

## **URI HIPAA PRIVACY POLICY # 41**

<b>Title:</b>	<b>COMPLAINTS TO THE COVERED COMPONENT</b>	<b>Purpose &amp; Background</b>	<b>See Memo Entitled "HIPAA at URI: Introduction to HIPAA and an Overview of HIPAA Implementation at URI" available online at the URI HIPAA website</b>
<b>Originator (Responsible Department/ Unit):</b>	<b>URI HIPAA Compliance Oversight Committee</b>	<b>Effective Date:</b>	<b>05/22/2018</b>
<b>Applies to:</b>	<b>All URI Departments and Units Designated as HIPAA "Covered Components" and "Business Associate Components"</b>	<b>Revised Date(s):</b>	

### **POLICY:**

#### **I. General**

A Covered Component must provide a process for individuals to make complaints concerning its HIPAA policies and procedures or its compliance with such policies and procedures or the requirements of HIPAA. A Covered Component must document all complaints received and their disposition, if any.

All complaints regarding the University's HIPAA policies and procedures and compliance with such policies and procedures, regardless of the form in which it was received, will be documented, reviewed, and acted upon, if necessary, by the Covered Component and the University's Privacy and/or Security Official, as appropriate.

Documentation regarding complaints received and the resolution of such complaints will be retained, in written or electronic format, for at least six (6) years after final resolution of the complaint.

#### **II. Procedure**

Each Covered Component must develop and implement a process for receiving complaints and reporting them to the University's Privacy and/or Security Official. Such process can be as simple as notifying employees that each individual submitting a HIPAA-related complaint should be instructed to contact the University's Privacy or Security Official. The contact information for the University's Privacy and Security Officials is located in HIPAA Policy #3. However, if a particular Covered Component decides to keep track of complaints received for quality assurance purposes, the Covered Component can develop an alternative process, as long such process involves the notification of the University's Privacy and/or Security Official of each complaint received so that the Privacy and/or Security Official can record and track the response to each complaint and can participate in the resolution of such complaints.

The Privacy and Security Officials will document each complaint received and maintain such documentation for at least six years after final resolution of the complaint. The Privacy and Security Officials will investigate each complaint, in conjunction with the applicable Covered Component and University Counsel and, if necessary, in conjunction with other affiliated entities, and will document the resolution of the investigation and any corrective actions taken.