

# University Physicians Inc.



## PROCESS FOR COMPLAINTS POLICY

**Latest Revision:**

**Original Effective Date: April 4, 2003**

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**Purpose** The purpose of this policy is to provide a process for individuals to make complaints concerning UPI HIPAA policies, procedures and/or compliance with HIPAA.

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**Policy** As provisioned by HIPAA, Individuals have a right to file a complaint if they believe that UPI has not taken appropriate measures to protect their health information and has used or disclosed their health information for unauthorized purposes.

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**Procedure** If an individual wishes to make a complaint, he or she should be immediately directed to UPI Privacy Officer. A web site and mailing address will be made available for such access.

Individuals will be required to complete a Complaint Form. A member of UPI's Privacy Office will make contact by mail within 7 business days to verify receipt.

The UPI Privacy Officer will investigate the complaint, work to reach resolution of the complaint, document the complaint and resolution, and maintain the documentation for a period of not less than six years.

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**Definitions** See glossary for key terms and acronyms used in this policy.  
(On file with Privacy Officer)

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**Enforcement** Enforcement of this policy will reside with the Privacy Officer or appropriate Management.

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**Rationale/  
Source** This policy complies with requirements of the following:  
Health Insurance Portability and Accountability Act (HIPAA), Privacy Rule

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**Cross  
References** For additional information, refer to the following:

Document Name
Complaint Form (On file with the Privacy Officer)

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**Review or  
Revision Date**

This policy is reviewed and approved annually, and as revised.

MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY

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**Governance**

Responsibility for adoption and/or implementation of this policy is as follows:

<b>Approving Body</b>		<b>Executive Approval</b>	
<b>Privacy Officer:</b>	<b>04/04/03</b>	<b>Chief Operating Officer:</b>	<b>04/04/03</b>
<b>Signature on file.</b>	<b>Date</b>	<b>Signature on file.</b>	<b>Date</b>