

Minimum Privacy Violation Action

Level and Definition of Violation	Example of Violation	Action
<ul style="list-style-type: none"> • Accidental and/or due to lack of proper education. 	<ul style="list-style-type: none"> • Improper disposal of PHI. • Improper protection of medical records or other PHI. <ul style="list-style-type: none"> ▪ Leaving records on counters or where otherwise accessible by unauthorized individuals. ▪ Leaving any documents that contain PHI in inappropriate areas. • Not properly verifying individuals by phone, in person, or in writing. • Not accounting for disclosures outside of treatment, payment or health care operations within the correct system, or manual process. 	<ul style="list-style-type: none"> • Re-training and re-evaluation. • Oral warning with documented discussion of policy, procedures, and requirements.
<ul style="list-style-type: none"> • Purposeful violation of privacy or an unacceptable number of previous violations. 	<ul style="list-style-type: none"> • Accessing or using PHI without having a legitimate need to do so. • Not forwarding appropriate information or requests to the privacy official for processing. 	<ul style="list-style-type: none"> • Re-training and re-evaluation. • Written warning with discussion of policy, procedures, and requirements.
<ul style="list-style-type: none"> • Purposeful violation of privacy policy with associated potential for patient harm. 	<ul style="list-style-type: none"> • Disclosure of PHI to unauthorized individual or company. • Sale of PHI to any source. • Any uses or disclosures that could invoke harm to a patient. 	<ul style="list-style-type: none"> • Termination.

Note: "PHI" is Protected Health Information as defined in policy number GC-009.