Title/Subject: HIPAA: REPORTING AND INVESTIGATING PRIVACY AND SECURITY INCIDENTS / COMPLAINTS

Applies to: ☑ faculty ☑ staff ☑ students ☑ student employees ☑ visitors ☑ contractors
Effective Date of This Revision: October 29, 2018

Contact for More Information: HIPAA Privacy Officer
255 Foust Hall
989-774-2829
hipaa@cmich.edu

BACKGROUND:
Central Michigan University is a covered entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA requires that CMU officers, employees, and agents must preserve the integrity and the confidentiality of individually identifiable health information (IIHI) pertaining to each patient, client or individual covered under a CMU self-funded health plan. This IIHI is protected health information (PHI) and shall be safeguarded in compliance with security and privacy rules and standards established under 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, patients or participants of the CMU self-funded health plan to register complaints regarding CMU’s privacy policy and procedures and/or its compliance with those policies and procedures and for CMU’s investigation of complaints/incident reports. Finally, this policy informs persons of their right to file complaints with the Secretary, US Department of Health and Human Services (HHS).

DEFINITIONS:
The terms used in this policy have the same meaning as those terms in the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the regulations at 45 CFR Parts 160, 162, and 164.

POLICY:
1.0 Persons who believe that CMU or its faculty, staff, students, student employees (employees), or agents may have violated the requirements of HIPAA law or rules, or CMU’s HIPAA policies and procedures may submit a complaint to designated employees as outlined below in section 2.0.

2.0 Any faculty, staff, student, agent or volunteer is obligated to report actual or suspected privacy or security incidents by submitting a complaint to designated employees as outlined below or to the HIPAA Privacy Officer (also known as the HIPAA Complaint Officer). Refer also to the contacts on HIPAA website: https://www.cmich.edu/office_president/general_counsel/hipaa/Pages/CMU_HIPAA_Contacts.aspx
   a. Individual’s Supervisor; or
   b. HIPAA Representative; or
   c. HIPAA Privacy Officer; or

Authority: George E. Ross, President; Robert O. Davies, President
History: 04-14-2003; 09-23-2011
Indexed as: HIPAA Complaint Disposition, HIPAA Complaint Process
d. CMU General Counsel; or
e. Ethics Hotline

3.0 All complaint/incident reports will be investigated. The HIPAA Privacy Officer will coordinate the investigation with appropriate parties to ensure a thorough and timely investigation. The HIPAA Privacy Officer will review the details of the incident to determine if a violation (breach) has occurred. See HIPAA Breach Notification policy.

4.0 Any officer, employee or agent of CMU who believes another officer, employee or agent of CMU has violated CMU’s HIPAA privacy or security policies and/or procedures or otherwise compromised the integrity or confidentiality of patient, client or CMU self-funded health plan participant’s information must immediately report the alleged breach to his or her superior or to the HIPAA Privacy Officer.

5.0 Supervisors who receive reports of actual or suspected violations of the HIPAA privacy or security rules and/or the CMU HIPAA policies must contact the HIPAA Privacy Officer immediately—within, but no later than, 24 hours after the discovery of the incident and provide the HIPAA Privacy Officer with the details obtained.

6.0 Failure by workforce or agent to immediately report an actual or suspected violation may result in disciplinary action, up to and including termination as per the CMU HIPAA Sanctions policy.

7.0 Persons who believe that CMU or its employees or agents may have violated the requirements of HIPAA may also file a complaint with HHS.

8.0 CMU’s Notice of Privacy Practices (“Notice”), must be accessible to clients, patients, and participants in health plans, and will include information about where a complaint may be reported. CMU’s Notice shall include directives to individuals on how to submit a complaint regarding mismanagement of PHI to CMU’s HIPAA Complaint Officer (HIPAA Privacy Officer) and/or directly to the Secretary of the Department of Health and Human Services (HHS).

9.0 No CMU officer, employee or agent shall intimidate, threaten, coerce, discriminate against, or take other retaliatory action against any individual who files a timely complaint with CMU or with HHS.

10.0 An officer, employee or agent who discriminates or retaliates against an individual who files a complaint to CMU or HHS shall be subject to disciplinary action up to and including termination.

11.0 The HIPAA Privacy Officer will at a minimum, as part of the annual review process, provide the HIPAA Council and HIPAA Executive Steering Committee with a summary of incidents, including resolutions and corrective actions taken. Incident reporting shall be used as an ongoing review process to determine if the HIPAA policies and procedures are effective, relevant, and propose further risk to the privacy and security of PHI, including electronic PHI.

12.0 All complaints to CMU regarding its management of PHI and documentation of the disposition of those complaints, including applied sanctions when applicable, will be filed in the office of the HIPAA Privacy 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 the complaint investigation was completed.

Further detailed procedures may be found on the CMU HIPAA website: https://www.cmich.edu/office_president/general_counsel/hipaa/Pages/Policies_and_Procedures.aspx

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