



ESSENT HEALTHCARE, INC.

Section:	HIPAA Privacy	Effective Date:	3/31/05
Subject:	Privacy Complaints	Revision Date:	9/14/09
Policy #:	HIPAA-011	Review Date:	9/14/09
Responsible Party:	Chief Privacy Officer	Revision #:	3

Scope:

This policy applies to all Privacy Officers of Essent Healthcare, Inc., (“Essent”).

Purpose:

The purpose of this policy is to set forth the process for documenting, resolving and/or reporting HIPAA privacy violations and/or complaints.

Policy:

It is the policy of Essent to investigate and resolve all complaints received as a result of the HIPAA privacy legislation. Each facility Privacy Officer is responsible for maintaining a log that summarized all complaints received.

Procedure:

1. All Privacy Officers are responsible for tracking privacy complaints, whether written or verbal.
 - a. Privacy Officers should encourage the filing of formal, written complaints.
 - b. It is the policy of Essent not to provide information regarding our investigations to any individual who does not file a formal written complaint.
 - c. Individuals who file formal written complaints will be notified of the resolution of the investigation (in general terms). It is our policy NOT to disclose details regarding sanctions taken against employees to complainants. Notification to the complainant should include general statements such as “we have investigated this issue and found that there was a violation of Essent policy. We have taken action to prevent future occurrences of this violation and we have taken the appropriate disciplinary action in accordance with our policies and procedures. Thank you for alerting us to this situation”.
2. All complaints shall be logged at the time they are received and should be included on the compliance report card.
3. The Privacy Officer shall notify the CCO of all complaints within five (5) business days of receipt.



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4. Investigations shall be initiated within five (5) business days.
5. The details of the investigation and any disciplinary action taken shall be added to the log by the Privacy Officer at the time of issue resolution.
 - a. Questions regarding any complaint/investigation should be directed to the CCO.
 - b. The resolution of complaints that involve a legitimate HIPAA violation must be approved in advance by the CCO. No violation will be considered resolved without such approval.
6. Maintain copies of the log and all relevant documentation (formal complaint, documentation of the investigation, computer audit logs...) for a period of at least six (6) years.
7. Prepare response to complainant and submit to the CCO for approval (applies only to formal written complaints).

References:

HIPAA Subpart E – Privacy of Individually Identifiable Health Information