



OCR Resolution Agreements
January 1, 2025 through September 30, 2025

OCR Headline	Date	Organization	Violation Type	Monetary Penalty	Corrective Action Plan	Violation Details
HHS Office for Civil Rights Settles 8 th Ransomware Investigation with Elgon Information Systems ¹	January 7, 2025	Elgon Information Systems	Ransomware	\$80,000	Review and update Security Risk Assessment (SRA); update Risk Management Plan (RMP); review, revise, and distribute written policies & procedures	Elgon failed to conduct accurate and thorough SRA
HHS Office for Civil Rights Settles 9 th Ransomware Investigation with Virtual Private Network Solutions ²	January 7, 2025	Virtual Private Network Solutions, LLC	Ransomware	\$90,000	Conduct SRA annually; develop and implement RMP; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA; conduct breach risk assessment to ascertain that all affected individuals and individuals were notified	VPN Solutions failed to conduct accurate and thorough SRA
HHS Office for Civil Rights Settles HIPAA Security Rule Investigation with USR Holdings, LLC Concerning the Deletion of Electronic Protected Health Information	January 8, 2025	USR Holdings, LLC	Cyber Breach (Unauthorized Third-Party Access to ePHI)	\$337,750	Conduct SRA annually; implement process for evaluating environmental and operational changes; develop, review, revised, and distribute written policies & procedures to comply with HIPAA	USR failed to conduct accurate and thorough SRA, regularly review its information system activity, and establish/implement procedures to create and maintain retrievable exact copies of ePHI
HHS Office for Civil Rights Settles HIPAA Phishing Cybersecurity Investigation with Solara Medical Supplies, LLC for \$3,000,000	January 14, 2025	Solara Medical Supplies, LLC	Cyber Breach (phishing attack led to compromise of multiple employee email accounts, exposed ePHI)	\$3,000,000	Conduct SRA; develop and implement RMP; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	Solara failed to conduct accurate and thorough SRA, implement security measures to protect ePHI, and failed to provide timely breach notification to individuals, the media, and HHS
HHS Office for Civil Rights Settles HIPAA Case Against Memorial Healthcare System over Patient Access to Records	January 15, 2025	Memorial Healthcare System	Right of Access	\$60,000	Details of a potential CAP were not disclosed	MHS failed to provide timely access to PHI
HHS Office for Civil Rights Settles HIPAA Ransomware	January 15, 2025	Northeast Surgical Group	Ransomware	\$10,000	Conduct SRA; develop and implement RMP; develop, maintain, revise, and distribute	NESG failed to conduct accurate and thorough SRA

¹ The sub-headline of OCR’s press release stated, “OCR’s settlement marks OCR’s 2nd enforcement action in OCR’s Risk Analysis Initiative.”

² The sub-headline of OCR’s press release stated, “Settlement marks OCR’s 3rd enforcement action in OCR’s Risk Analysis Initiative.”

Cybersecurity Investigation for \$10,000 ³						written policies & procedures to comply with HIPAA; workforce training	
HHS Office for Civil Rights Imposes \$1,500,000 Civil Money Penalty Against Warby Parker in HIPAA Cybersecurity Hacking Investigation	February 20, 2025	Warby Parker	Cyber Breach (Customer Accounts Hacked, ePHI Exposed)	\$1,500,000		Details of a potential CAP were not disclosed	Warby Parker failed to conduct accurate and thorough SRA, implement adequate security measures, and monitor system activity
HHS Office for Civil Rights Imposes \$200,000 Penalty Against Oregon Health & Science University for Failure to Provide Timely Access to Patient Records	March 6, 2025	Oregon Health and Science University	Right of Access	\$200,000		Details of a potential CAP were not disclosed	OHSU failed to provide timely access to patient records for over 16 months after receiving the initial request.
HHS Office for Civil Rights Settles HIPAA Security Rule Investigation with Health Fitness Corporation ⁴	March 21, 2025	Health Fitness Corporation	Cyber Breach (ePHI accessible via Internet)	\$227,816		Conduct SRA annually; develop and implement RMP; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA	Health Fitness failed to conduct accurate and thorough SRA
HHS Office for Civil Rights Settles HIPAA Security Rule Investigation with Northeast Radiology	April 4, 2025	Northeast Radiology, P.C.	Cyber Breach (Unauthorized Access to ePHI)	\$350,000		Conduct SRA annually; develop and implement RMP; implement process to review records of information system activity review; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	NERAD failed to conduct accurate and thorough SRA
HHS Office for Civil Rights Settles HIPAA Ransomware Cybersecurity Investigation with Public Hospital	April 17, 2025	Guam Memorial Hospital Authority	Ransomware	\$25,000		Conduct SRA annually; develop and implement RMP; implement process to review records of information system activity review; develop, maintain, and revise written policies & procedures to comply with HIPAA; workforce training	GMHA failed to conduct accurate and thorough SRA
HHS Office for Civil Rights Settles Phishing Attack Breach with Health Care Network for \$600,000	April 23, 2025	PIH Health, Inc.	Cyber Breach (Numerous Employee Email Accounts Compromised through Phishing, Exposed ePHI)	\$600,000		Conduct SRA annually; develop and implement RMP; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	PIH failed to conduct accurate and thorough SRA, and failed to notify affected individuals, media, and HHS of the breach within 60 days
HHS Office for Civil Rights Settles HIPAA Ransomware Cybersecurity Investigation with Neurology Practice	April 25, 2025	Comprehensive Neurology, PC	Ransomware	\$25,000		Conduct SRA; develop and implement RMP; review, revise, and distribute written	Comprehensive failed to conduct SRA

