

Compliance Isn't an Afterthought—It's the Bedrock of Your Practice.

For mid-market medical groups (50—200 providers), staying compliant isn't just about avoiding fines—it's about protecting patient trust, securing reimbursements, and enabling growth.







A single HIPAA violation can cost \$50,000+ per incident.

A MIPS penalty can wipe out up to **9% of Medicare revenue.**

And CMS audits are becoming more frequent, detailed, and unforgiving.

Yet most mid-market practices don't have full-time compliance officers. You're wearing multiple hats—overseeing operations, managing revenue, and now, interpreting complex regulations.

This Mid-Market Healthcare Compliance Toolkit gives you exactly what you need: clear guidance, and technology-backed strategies to simplify HIPAA compliance, navigate CMS regulations, and build a culture of accountability—without overwhelming your team. And don't miss the Athelas HIPAA Audit Checklist at the end of this white paper that calculates your compliance score to get an idea of where you're at.

SECTION 1: Key Regulations Impacting Mid-Market Practices

Here are the core rules keeping administrators up at night—and what they mean for your organization:

Regulation	What It Covers	Mid-Market Impact	
HIPAA	Privacy, security, breach notification	Every patient record, email, and text must be encrypted and tracked	
MIPS / MACRA	Quality reporting, cost, improvement activities	Up to ±9% Medicare payment adjustment	
CMS Interoperability Rules	Patient access to records, API standards	Must provide data within 48 hours of request	
No Surprises Act	Good faith estimates, dispute resolution	Required for all self-pay and out-of- network billing	
OSHA & CLIA	Workplace safety, lab standards	Annual training and documentation required	

Start with HIPAA and MIPS—they account for more than 80% of audit triggers in mid-sized medical groups.

SECTION 2: Common Compliance Dangers (and How to Get Around Them)

Even well-intentioned practices fall into these traps:



Outdated Policies

Fix: Review HIPAA policies annually using the HIPAA Policy Update Checklist (included in your toolkit).



Untrained Staff

Fix: Run quarterly 15-minute compliance huddles. Use our Staff Training Slide Deck—ready to present.



Unsecured Communication

Fix: Prohibit unencrypted email for PHI. Use secure messaging platforms with audit logs instead.



Incomplete Risk Assessments

Fix: Complete the Annual Security Risk Assessment Template (takes under 2 hours).



Poor Documentation

Fix: Log every training, breach drill, and policy review. Store in a centralized, encrypted folder accessible only to leadership.

Confidence Boost

Practices that document every compliance action reduce audit penalties by *up to 60%*.

SECTION 3: Technology's Role in Simplifying Compliance

You don't need a full compliance department—just the right digital tools.

Modern platforms can automate much of your compliance workload:

Secure Data Management

Automatic encryption, access controls, and full audit trails for every user action.

11.

Automated MIPS Reporting

Pulls quality metrics directly from your EHR—no manual spreadsheets.

(1)

Breach Detection Alerts

Flags unusual data access before it becomes a reportable incident.



EHR-Agnostic Integration.

Works seamlessly with Epic, Cerner, and athenahealth—no workflow disruption.



Real-Time Eligibility & Prior Authorization

Reduces billing errors that commonly trigger CMS audits.

Case Example: One 120-provider group cut audit prep time from 40 hours to 4 using automated compliance dashboards.

SECTION 4: Your 90-Day Compliance Implementation Roadmap

This phased plan helps your team go from reactive to proactive—fast.



MONTH 1

Assess & Organize



Complete the Security Risk
Assessment Template (included)



Update HIPAA policies and Business Associate Agreements



Conduct staff training using the included Compliance Training Slides



Automate & Secure



Enable secure messaging and twofactor authentication for all logins



Turn on automated eligibility checks and MIPS data capture



Set up real-time breach monitoring alerts

MONTH 3

Test & Document



Run a mock CMS audit using your provided checklist



Compile all documentation in your Compliance Binder (digital or physical)



Schedule quarterly review meetings and assign owners for follow-up actions

The Athelas Advantage: Compliance Built In

Athelas delivers HIPAA-compliant RCM, EHR, and Ambient Al Scribe—all on one secure platform. With Athelas, compliance isn't a separate project—it's part of your daily workflow.

Baked-in protections include:



End-to-end encryption and rolebased access



Automatic audit logs for every transaction



Real-time MIPS data aggregation



Secure, EHR-integrated AI scribe



No long-term contracts

Book a demo with Athelas to see how we help practices like yours simplify regulatory adherence—without adding new systems or staff.

Sources

- 1. MGMA: Compliance and Risk Management Benchmarks (2024)
- 2. HHS Office for Civil Rights: HIPAA Audit Protocol (2025)
- 3. CMS: MIPS 2025 Final Rule Summary
- 4. KLAS Research: RCM Services for Mid-Market Providers (2025)
- 5. Health Affairs: Financial Impact of Compliance Failures (2024) https://www.healthaffairs.org/doi/10.1377/ hlthaff.2023.0156

Help your practice complete the Annual Security Risk Assessment mentioned in Section 2 and Month 1 of the roadmap—identifying and prioritizing potential HIPAA and CMS compliance risks.

Category	Assessment Question	Risk Level (Low/Med/High)	Mitigation Action	Owner	Due Date
HIPAA Security	Are all PHI storage systems encrypted and access-controlled?				
HIPAA Privacy	Are staff trained on minimum necessary access?				
Technical Safeguards	Is two-factor authentication active for all logins?				
Administrative Safeguards	Do we have current Business Associate Agreements (BAAs) on file?				
CMS / MIPS	Are quality measures auto-captured from the EHR without manual edits?				
Incident Response	Is there a breach response plan tested within the last 12 months?				
Documentation	Are audit logs automatically generated and stored securely?				

Add your total "High" risk items. If you have more than 3, schedule a leadership review within 30 days and apply mitigation actions using your Compliance Binder.

Template 2: Quarterly Staff Compliance Training Log

Ensure staff are up to date on HIPAA, MIPS, and safety protocols—and that every session is documented to reduce audit penalties.

Quarter	Q1	Q2	Q3	Q4
Date				
Topic / Module	HIPAA refresher: Secure Messaging & PHI Handling	CMS / MIPS: Documentation Accuracy & Timely Reporting	OSHA / CLIA: Safety & Lab Standards	Cybersecurity Drill: Phishing Response Simulation
Trainer				
Attendance %				
Key Takeaway or Update				
Follow-Up Action				
Completion Verified By				

Store signed attendance sheets or digital completion reports in your encrypted Compliance Binder. Upload your slide deck to a shared folder so staff can review asynchronously.

Template 3: Annual Policy Review Tracker

Maintain all key compliance policies current, approved, and properly distributed.

Policy Name	Last Review Date	Reviewer	Required Update? (Y/N)	Notes/ Changes	Next Review Date	Distribution Verified?
HIPAA Privacy & Security Policy						
Breach Notification Procedure						
MIPS / Quality Reporting SOP						
Business Associate Agreements (BAAs)						
Secure Messaging Policy						
OSHA / CLIA Compliance Manual						

Reminders

- Schedule automatic review alerts every 12 months.
- Record approvals digitally (e-signature acceptable under HIPAA).
- Archive all retired versions securely—auditors may request prior policy versions.