Policy and Procedure: HIPAA/HITECH Compliance
Topic: Sanctions for Privacy Violations

HIPAA Regulation:

- Administrative Requirements § 164.530

Policy Purpose:

The purpose of this policy is to ensure that workforce members of Saratoga Bridges are informed of sanctions, penalties, and disciplinary actions that may be applied for non-compliance with Saratoga Bridges HIPAA Privacy Policies and Procedures.

Policy Description:

Workforce members are accountable for their actions in failing to comply with HIPAA Privacy Rule requirements, as defined in Saratoga Bridges HIPAA Privacy Policies and Procedures.

Sanctions

Members of the Saratoga Bridges workforce who violate HIPAA Privacy Policies and Procedures regarding the safeguarding of protected health information (PHI) are subject to disciplinary action by Saratoga Bridges up to and including immediate dismissal from employment or service. For violations of these policies by non-employees, corrective action includes but is not limited to contract cancellation or termination of services.

Members of Saratoga Bridges workforce who knowingly and willfully violate state or federal law for failure to safeguard PHI are subject to criminal investigation, prosecution, and/or civil monetary penalties.

If Saratoga Bridges fails to enforce privacy and security safeguards, it may be subject to administrative penalties by the federal Department of Health and Human Services Office for Civil Rights, including federal funding penalties.

Reporting Violations

All workforce members shall notify their manager or supervisor, the Information Security Officer or the HIPAA Privacy Officer when there is a reasonable belief that any privacy and security policies or procedures are being violated.
Retaliation Prohibited
Neither Saratoga Bridges as an entity nor any member of Saratoga Bridges covered workforce shall intimidate, threaten, coerce, discriminate against, or take any other form of retaliatory action against any individual for:

1. Exercising any right established under Saratoga Bridges HIPAA Privacy Policies and Procedures.
2. Participating in any process established by Saratoga Bridges HIPAA Privacy Policy including the filing of a complaint with Saratoga Bridges or with the federal Department of Health and Human Services Office for Civil Rights.
3. Testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing relating to the policies and procedures.

Any workforce member who engages in retaliation shall be subject to the sanctions under this policy.

Policy Responsibilities:

Workforce Member Responsibilities
1. All HIPAA covered workforce members shall comply with Saratoga Bridges HIPAA Privacy Policies and Procedures.
2. All HIPAA covered workforce members shall notify their manager or supervisor or the HIPAA Privacy Officer of their department or division if they have a reasonable belief that any privacy policies or procedures are being violated.
3. All HIPAA covered workforce members are required to sign HIPAA Acknowledgement Form, certifying they have received training on Saratoga Bridges HIPAA Privacy and Security Policies and Procedures, and will comply with the HIPAA Privacy and Security Policies and Procedures.