Policy & Procedure

WEBER HUMAN SERVICES

HIPAA / PRIVACY COMPLAINTS

	NUMBER
	11
	APPROVED
	2/21/2014
	REVIEWED
	5/11/2017
	REVISED

PURPOSE

To ensure that an effective complaint process is in place to deal with privacy violations. The process is to include:

- Identification of a privacy designee who is responsible for receiving complaints.
- A method for documenting receipt of complaints and their resolution.
- Assurance that no individual will be required to waive their rights to file a complaint with the Department of Health and Human Services.

POLICY

It is the policy of this Facility to ensure the privacy of Protected Health Information ("PHI") as well as to ensure that such information is used and disclosed in accordance with all applicable laws and regulations. Any concerned individual has the right to file a formal complaint concerning privacy issues without fear of reprisal. Such issues could include, but are not limited to, allegations that:

- PHI that was used/disclosed improperly;
- Access or amendment rights were wrongfully denied; or
- The Facility's *Notice of Privacy Practices* does not reflect current practices accurately.

PROCEDURE

- 1. All clients or their personal representatives will be notified of their right to complain to the Facility or the Department of Health and Human Services in the Facility's *Notice of Privacy Practices*.
- 2. All concerns may be registered by telephone, mail, or in person.
- 3. Upon receipt of a complaint about a Facility's privacy policies or its compliance with those policies or the law, the complaint will be recorded on a Grievance form.
- 4. The Privacy Officer will follow the Grievance Policy to resolve the complaint.
- 5. The Facility will not intimidate, threaten, coerce, discriminate, penalize, or take other retaliatory action against a client who exercises his/her rights under HIPAA or against any client who participates in a process governed by the HIPAA Privacy Regulations. The prohibition also applies to:
 - a. Individual and/or client complaints filed with the Secretary of HHS;
 - b. Testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing arising under the HIPAA Privacy Regulations; or

- c. Opposing any act or practice of the facility, provided the individual or client, as appropriate, has a good faith belief that the practice opposed is unlawful, and the manner of opposition is reasonable and does not disclose PHI in violation of the HIPAA Privacy Regulations.
- 6. **No waiver.** No client or individual will be asked to waive his/her HIPAA rights, including the right to file a complaint about the use or disclosure of his/her PHI.