
**University of Wisconsin-Madison
Policy and Procedure**

Policy Number: 10.1
Policy Title: Complaints Under the HIPAA Privacy Rule
Effective Date: April 14, 2003
Last Revision Date: September 3, 2014
Page 1 of 4

I. Policy

Consistent with the HIPAA Privacy Rule, the UW-Madison requires each of its Health Care Component units to designate a Privacy Coordinator to receive HIPAA privacy complaints from patients/clients and to provide further information in response to patient/client requests. This document sets forth the process to be used for patients to make HIPAA privacy complaints to UW-Madison.

I. Definitions

- A. UW-Madison Health Care Component (“UW HCC”): Those units of the University of Wisconsin-Madison that have been designated by the University as part of its health care component under HIPAA. See Privacy Policy # 1.1 “Designation of UW-Madison Health Care Component” for a listing of these units.
- B. UW-Madison HIPAA Privacy Officer: The individual appointed by the University of Wisconsin-Madison to be the Privacy Officer as required by the HIPAA Privacy Rule.

II. Procedures

- A. Each unit of the UW HCC must designate a Privacy Coordinator, along with an associated telephone number and address, to receive HIPAA-related complaints and questions. The Privacy Officer functions as the Privacy Coordinator for those units comprised of personnel that perform business support functions on behalf of the units that provide health care.
- B. Each Privacy Coordinator will be directly accountable to the administrative officer to whom he or she reports (e.g., CEO, Provost, Dean or Director) for proper and careful handling of complaints and questions, if any are filed.
- C. Each Privacy Coordinator will use the usual unit processes to provide patient/client satisfaction and improve patient/client care on an informal basis.
 - 1. For concerns and questions that can be answered and resolved at the unit level, no other review process is needed.

**University of Wisconsin-Madison
Policy and Procedure**

Policy Number: 10.1
Policy Title: Complaints Under the HIPAA Privacy Rule
Effective Date: April 14, 2003
Last Revision Date: September 3, 2014
Page 2 of 4

2. The Privacy Coordinator may consult with the UW HIPAA Privacy Officer and UW Office of Legal Affairs to assist in resolving and responding to complaints and questions.
- D. If the complaint or question cannot be resolved to the satisfaction of the patient/client at the unit level or, if at any time, the patient/client indicates that he/she wishes to make a written complaint related to a HIPAA privacy matter, the following procedures will be followed:
1. The Privacy Coordinator will provide the patient/client with the "Patient Privacy Complaint" form, with instructions on how to complete and file the complaint.
 2. The written complaint may be filed either with the unit or directly with the UW HIPAA Privacy Officer.
 3. If the written complaint is filed with the unit, the unit must, within 24 hours of filing, fax a copy of the complaint to the UW HIPAA Privacy Officer.
 4. The UW HIPAA Privacy Officer will request and review all information related to the complaint developed at the unit, initiate further investigation (if needed), consult with appropriate officials of UW-Madison, and make a decision concerning the appropriate response to the complaint. The UW HIPAA Privacy Officer, on behalf of UW-Madison, will respond in writing to the patient/client.
 5. In cases where one or more covered entities, in addition to UW-Madison, are involved in the complaint, the HIPAA Privacy Officers of all of the covered entities involved should confer and decide upon a mutually agreeable response. One or more of the Privacy Officers involved will sign the written response to the patient/client in such cases.
- E. Reports to Unit Deans and Directors

**University of Wisconsin-Madison
Policy and Procedure**

Policy Number: 10.1
Policy Title: Complaints Under the HIPAA Privacy Rule
Effective Date: April 14, 2003
Last Revision Date: September 3, 2014
Page 3 of 4

The UW-Madison Privacy Officer will periodically report to each of the Deans and Directors of the units of the UW HCC on the number and nature of the complaints filed and the resolution of these complaints related to their units.

III. Documentation Requirements

- A. Each unit must document its designation of a Privacy Coordinator to receive HIPAA-related complaints and questions. A copy of this documentation must be sent to the UW HIPAA Privacy Officer.
- B. The HIPAA Privacy Officer must document all complaints received and their disposition.

IV. Forms

Patient Privacy Complaint

V. References

- 45 CFR 164.530(a)(1) and (2) (HIPAA Privacy Rule)
- 45 CFR 164.530(d)(1) and (2) (HIPAA Privacy Rule)

VI. Related Policies

None.

VII. For Further Information

For further information concerning this policy, please contact the UW-Madison HIPAA Privacy Officer or the appropriate unit HIPAA Privacy Coordinator or sub-Coordinator. Contact information is available within the “Contact Us” tab at hipaa.wisc.edu.

Reviewed By

Chancellor
Chancellor’s Task Force on HIPAA Privacy
UW-Madison HIPAA Privacy Officer

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Page 4 of 4

UW-Madison Office of Legal Affairs

Approved By
Interim HIPAA Privacy and Security Operations Committee