## LOUISIANA STATE UNIVERSITY HEALTH CARE SERVICES DIVISION BATON ROUGE, LA

POLICY NUMBER: 7527-23

CATEGORY: HIPAA Policies

CONTENT: Mitigation After Improper PHI Use or Disclosure

EFFECTIVE DATE: April 14, 2003 REVIEW DATE: January 8, 2008

February 26, 2015 February 29, 2016 August 28, 2017 January 15, 2020 January 13, 2023

REVISED: January 8, 2008

April 9, 2010 July 24, 2013

INQUIRIES TO: LSU HCSD

Compliance Section Post Office Box 91308 Baton Rouge, LA 70821 Phone: 225-354-4840

Note: Approval signatures/titles are on the last page

## LOUISIANA STATE UNIVERSITY HEALTH CARE SERVICES DIVISION

Mitigation after Improper PHI Use or Disclosure

#### I. SCOPE

This policy is applicable to all workforce members of the LSU Health Care Services Division (LSU HCSD) facilities, including employees, physician/practitioner practices, vendors, agencies, business associates and affiliates. Any references herein to LSU HCSD also applies and pertains to Lallie Kemp Medical Center.

## II. PURPOSE

To provide guidance to the LSU HCSD facilities and providers to the extent practicable, to mitigate (lessen or alleviate) any harmful effect that becomes known to them as a result of an improper use or disclosure of PHI.

#### III. POLICY

The LSU HCSD Facility has a duty to ensure the proper use and/or disclosure of PHI. To the extent practicable, the LSU facility will mitigate (lessen or alleviate) any harmful effect that becomes known to the LSU HCSD facility as a result of a use or disclosure of PHI in violation of the LSU HCSD facility's policies and procedures or applicable law.

#### IV. PROCEDURE

The duty to mitigate includes, but not limited to the following:

- A. Taking operational and procedural corrective measures to remedy violations.
- B. Taking employment actions, reprimand, or discipline employees as necessary, up to and including termination.
- C. Addressing problems with business associates, external affiliates, and other entities/persons outside of LSU HCSD's workforce who have access to patient information once LSU HCSD is aware of a breach of privacy.
- D. Incorporating mitigation solution into the LSU HCSD facility's operational policies as appropriate.
- E. Addressing and investigating LSU HCSD facility workforce violations.
- F. Re-training and education.

#### **Thirty-Day Cure Period**

Note that the Facility has up to a thirty-day cure period due to willful neglect to resolve

the issue that lead to a breach. That thirty-day period begins on the date that the Facility first acquires actual or constructive knowledge of the violation.

V. **ENFORCEMENT:** Individuals who violate this policy will be subject to the disciplinary process for the LSU HCSD facility.

# **Document Metadata**

Document Name:	7527-23 Mitigation After Improper PHI Use or Disclosure.doc
Policy Number:	7527
Original Location:	/LSU Health/HCSD/7500 - HIPAA
Created on:	04/14/2003
Published on:	01/23/2023
Last Review on:	01/13/2023
Next Review on:	01/13/2024
Effective on:	04/14/2003
Creator:	Simien, Tammy
	Staff Attorney
Committee / Policy Team:	Main Policy Team
Owner/SME:	Simien, Tammy
	Staff Attorney
Manager:	Simien, Tammy
	Staff Attorney
Author(s):	Wicker, Claire M.
	PROJECT COORDINATOR
Approver(s):	Simien, Tammy
	Staff Attorney
Publisher:	Wicker, Claire M.
	PROJECT COORDINATOR
Digital Signatures:	
Currently Signed	
Approver:	
Simien, Tammy	1 .Λ.Ω.
•	Igmara D. Simum
Staff Attorney	01/23/2023