance audits
- Annual written verification of Business Associate safeguards
- Network segmentation
- Required written policies, reviews, testing, and proof — on a defined schedule

CONTINUOUS

HIPAA Security Rule Enforcement Changes

Why This Matters

Non-compliance is no longer just a theoretical risk — the Office for Civil Rights is actively pursuing enforcement actions with significant financial consequences. OCR enforcement is already escalating:

- Over $6.6M in HIPAA fines issued in 2025
- Penalties ranging from $25,000 to $3M
- Risk analysis failures cited in most recent enforcement actions

If you cannot produce documented evidence of ownership, testing, and governance on demand, you create immediate exposure.

What To Do Now

Getting ahead of these changes requires immediate action, not a wait-and-see approach.

Here are five actions healthcare leaders should start this week:

- Run a gap analysis against the proposed requirements
- Audit every control previously labeled "addressable"
- Verify Business Associate compliance in writing
- Document decisions, testing, and reviews
- Establish formal governance over technology risk

Organizations are not penalized for lacking effort — **they are penalized for lacking proof.**