

	Privacy	Rio Grande Valley HIE	Policy: P8
	Effective Date 11/06/2015	Last Date Revised/Updated 11/06/2015	Date Board Approved: 11/06/2015
Subject: Sanctions			

FEDERAL REGULATION:

45 CFR 164.530(e)
45 CFR 164.308(a)(1)(ii)(C)

POLICY:

The Rio Grande Valley Health Information Exchange (RGV HIE) applies appropriate sanctions against members of its workforce who fail to comply with RGV HIE’s HIPAA privacy and information security policies and procedures or the requirements of HIPAA. This standard does not apply to a member of the workforce with respect to actions that are covered by and meet the conditions of §164.502(j) *Disclosures by Whistleblowers and Workforce Member Crime Victims* or any employee who a) files a complaint with the Secretary of the Department of Health and Human Services, b) testifies, assists or participates in an investigation, compliance review, proceeding or hearing; or c) opposes any act or practice made unlawful provided the individual has a good faith belief that the practice opposed is unlawful, and the manner of the opposition is reasonable and does not involve a disclosure of protected health information.

RGV HIE documents the sanctions that are applied and that documentation is retained for six years from the date of its creation or the date when it last was in effect, whichever is later.

PROCEDURE:

- To ensure that order, efficiency, and safety are maintained at RGV HIE, employees must observe rules and regulations. Although cause is not necessary for termination, violation of the rules could result in termination. Less severe disciplinary action may also be imposed through progressive disciplinary procedures.
- The unauthorized use or release of confidential information in no way limits the imposition of disciplinary action, to and including termination, for other acts by employees which violate normal and reasonable standards of workplace conduct as determined by the Executive Director.
- In determining whether an employee should be disciplined for violating the rules and the extent of such discipline, the RGV HIE Executive Director will consider all the circumstances involved, including the employee’s overall work record.
- With regard to violations of HIPAA privacy and security rules, policies and procedures, RGV HIE Executive Director will consider what discipline is necessary to (1) ensure compliance of the

workforce, (2) ensure the confidentiality, integrity, and availability of all ePHI; (3) protect against any reasonably anticipated threats or hazards to the security or integrity of such information; and (4) protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required. In determining disciplinary measures, RGV HIE Executive Director will consider the Risk Analysis developed under RGV HIE Policy and Procedure P1, Administrative Safeguards Risk Analysis and Management in compliance with 45 CFR 164.308(a)(1)(ii)(A) and Guidance on Risk Analysis Procedure under the HIPAA Security Rule (issued by OCR on July 14, 2010)

- RGV HIE Executive Director may administer progressive discipline, including suspension or discharge, of employees for certain infractions of rules and regulations and for any violation of common workplace standards of conduct.
- In each instance of progressive discipline, the Executive Director will discuss the infraction with the employee, explain the rule, regulation, policy, practice or procedure infraction, and assist the employee in correcting the problem.
- Employees may be placed on probation or transferred to another position in response to infractions of policy, practice or procedure, rules and regulations, or to permit closer observation and assistance of the employee.
- Those employees who refuse such reassignments will be subject to termination.

Should disciplinary action be taken against an employee, that action will be documented and retained in RGV HIE personnel files. This documentation, specifically with regard to HIPAA, shall be retained for at least six years.