

# HIPAA POLICY FOR OREGON PROVIDERS

Original Draft Date: April 2, 2003

Last Revision Date:

**SUBJECT:** Review and Resolution of Complaints

**HIPAA CITES:** 45 C.F.R. § 164.530(d)

**OTHER CITES:** 42 C.F.R. § 482.13

**DEPARTMENT:** Coos County Mental Health

**POLICY NUMBER:** 40

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## **I. POLICY:**

Coos County Mental Health Department provides a process for individuals to make complaints concerning the Department's compliance with the Privacy Rule and its policies and procedures created to implement the Privacy Rule ("Privacy Policies"). The Department also reviews and resolves any complaints it receives regarding its compliance with the Privacy Rule and the Privacy Policies (collectively, "Privacy Complaints").

## **II. PROCEDURES:**

A. Who to Contact. All Privacy Complaints that Coos County Mental Health Department receives shall be forwarded to the Privacy Officer.

B. Privacy Complaint Log. The Privacy Officer (or his or her designee) shall document the following with respect to each Privacy Complaint received:

1. the date the Privacy Complaint was received;
2. a copy of the written Privacy Complaint, if any, or a general description of the verbal Privacy Complaint; and
3. a copy of the written statement provided to the individual making the Privacy Complaint, as described in Section II.C.2.b below.

C. Resolution of the Privacy Complaint. The Coos County Mental Health Department has a Consumer Complaint and Grievance/Appeals process as documented in CP-13 of the CCMH Policies and Procedures Manual. The process defined in the policy herein is to address Privacy Complaints and does not conflict or supercede the policy as defined in CP-13.

1. Responsible Party to Investigate and Resolve Complaint. The Department's Privacy Officer and the Risk Management Committee are appointed to review and resolve any Privacy Complaints that the Privacy Officer receives.

2. Time Frame for Resolution.

- a. Investigation. Within 30 days after the Privacy Officer receives a Privacy Complaint, the Risk Management Committee must investigate, or direct investigation regarding, the underlying circumstances relating to the Privacy Complaint.
- b. Resolution. Within 60 days after the Privacy Officer receives a Privacy Complaint, the Risk Management Committee must provide a written response to the individual who submitted the Privacy Complaint containing the following information:
  - i. a name of a contact person in the Privacy Office (or at Coos County Mental Health Department) who will answer questions relating to the investigation and resolution of the Privacy Complaint;
  - ii. a general description of the steps taken to investigate the Privacy Complaint;
  - iii. an explanation of Coos County Mental Health Department's resolution regarding the Privacy Complaint; and
  - iv. the date of completion of the investigation of the Privacy Complaint.

- D. Document Retention. Coos County Mental Health Department shall retain copies of the documentation listed in Section II.B for a period of no less than six (6) years from the date that the Risk Management Committee provides the individual the written response described in Section II.C.2.b. above.