

Title/Subject: **HIPAA: CLIENT COMPLAINTS RELATED TO PROTECTED HEALTH INFORMATION
REPORTS OF BREACH OF PRIVACY AND SECURITY OF PHI**

Applies to: faculty staff students student employees visitors contractors

Effective Date of This Revision: April 14, 2003

Contact for More Information: **HIPAA Privacy Officer**
Plan Administrator **Health Services Director**
Rowe Hall 108 **Foust Hall 249**
989.774.3661 **989.774.3944**

Communication Disorders Director
Moore Hall 454
989.774.3726

Board Policy Administrative Policy Procedure Guideline

BACKGROUND:

Central Michigan University is a covered entity under the HIPAA law and regulations. According to this law, all CMU officers, employees, and agents must preserve the integrity and the confidentiality of individually identifiable health information (IIHI) pertaining to each patient or client. This IIHI is protected health information (PHI) and shall be safeguarded to the highest degree possible in compliance with the requirements of the security and privacy rules and standards established under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

PURPOSE:

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its rules direct covered entities to provide a process for individuals to lodge complaints regarding the handling of protected health information (PHI) and for employees to report possible violations of HIPAA law or rules or CMU's HIPAA policies and procedures. This policy establishes a process for clients or patients to register complaints regarding CMU's privacy policy and procedures and/or its compliance with those policies and procedures. This policy also informs persons of their right to file complaints with the Secretary, US Department of Health and Human Services.

DEFINITIONS:

The terms used in this policy have the same meaning as those terms in the Health Insurance Portability and Accountability Act of 1966, Public Law 104-191 and the regulations at 45 CFR Parts 160, 162, and 164.

Authority: R. Kohrman, Provost; G. E. Ross, VP of FAS
History: No Prior History
Indexed as: HIPAA Complaint Disposition, HIPAA Complaint Process

Title/Subject: **HIPAA: CLIENT COMPLAINTS RELATED TO PROTECTED
HEALTH INFORMATION
REPORTS OF BREACH OF PRIVACY AND SECURITY OF PHI**

POLICY:

- 1.0** Persons who believe that CMU or its employees or agents may have violated the requirements of HIPAA law or rules, or CMU's HIPAA policies and procedures may file a complaint either with the HIPAA Complaint Officer or any HIPAA Privacy Officer. Any officer, employee or agent of CMU who believes another officer, employee or agent of CMU has breached CMU's HIPAA privacy or security policies and/or procedures or otherwise breached the integrity or confidentiality of patient or client or other sensitive information shall immediately report the alleged breach to his or her superior or to the HIPAA Complaint Officer. Supervisors who receive reports of alleged breach of the HIPAA privacy or security policies and/or procedures shall immediately report the allegation to the HIPAA Complaint Officer.
- 2.0** Persons who believe that CMU or its employees or agents may have violated the requirements of HIPAA law or rules may also file a complaint with the Secretary of the U.S. Department of Health and Human Services.
- 3.0** CMU's Notice of Privacy Practices, distributed to clients, patients, and participants in health plans, shall include a notification of the offices with which complaints may be filed or possible violations may be reported. The CMU HIPAA Complaint Officer shall document all complaints received and the disposition of those complaints. Documentation shall be retained as required by law.
- 4.0** No CMU officer, employee or agent shall intimidate, threaten, coerce, discriminate against, or take other retaliatory action against any individual who files a complaint with the agency or with the Secretary of Health and Human Services.
- 5.0** An officer, employee or agent who discriminates or retaliates against an individual who files a complaint to CMU or the Secretary shall be subject to disciplinary action up to and including termination.

PROCEDURE:

1.0 COMPLAINT PROCESS

- 1.1 Communicating Process to Clients.** CMU's Notice of Privacy Practices shall direct individuals to submit a complaint regarding management of PHI to CMU's HIPAA Complaint Officer or any HIPAA Privacy Officer. The Notice shall also indicate that a complaint can be made directly to the Secretary of Health and Human Services (HHS). The Notice shall notify clients of the availability of complaint forms at the reception desk of the health care component, or from the HIPAA Complaint Officer.
- 1.2 Complaint Form.** Complaints regarding CMU's privacy policy and procedures and/or its compliance with those policies and procedures shall be submitted using the form entitled, *Client Complaint Regarding CMU Management of PHI*, Attachment A. The form shall be available on CMU's HIPAA website (www.hipaa.cmich.edu), at the office of the HIPAA Complaint Officer and all HIPAA Privacy Officers, and at the reception desk of the health care component.

Title/Subject: **HIPAA: CLIENT COMPLAINTS RELATED TO PROTECTED
HEALTH INFORMATION
REPORTS OF BREACH OF PRIVACY AND SECURITY OF PHI**

-
- 1.3 **Complaints to Health and Human Services.** Complaints made to the Secretary of Health and Human Services shall be made in writing using whatever form the client wishes and shall be mailed directly to the Secretary at:

**Secretary
US Department of Health and Human Services
200 Independence Ave., S. W.
Washington, D. C. 20201**

- 1.4 **CMU Handling of Complaints.** CMU's HIPAA Complaint Officer or Privacy Officer shall receive and handle all complaints regarding the management of an individual's protected health information according to the policy and procedure entitled *HIPAA: Investigation of Complaints & Reports of Breach of Privacy and Security of PHI; Sanctions for Breach of Privacy and Security of PHI.*

2.0 **Documentation of Complaints and Disposition.**

- 2.1 **Retention of Complaints and Disposition.** All complaints to CMU regarding its management of protected health information and documentation of the disposition of those complaints shall be filed in the office of the HIPAA Complaint Officer in a manner that all documentation can be easily retrieved for review and/or audit. The documentation shall be retained for a period of six years from the date of the complaint.

Central Michigan University reserves the right to make exceptions to, modify or eliminate this policy. This document supersedes all previous policies, procedures and directives relative to this subject.