HIPAA Binder

The HIPAA forms and policies private practices are required to have.

SAMPLE

Every HIPAA Binder is built to order for one practice, where profession, state, and billing setup shape every document. Here is what the complete binder contains, plus real excerpts from a finished one. *(This sample was built for a counseling practice; yours is built for yours.)*

WHAT'S IN THE COMPLETE BINDER

#	DOCUMENT	RULE IT IS DESIGNED TO SATISFY
01	Covered Entity Determination, walked through for your billing setup	45 CFR 160.103
02	Notice of Privacy Practices (NPP)	164.520
03	NPP Acknowledgment of Receipt	164.520(c)(2)(ii)
04	Business Associate Agreement + a filled vendor table for your actual stack	164.502(e), 164.504(e)
05	Security Risk Assessment workbook, profile pre-filled	164.308(a)(1)(ii)(A)
06	Privacy and Security Policies and Procedures	164.500 / 164.302 et seq.
07	Breach Notification Procedures, federal plus your state's law	164.400–164.414
08	Patient Rights Forms (access, amendment, restriction, accounting, authorization)	164.524, .526, .522, .528, .508

Plus a README adoption checklist and **30 days of free revisions** after delivery.

EXCERPT: NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

(This header is required word for word by 45 CFR 164.520(b)(1)(i).)

Get a copy of your health and billing records *(45 CFR 164.524)*

- You can ask to see or get a copy of your health and billing records, including your intake assessments, treatment plans, and progress notes. Ask us how to do this; we have a simple form.
- We will provide a copy or a summary, usually within 30 days of your request. We may charge a reasonable, cost-based fee for copies.

EXCERPT: COVERED ENTITY DETERMINATION

HIPAA applies to a health care provider only if it is a **covered entity**. Under 45 CFR 160.103, that turns on whether the practice **transmits health information electronically in connection with a covered transaction**, not on the fact that it keeps records. The field genuinely splits:

- **Insurance-based / in-network practices** file electronic claims and eligibility checks. They are covered entities.

- **Private-pay-only practices** that never electronically transmit a covered transaction may fall outside HIPAA, though state licensure and confidentiality law still apply.

We work this out for your exact setup first, so you never pay for documents you do not need.

> **Every policy cites the regulation that requires it.** Nothing in the binder is boilerplate you have to take on faith; you can check each clause against the source. That is also what makes the documents defensible if anyone ever asks to see them.

Your binder is built for your practice. Tell us your profession and state and we will tell you exactly which documents you need, including if the answer is "less than you think." → **hipaabinder.com**