

UNIVERSITY PHYSICIANS OF BROOKLYN, INC.

POLICY AND PROCEDURE

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Subject:	<u>COMPLIANCE & ENFORCEMENT</u>	Page <u>1</u> of <u>2</u>
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	<u>Renee Poncet</u>	Approval Date: <u>12/02</u>
Approved by:	<u>HIPAA Oversight Committee</u>	Distribution:

	_____	Issued by:

- I. **Purpose:** To ensure UPB's proper cooperation with the Department of Health and Human Services (HHS) for determining compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and its accompanying regulations.
- II. **Policy-** In order to cooperate with HHS in determining compliance with the HIPAA standards:
- A. UPB will retain all records and submit compliance reports to the Secretary of HHS, as required.
- B. UPB will cooperate with the Secretary of HHS during an investigation or compliance review of the policies, procedures or practices of UPB.
- C. UPB will permit access by the Secretary of HHS, during normal business hours, to its facilities, books, records, accounts and other sources of information, including protected health information, that are pertinent to ascertaining compliance.
1. When the Secretary of HHS determines that unusual circumstances exist, such as when documents may be hidden or destroyed, UPB will permit access by the Secretary at any time and without notice.

2. UPB will attempt to obtain information in the exclusive possession of another agency, institution or person.
 - a. If the other sources of information fail or refuse to furnish the information, UPB will document and certify the efforts it has made to obtain the information.

D. If a violation is found after an investigation or compliance review, UPB will comply with whatever action the Secretary of HHS determines is warranted.

III. Responsibilities: It is the responsibility of all medical staff members and practice staff members to comply with this policy. Medical staff members include physicians as well as allied health professionals. Practice staff members include all employees, medical or other students, trainees, residents, interns, volunteers, consultants, contractors and subcontractors at the practice.

IV. Reasons for Revision- Regulatory changes

V. Attachments- None

VI. References- Standards for Privacy of Individually Identifiable Health Information, 45 CFR §164.310, § 164.312