HIPAA-12: Privacy Complaints Policy

Effective Date: 12-01-2015 Last Revised: 7-17-2017

Scope of Policy

This policy governs the privacy complaints process for **TCS**. All personnel of **TCS** must comply with this policy. Demonstrated competence in the requirements of this policy is an important part of the responsibilities of every member of the workforce.

Assumptions

- □ **TCS** must comply with HIPAA and the HIPAA implementing regulations pertaining to privacy complaints in accordance with the requirements at § 164.530(a) and § 164.530(d), as amended by the HITECH Act of 2009 (ARRA Title XIII), and the HIPAA Omnibus Final Rule (Effective Date: March 26, 2013).
- ☐ HIPAA regulations, at § 164.530(g), prohibit intimidating or retaliatory acts against any person or patient who files a privacy complaint or exercises any Right guaranteed under HIPAA.

Policy Statement

- ☐ It is the Policy of **TCS** to respond in a timely and positive manner to all complaints submitted by any persons or parties, including patients, workforce members, and any other person or party.
- Responsibility for the acceptance of, management of, and responses to complaints shall reside with the designated HIPAA Privacy Officer, in consultation with the agency's Executive Director.

Procedures

- ☐ All complaints must be submitted in written form, dated and signed by the complainant.
- **TCS** shall investigate and respond to all complaints with a written response within <u>30 days</u> of the time each complaint is submitted in writing. If more time is required to investigate and resolve a specific complaint, the complainant shall be notified in writing within <u>30 days</u> of the time each complaint is submitted in writing, that additional time is required to investigate and resolve the complaint. In no case shall more than <u>60 days</u> elapse between the time a complaint is submitted in writing and the resolution of the complaint.
- ☐ The designated HIPAA Privacy Officer shall investigate each and every complaint in a fair, impartial, and unbiased manner. All parties named in the complaint, or who participated in events leading to the complaint, shall be interviewed in a non-threatening and non-coercive manner. In the event that the HIPAA Privacy Officer is the subject of the formal complaint filed, the Security Officer will assumer responsibility of the investigation and handling of the complaint.
- ☐ The final resolution or disposition of each complaint shall be documented in accordance with **TCS**'s Documentation Policy, and shall be retained in accordance with **TCS**'s Documentation Retention Policy.
- ☐ The final resolution or disposition of each complaint shall be documented and a summary of the findings shall be provided to the complainant within 30 days of the time each complaint is submitted in writing, unless the additional 30-days of response time is invoked, as above.
- ☐ In addition to providing complainants with a written response to their complaint, complaints that are found to have merit will be resolved with some remediation that is appropriate to the severity of the situation. Such remediation may include, but are not limited to:
 - A written apology to the complainant from our organization.
 - Credit-monitoring service for the complainant for a period of one or two years, paid for by our organization, when the complaint involves a breach of unsecured individually identifiable health information that has been compromised or put at risk by our actions.
 - Financial compensation, if determined to be appropriate by legal counsel and senior management.
 - Sanctions against workforce members, as appropriate to the circumstances.

 Other unspecified remediation(s), as determined by legal counsel and senior management. For complaints submitted to the federal government, it is the Policy of TCS to cooperate fully and openly with federal authorities as they conduct their investigation, as specified in TCS's HHS Investigations Policy. No officer, agent, employee, contractor, temporary worker, or volunteer of TCS shall obstruct or impede any investigation in any way, whether internal or federal.

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