

Standard Operating Policies – SOP # 3: HIPAA Privacy Complaints and Possible Disciplinary Action

Title:	HIPAA Privacy Complaints and Possible Disciplinary Action	Effective Date:	10/03/2014
Author:	Privacy Officer	Last Review Date:	12/01/2021
Location:	All Locations	Last Revision Date:	12/01/2021
Functional Area:	ADMINISTRATION		

POLICY

In recognition of the paramount importance of the privacy of PHI, Liberty's Workforce members shall abide by the HIPAA Privacy Compliance Program (Program). Any violation by a member of the Liberty Workforce of the Program or associated Standard Operating Procedures ("SOPs") shall be grounds for disciplinary action up to and including termination of employment or contract termination.

PROCEDURE

- Anyone who knows or has reason to believe that an individual's privacy or confidentiality has been violated, or another person has violated the Program shall report the matter promptly to his or her supervisor OR Liberty's Privacy Officer OR Liberty's Chief Compliance Officer (CCO) OR call Liberty's Employee Help Line at 1-800-653-7174. If the violation may have resulted in a breach of unsecured PHI, Liberty's Workforce members shall report the violation to the Security Officer.
- 2. Liberty's Privacy Officer in collaboration with the CCO, Chief Operating Officer and General Counsel shall respond and investigate all reported complaints that do not include a security rule violation or Security SOP violation and take steps to remedy the situation when appropriate. Any complaints about the Security SOPs shall be brought to the attention of Liberty's Security Officer for investigation and response.
- 3. Whenever possible, Liberty's Privacy Officer shall make every effort to handle the reported matter confidentially.
- 4. Liberty shall not intimidate, threaten, coerce, discriminate against or take any other retaliatory action against any individual for voicing a concern or complaint or testify, assist or participate in any investigation or proceeding concerning a possible violation of HIPAA. Any attempt to retaliate against a person reporting a violation of the Program will itself be considered a violation of Compliance SOP #7 that may result in disciplinary action up to and including termination of employment or contract termination with Liberty.
- 5. Upon conclusion of the investigation, Liberty's Privacy Officer shall prepare a written report with findings and conclusions that have been reviewed with Liberty's CCO, Chief Operating Officer and General Counsel. If employee discipline is recommended, these collaborative findings and conclusions will be sent to Liberty's Vice President of Human Resources. The Vice President of Human Resources in collaboration with General Counsel will make the final determination of the appropriate disciplinary action or contract action based upon the written report.

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<u>Sample of Possible Disciplinary Action/Contract Modification Matrix – All final disciplinary actions are made collaboratively by the Vice President of Human Resources and General Counsel</u>

Level and Definition of Violation	Example of Violation	Action Steps
Accidental and/or due to lack of clarity	Improper disposal of PHI Improper protection of records (i.e. leaving information unattended on a desk) First Offenses	Re-Training on HIPAA Oral Warning with documented discussion of SOPs and requirements
Purposeful violation of Privacy SOPs or an unacceptable number of previous violations	Accessing or using PHI without having a legitimate need to do so Not forwarding appropriate information or requests to Liberty's Privacy Officer for processing	Re- Training on HIPAA Written warning with documented discussion of SOPs and requirements Potential Termination of Employment or Contract Termination
Purposeful violation of Privacy SOPs with associated potential for individual harm	Disclosure of PHI to unauthorized individual or company Sale of PHI to any source Any uses or disclosures that could invoke harm to an individual	Termination of Employment or Contract Termination
Multiple violations	Repeated occurrences of any of the above examples or other violations	Any sanction described above, up to and including termination of employment or contract termination

Approved By:				
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Revision History

Version	Date	Author	Summary of Changes
#1	10/03/2014	Judith Ann Shields	Initial ISF release – refactor and update of previous security policies into distinct documents
#2	12/22/2015	Judith Ann Shields	Annual review, Attorney reviewed no changes. Added inactivity lock requirement

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#3	12/22/2016	Judith Ann Shields	Annual review, Attorney reviewed no changes. Added inactivity lock requirement
#4	12/22/2017	Judith Ann Shields	Annual review, Attorney reviewed no changes. Added inactivity lock requirement
#5	12/22/2018	Judith Ann Shields	Annual review, Attorney reviewed no changes. Added inactivity lock requirement
#6	12/22/2019	Judith Ann Shields	Annual review, Attorney reviewed no changes. Added inactivity lock requirement
#7	11/02/2020	Judith Ann Shields	Annual review, Attorney reviewed Added © to LHC & Security Officer extension. Added inactivity lock requirement
#8	12/01/2021	John Beck	Annual review and made minor changes. Added inactivity lock requirement

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