



<p>Pennsylvania Hospital & Surgery Center</p> <p>ADMINISTRATIVE POLICY MANUAL</p>	<p>Page 1</p> <p>Effective: 0408</p>
<p>SUBJECT: PROHIBITION ON INTIMIDATION OR RETLIATORY ACTIONS</p> <p>POLICY NUMBER: HIP14</p>	

Issued:

POLICY

Committee Approval:
HIPAA

For purposes of this policy, Pennsylvania Hospital includes all off campus licensed facilities, including but not limited to the Surgery Center of Pennsylvania Hospital.

Administrative Policy
Review Committee:
April 2003
April 2004
April 2005
April 2006
April 2007
April 2008

It is the policy of Pennsylvania Hospital that Pennsylvania Hospital will not intimidate or retaliate against individuals in connection with exercising their rights to privacy or otherwise protecting privacy in accordance with the HIPAA privacy regulations and applicable law.

PURPOSE

It is the purpose of this policy to protect individuals exercising their rights to privacy, or otherwise protecting privacy, from intimidation or retaliatory actions.

Attachment(s):

SCOPE

This policy is applicable to all employees, volunteers, trainees, medical staff, and other persons working for or in Pennsylvania Hospital and patients of Pennsylvania Hospital.

Related Policies:
[HR69 - Performance
Improvement and
Progressive Steps](#)

DEFINITIONS

Protected health information (PHI) is information that is created or received by UPHS and the School of Medicine; and relates to the past, present, or future physical or mental health or condition of a patient; the provision of health care to a patient; or the past, present, or future payment for the provision of health care to a patient; and that identifies the patient or for which there is a reasonable basis to believe the information can be used to identify the patient. PHI includes information of persons living or deceased. The following components of a patient's information also are considered PHI: a) names; b) street address, city, county, precinct, zip code; c) dates directly related to a patient, including birth date, admission date, discharge date, and date of death; d) telephone numbers, fax numbers, and electronic mail addresses; e) Social Security numbers; f) medical record numbers; g) health plan beneficiary numbers; h) account numbers; i) certificate/license numbers; j) vehicle identifiers and serial numbers, including license plate numbers; k) device identifiers and serial numbers; l) Web Universal Resource Locators (URLs); m) biometric identifiers, including finger and voice prints; n) full face photographic images and any comparable images; and o) any other unique identifying number, characteristic, or code.

IMPLEMENTATION

This policy will be implemented by all employees, volunteers, trainees, medical staff, and other persons working for or in Pennsylvania Hospital.

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PROCEDURE

A. Pennsylvania Hospital may not unlawfully intimidate, threaten, coerce, discriminate against, or take other retaliatory action against:

1. Any individual for the exercise by the individual of any right under, or for participation by the individual in any process established by the HIPAA privacy regulations; or
2. Any individual for:
 - a) Filing a complaint with the Secretary of HHS;
 - b) Testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing in connection with the HIPAA privacy rules; or
 - c) Opposing any act or practice made unlawful by the HIPAA Privacy regulations, provided that the individual has a good faith belief that the practice opposed is unlawful, and the manner of opposition is reasonable and does not involve a disclosure of protected health information in violation of the HIPAA privacy regulations.

B. If Pennsylvania Hospital becomes aware of a violation of this policy, the matter shall be addressed in consultation with the UPHS Privacy Office, the Office of General Counsel, and Pennsylvania Hospital shall apply appropriate sanctions according to Performance Improvement and Progressive Steps Policy, HR69.

/s/Kathleen Kinslow
 Kathleen Kinslow, CRNA, EdD, MBA
 Executive Director

05/05/08
 Date

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