

Privacy Complaints Policy

Introduction

STRATEQ HEALTH, INC. has adopted this Privacy Complaints Policy in order to recognize the requirement to comply with the Health Insurance Portability and Accountability Act ("HIPAA"), as amended by the Health Information Technology for Economic and Clinical Health ("HITECH") Act of 2009 (Title XIII of division A and Title IV of division B of the American Recovery and Reinvestment Act "ARRA") and the HIPAA Omnibus Final Rule (Effective Date: March 26, 2013).

STRATEQ HEALTH, INC. hereby acknowledges our duty and responsibility to protect the privacy and security of Individually Identifiable Health Information ("IIHI") generally, and Protected Health Information ("PHI") as defined in the HIPAA Regulations, under the regulations implementing HIPAA, other federal and state laws protecting the confidentiality of personal information, and under principles of general and professional ethics. We also acknowledge our duty and responsibility to support and facilitate the timely and unimpeded flow of health information for lawful and appropriate purposes.

Scope of Policy

This policy governs the privacy complaints process for **STRATEQ HEALTH, INC.** All personnel of **STRATEQ HEALTH, INC.** must comply with this policy. Demonstrated competence in the requirements of this policy is an important part of the responsibilities of every member of the workforce.

Officers, agents, employees, Business Associates, contractors, affected vendors, temporary workers, and volunteers must read, understand, and comply with this policy in full and at all times.

Assumptions

- ❑ **STRATEQ HEALTH, INC.** hereby recognizes its status as a Business Associate under the definitions contained in the HIPAA Regulations.
- ❑ **STRATEQ HEALTH, INC.** must comply with HIPAA and the HIPAA implementing regulations pertaining to privacy complaints in accordance with the requirements at § 164.530(a) and § 164.530(d), as amended by the HITECH Act of 2009 (ARRA Title XIII), and the HIPAA Omnibus Final Rule (Effective Date: March 26, 2013).
- ❑ HIPAA regulations, at § 164.530(g), prohibit intimidating or retaliatory acts against any person or patient who files a privacy complaint or exercises any Right guaranteed under HIPAA.

Policy Statement

- ❑ It is the Policy of **STRATEQ HEALTH, INC.** to respond in a timely and positive manner to all complaints submitted by any persons or parties, including patients, workforce members, and any other person or party.
- ❑ Responsibility for the acceptance of, management of, and responses to complaints shall reside with the designated HIPAA Privacy Officer, or other responsible party (if no Privacy Official has been designated), who shall establish a process and appropriate forms to receive and process complaints.

Procedures

- ❑ All complaints must be submitted in written form, dated and signed by the complainant.
- ❑ **STRATEQ HEALTH, INC.** shall investigate and respond to all complaints with a written response within 30 days of the time each complaint is submitted in writing. If more time is required to investigate and resolve a specific complaint, the complainant shall be notified in writing within 30 days of the time each complaint is submitted in writing, that additional time is required to investigate and resolve the complaint. In no case shall more than 60 days elapse between the time a complaint is submitted in writing and the resolution of the complaint.
- ❑ The designated Privacy Officer, or other responsible party (if no Privacy Official has been designated), shall investigate each and every complaint in a fair, impartial, and unbiased manner. All parties named in the complaint, or who participated in events leading to the complaint, shall be interviewed in a non-threatening and non-coercive manner.
- ❑ The final resolution or disposition of each complaint shall be documented in accordance with **STRATEQ HEALTH, INC.**'s Documentation Policy, and shall be retained in accordance with **STRATEQ HEALTH, INC.**'s Documentation Retention Policy.
- ❑ The final resolution or disposition of each complaint shall be documented and a summary of the findings shall be provided to the complainant within 30 days of the time each complaint is submitted in writing, unless the additional 30-days of response time is invoked, as above.
- ❑ In addition to providing complainants with a written response to their complaint, complaints that are found to have merit will be resolved with some remediation that is appropriate to the severity of the situation. Such remediations may include, but are not limited to:
 - A written apology to the complainant from our organization.
 - Credit-monitoring service for the complainant for a period of one or two years, paid for by our organization, when the complaint involves a breach of unsecured individually identifiable health information that has been compromised or put at risk by our actions.
 - Financial compensation, if determined to be appropriate by legal counsel and senior management.
 - Sanctions against workforce members, as appropriate to the circumstances.
 - Other unspecified remediation(s), as determined by legal counsel and senior management.

- ❑ For complaints submitted to the federal government, it is the Policy of **STRATEQ HEALTH, INC.** to cooperate fully and openly with federal authorities as they conduct their investigation, as specified in **STRATEQ HEALTH, INC.**'s HHS Investigations Policy.
- ❑ No officer, agent, employee, contractor, temporary worker, or volunteer of **STRATEQ HEALTH, INC.** shall obstruct or impede any investigation in any way, whether internal or federal.

Compliance and Enforcement

All managers and supervisors are responsible for enforcing this policy. Employees who violate this policy are subject to discipline up to and including termination in accordance with **STRATEQ HEALTH, INC.**'s Sanction Policy.