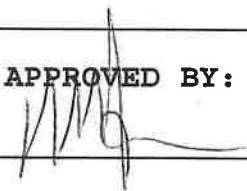


COUNTY OF IMPERIAL  
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES  
POLICY AND PROCEDURE MANUAL

<b>SUBJECT:</b> Contact Person - HIPAA Privacy Complaints	<b>POLICY:</b> 01-84
<b>SECTION:</b> Administration	<b>EFFECTIVE DATE:</b> 4-14-03
<b>REFERENCE:</b> 45 C.F.R Section 530	<b>PAGE:</b> 1 of 2
<b>AUTHORITY:</b> 45 C.F.R Part 164	<b>SUPERSEDES:</b> New Policy
	<b>APPROVED BY:</b> 

**PURPOSE:** To identify the role and responsibilities of the contact person to whom individuals may file complaints about alleged HIPAA violations by ICBHS or ICBHS business associates; or disagreements with ICBHS privacy policies and procedures.

**SCOPE:** The information in this document applies to all members of the workforce which includes employees, contract employees, volunteers, trainees, etc., granted access to protected health information (PHI).

**NOTES:** A memo that identifies the person designated to be the contact person for Imperial County Behavioral Health Services is included as Attachment I.

**DEFINITIONS:** Workforce: Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for the department, is under the direct control of the department, whether or not they are paid by the department.

**POLICY:** Imperial County Behavioral Health Services (ICBHS) shall designate a contact person to whom individuals may file complaints about alleged HIPAA violations by ICBHS or ICBHS business associates; or disagreements with ICBHS privacy policies and procedures. [45 C.F.R Section 164.530(d)] The responsibilities of the contact person are as follows:

1. Receive complaints from individuals concerning

- violations of HIPAA requirements. [45 C.F.R Section 164.530(d)]
2. Document all complaints received and the disposition of the complaints. [45 C.F.R. Section 164.530(d)(2)]
  3. Identify any harmful effects to the individual resulting from violation and develop and recommend actions that may be necessary to mitigate harm. [45 C.F.R. Section 164.530(f)]
  4. Identify the complaint type, and investigate all HIPAA related complaints including allegations of:
    - a. Inappropriate use or disclosure of protected health information (PHI) [45 C.F.R. Section 164.502(a)]
    - b. Inappropriate disposal of PHI [45 C.F.R. Section 164.502(a)]
    - c. Denial of access to PHI [45 C.F.R. Section 164.502(d)(1)(iii)]
    - d. Denial of amendments to PHI [45 C.F.R. Section 164.526(d)(1)(iv)]
    - e. Inappropriate privacy policies and procedures [45 C.F.R. Section 164.530(d)]
  5. Review complaints for allowable uses and disclosures and close complaints that identify allowable uses and disclosures.
  6. Review complaints for non-HIPAA related issues and refer the individual to the appropriate person/department/agency, if any.
  7. Identify where and against whom the violations have been lodged.
  8. Be responsible for the coordination and collaboration with members of the workforce to investigate and develop alternative actions to resolve the complaints.
  9. Coordinate the development and negotiation of a resolution for the complaint and oversee implementation.
  10. Inform the individual of the resolution of the complaint.
  11. Handle any federal inquiries into HIPAA privacy violation complaints including dealing with federal investigator and auditors.