LOUISIANA STATE UNIVERSITY HEALTH CARE SERVICES DIVISION BATON ROUGE, LA

POLICY NUMBER: 7527-25

CATEGORY: HIPAA Policies

CONTENT: Mitigation After Improper PHI Use or Disclosure

APPLICABILITY: This policy is applicable to all workforce members of the Health

Care Services Division Administration and Lallie Kemp Medical Center, to include employees, physician/practitioner practices,

vendors, agencies, business associates and affiliates.

EFFECTIVE DATE: Issued: April 14, 2003

Revised: January 8, 2008 April 9, 2010 Revised: Revised: July 24, 2013 Reviewed: February 26, 2015 February 29, 2016 Reviewed: Reviewed: August 28, 2017 Reviewed: January 15, 2020 January 13, 2023 Reviewed: Reviewed: April 2, 2024 April 14, 2025 Reviewed:

INQUIRIES TO: Health Care Services Division

Compliance Section Post Office Box 91308 Baton Rouge, LA 70821

Note: Approval signatures/titles are on the last page

LSU HEALTH CARE SERVICES DIVISION Mitigation after Improper PHI Use or Disclosure

I. <u>STATEMENT OF POLICY</u>

LSU Health Care Services Division (HCSD) has a duty to ensure the proper use and/or disclosure of protected health information (PHI). To the extent practicable, HCSD will mitigate (lessen or alleviate) any harmful effect that becomes known to HCSD because of use or disclosure of PHI in violation of HCSD's policies and procedures or applicable law.

Any references herein to HCSD also applies and pertains to Lallie Kemp Medical Center.

II. <u>IMPLEMENTATION</u>

This policy and subsequent revisions to the policy shall become effective upon approval and signature e of the HCSD Chief Executive Officer (CEO) or designee.

III. PROCEDURE

<u>Thirty (30) Day Cure Period</u> - HCSD has up to a thirty (30) day cure period due to willful neglect to resolve the issue that led to a breach. That thirty-day period begins on the date that HCSD first acquires actual or constructive knowledge of the violation. 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 HCSD's workforce who have access to patient information once HCSD is aware of a breach of privacy.
- D. Incorporating mitigation solution into the HCSD facility's operational policies as appropriate.
- E. Addressing and investigating workforce violations of the HCSD facility.
- F. Re-training and education.

IV. ENFORCEMENT

Individuals who violate this policy will be subject to the disciplinary process for the HCSD facility.

V. <u>EXCEPTION</u>

The HCSD CEO or designee may waive suspend, change, or otherwise deviate from any provision of this policy deemed necessary to meet the needs of the agency as long as it does not violate the intent of this policy, state and/or federal laws, Civil Service Rules and Regulations, LSU Policies/Memoranda, or any other governing body regulations.

Document Metadata

Document Name:	7527-25 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:	04/16/2025
Last Review on:	04/14/2025
Next Review on:	04/14/2026
Effective on:	04/14/2003
Creator:	Townsend, Kathy
	HCSD Human Resources Director
Committee / Policy Team:	Main Policy Team
Owner/SME:	Simien, Tammy
	Staff Attorney
Manager:	Reeves, Rebecca
•	Compliance and Privacy Officer
Author(s):	Wicker, Claire M.
	PROJECT COORDINATOR
	Reeves, Rebecca
	Compliance and Privacy Officer
	Simien, Tammy
	Staff Attorney
Approver(s):	Wilbright, Wayne
	Chief Medical Informatics Officer
	Reeves, Rebecca
	Compliance and Privacy Officer
	Simien, Tammy
	Staff Attorney
Publisher:	Wicker, Claire M.
	PROJECT COORDINATOR
Digital Cianaturas	
Digital Signatures:	
Currently Signed	
Approver:	
Reeves, Rebecca	RhecaPerry
•	pue ca 1 m
Compliance and Privacy Officer	04/15/2025

04/15/2025

I fem ara D. Simum

Annrover:

Approver:

Simien, Tammy Staff Attorney Approver: Wilbright, Wayne 04/16/2025