

## VNS HEALTH CORPORATE POLICY & PROCEDURE

**TITLE:** Internal HIPAA Complaints and Sanctions for Violations Policy

**APPLIES TO:** VNS Health Home Care, including the Home Care, and Care Management Organization (CMO) divisions;  
VNS Health Behavioral Health, Inc.;  
VNS Health Personal Care;  
VNS Health Health Plans;  
VNS Health Hospice Care; and  
Medical Care at Home, P.C. (collectively, “VNS Health”)

**POLICY OWNER:** Corporate Compliance Department

**FIRST ISSUED:** August 9, 2005

**NUMBER:** HIPAA.8

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**PURPOSE:** VNS Health is required by law to have a process in place for individuals to make complaints regarding privacy issues. VNS Health must also have a sanctions procedure to address violations by personnel of VNS Health’s workforce (e.g., employees, agents, students, contractors and volunteers) (“VNS Health Personnel”) of HIPAA privacy regulations and/or VNS Health’s privacy-related policies and procedures.

**I. Making Complaints Concerning HIPAA Compliance:** Members of VNS Health’s workforce<sup>1</sup> (“Personnel”) must report HIPAA complaints to the Chief Compliance and Privacy Officer (“Privacy Officer”). The Privacy Officer will receive all complaints (whether written or oral) regarding: (i) VNS Health’s privacy policies and procedures; (ii) VNS Health’s compliance with such policies and procedures; and/or (iii) VNS Health’s compliance with the requirements of HIPAA’s privacy regulations. All complaints received, whether written or oral, will be documented. VNS Health’s privacy notice to patients/members describes how they may make a complaint directly to the Privacy Officer or designee.

After receiving a HIPAA-related complaint, the Privacy Officer or designee promptly investigates the complaint and determines whether VNS Health Personnel or Business Associates of VNS Health were involved in possible HIPAA violations. If the Privacy Officer determines that possible HIPAA violations did occur, then the Privacy Officer or designee will review and follow VNS Health’s HIPAA.1-Breach Notification (Protected Health Information) policy.

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<sup>1</sup> “Workforce” means employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity or business associate, is under the direct control of such covered entity or business associate, whether or not they are paid by the covered entity or business associate.

II. **Mitigation of a HIPAA Violation:** The Privacy Officer or designee must take appropriate steps to mitigate, to the extent practicable, any known harmful effect resulting from any violation of the HIPAA privacy regulations or VNS Health's privacy policies and procedures.

III. **Sanctions For Non-Compliance:** If the Privacy Officer or designee makes a determination that a violation of the privacy regulations or VNS Health's privacy policies and procedures has occurred, the Privacy Officer or designee will make written findings concerning: (i) the nature of the violation(s); (ii) the identity of any person involved; and (iii) further action, if any, which should be taken, including, but not limited to, sanctions to be applied against any VNS Health Personnel.

If the Privacy Officer or designee makes a determination that a violation of the privacy regulations or VNS Health's privacy policies and procedures has occurred and involves electronic records and/or access to VNS Health's information systems, the Privacy Officer or designee will report such determination to VNS Health's Director of IT Security, and they will collaborate on next steps.

A. **Process For Issuing Sanctions For a HIPAA Violation:** For VNS Health employees, any sanction issued pursuant to this Policy will be coordinated with VNS Health's Human Resources Department and will be in accordance with appropriate human resources policies relating to discipline and termination. For any VNS Health non-employee member, sanctions, up to and including termination of a contract, issued pursuant to this Policy will be coordinated by the Compliance Department, Legal Department and Human Resource Department.

IV. **Records:** The Privacy Officer or designee will record each privacy-related complaint received, the investigation undertaken, and the disposition. The Privacy Officer or designee will also keep records of any sanctions imposed for a HIPAA violation, including the underlying HIPAA violation, any VNS Health Personnel involved, and any further action taken, including sanctions. Records related to HIPAA complaints and sanctions for privacy violations will be maintained for at least six (6) years from the date of creation.

V. **Privacy Policy Against Retaliation:** In accordance with VNS Health's Non-Retaliation and Non-Intimidation Policy, VNS Health will not intimidate, threaten, coerce, discriminate against, or take any retaliatory action against any individual for the exercise by the individual of any right under, or for participation by the individual in any process, established by this policy, including the filing of a HIPAA complaint, participating or assisting in an investigation related to a HIPAA complaint, filing a complaint with the Secretary of the U.S. Department of Health and Human Services concerning HIPAA compliance, or opposing any act or practice prohibited by the HIPAA privacy regulations or VNS Health's privacy-related policies or procedures. Further, VNS Health will not, as a condition of the provision of treatment, require patients to waive their rights under the privacy regulations, including, without limitation, the right to complain to the Secretary of the U.S. Department of Health and Human Services or to the Privacy Officer concerning possible HIPAA violations.

**REFERENCES:** 45 CFR § 164.530(d) & 164.530(e); DHHS Privacy Guidelines, July 6, 2001

<b>Reviewed:</b>	11/2007	9/2013	1/2015	11/2016	4/2018	10/2019	10/2020	3/2022
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