³ The sub-headline of OCR's press release stated, "Settlement with Northeast Surgical Group marks OCR's 10th ransomware enforcement action and 4th enforcement action in OCR's Risk Analysis Initiative."

⁴ The sub-headline of OCR's press release stated, "Settlement Marks the 5th Enforcement Action in OCR's Risk Analysis Initiative."

					policies & procedures to comply with HIPAA; workforce training	
Resolution Agreement with Vision Upright MRI	May 15, 2025	Vision Upright MRI LLC	Cyber Breach (ePHI accessible via Internet)	\$25,000	Conduct SRA no less than annually; develop and implement RMP; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	VUM has never conducted an accurate and thorough SRA and failed to notify individuals of the breach within 60 days
HHS Office for Civil Rights Settles HIPAA Security Rule Investigation with BayCare Health System, Inc.	May 28, 2025	BayCare Health System, Inc.	Cyber Breach (Unauthorized Access to Printed and Electronic PHI)	\$800,000	Conduct SRA and review annually; develop and implement RMP; review, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	BayCare failed to implement proper access control policies, sufficient security measures, and system activity review procedures for accessing ePHI
Comstar, LLC Resolution Agreement and Corrective Action Plan ⁵	May 30, 2025	Comstar, LLC	Ransomware	\$75,000	Conduct Security Risk Analysis (SRA); develop and implement Risk Management Plan (RMP); review, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	Comstar failed to conduct accurate and thorough SRA
HHS' Office for Civil Rights Settles HIPAA Security Rule Investigation with a Behavioral Health Provider	July 7, 2025	Deer Oaks – The Behavioral Health Solution	Ransomware and Cyber Breach (ePHI accessible via Internet)	Undisclosed	Conduct accurate and thorough SRA; develop and implement RMP; develop, maintain, revise, and distribute written policies & procedures to comply with HIPAA; workforce training	Deer Oaks failed to conduct accurate and thorough SRA, and disclosed PHI in an unpermitted manner
HHS' Office for Civil Rights Settles HIPAA Ransomware Investigation with Syracuse ASC	July 23, 2025	Syracuse ASC, LLC	Ransomware	\$250,000	Conduct accurate and thorough SRA; develop and implement RMP; review, revise, and distribute written policies & procedures concerning breach notification to comply with HIPAA; workforce training	Syracuse failed to conduct accurate and thorough SRA; failed to timely notify HHS and individuals impacted by breach and
HHS' Office for Civil Rights Settles HIPAA Ransomware Security Rule Investigation with BST & Co. CPAs, LLP	August 18, 2025	BST & Co. CPAs, LLP (Business Associate)	Ransomware	\$175,000	Conduct accurate and thorough SRA; develop, maintain, revise, and distribute RMP to comply with HIPAA; workforce training	BST failed to assess potential risks and vulnerabilities to ePHI

⁵ The sub-headline of HHS's press release stated, "Settlement Marks OCR's 13th Ransomware Enforcement Action and 9th Enforcement Action in OCR's Risk Analysis Initiative."