

Valleywise Health Administrative Policy & Procedure

Effective Date: 03/03

Reviewed Dates: 05/08, 04/10, 03/12, 06/15, 10/16, 01/2020

Revision Dates: 10/06, 06/08, 06/15, 10/16, 11/18

Policy #: 01303 S

Policy Title: Compliance/HIPAA: Mitigation of Harm Resulting from Unauthorized Use or Disclosure of Protected Health Information

Scope: [] **District Governance (G)**
[X] **System-Wide (S)**
[] **Division (D)**
[] **Multi-Division (MD)**
[] **Department (T)**
[] **Multi-Department (MT)**

Purpose:

To establish a procedure to mitigate, to the extent practicable, any harmful effect that results from an unauthorized use or disclosure of protected health information.

Definitions:

Valleywise Health Employee - A person who is employed by Valleywise Health.

Valleywise Health Personnel - All employees of Valleywise Health, regardless of employment status, including residents, contracted employees, travelers, agency personnel, volunteers, students, and members of the Medical Staff.

PHI - Protected health information means individually identifiable health information [“Individually identifiable health information is information that is a subset of health information, including demographic information collected from an individual, and: (1) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and (i) That identifies the individual; or (ii) With respect to which there is a reasonable basis to believe the information can be used to identify the individual.”] that is: (i) Transmitted by electronic media; (ii) Maintained in electronic media; or (iii) Transmitted or maintained in any other form or medium.

Policy:

Valleywise Health will take positive action to minimize known harmful effects

resulting from the unauthorized use or disclosure of protected health information ("PHI") and will alleviate known instances of harm where the use or disclosure is in violation of Valleywise Health Administrative Policies and Procedures or HIPAA Privacy Regulations.

Note: Business associates—including students—have an obligation to notify Valleywise Health of any use or disclosure of PHI not permitted by the contract between Associate and Valleywise Health within five (5) business days of Associate's learning of such use or disclosure.

Procedure:

1. Upon receiving any information from any source that PHI may have been used or disclosed, intentionally or inadvertently, in a manner that does not comply with Valleywise Health Administrative Policies and Procedures or the HIPAA Privacy Regulations, Valleywise Health personnel will report such use or disclosure to the Compliance Office. Valleywise Health personnel will take steps to stop or limit any such use or disclosure also.
2. The Chief Compliance Officer (CCO) will investigate the report and determine whether the use or disclosure did not comply with Valleywise Health policies and procedures.
3. If the CCO determines that the use or disclosure violated Valleywise Health policy, the CCO will contact the person or persons responsible for the violation ("the original source") and take all practicable measures to retrieve and cease any further use or disclosure of the information. Also, the CCO will determine from the original source all of the persons or entities receiving the PHI from the original source.
4. If the original source reports that other persons or entities received the PHI in a manner that did not comply with Valleywise Health policies, the CCO will contact those persons or entities and take all practicable measures to retrieve the information and cease further use or disclosure.
5. If the CCO determines that the original source is an employee of Valleywise Health, the CCO will report the matter to the original source's Supervisor and to the Human Resources (HR) Department. The Supervisor and the HR Department will consult with the CCO on appropriate sanctions to impose on the original source for violating Valleywise Health policy, up to and including termination.
6. If the CCO determines that the original source is a business associate of Valleywise Health, the CCO will report the matter to Valleywise Health District Counsel and the Contract Department, which will take appropriate action with regard to the business associate.

References:

Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule §164.308(a)

Valleywise Health Policy & Procedure - Approval Sheet

(Before submitting, fill out COMPLETELY.)

POLICY RESPONSIBLE PARTY: Chief Compliance Officer

DEVELOPMENT TEAM(S): Office of Corporate Compliance

Policy #: 01303 S

Policy Title: Mitigation of Harm Resulting from Unauthorized Use or Disclosure of Protected Health Information

e-Signers: L.T. Slaughter, Jr., Chief Compliance Officer

Place an X on the right side of applicable description:

New -

Retire -

Reviewed - 01/2020

Revised with Minor Changes -

Revised with Major Changes -

Please list revisions made below: (Other than grammatical changes or name and date changes)

Reviewed and Approved by in Addition to Responsible Party and E-Signer(s):

Committee: Systemwide P&P	01/2020
Committee:	00/00
Committee:	00/00
Reviewed for EPIC:	N/A
Other:	00/00
Other:	00/00
Other:	00/00