

Section 6	Compliance Policies	- Effective
Subject 6.2	Privacy and Disclosure	- Revised
Policy 6.2.5	Mitigation After Improper PHI Use or Disclosure	- Reviewed
		Compliance Office - Author

Mitigation After Improper Protected Health Information (PHI) Use or Disclosure

Audience

The information in this document applies to all UTMB faculty, staff, students, volunteers, and any other contractors or agents granted access to Protected Health Information (PHI).

Policy

UTMB has a duty to ensure the proper use and/or disclosure of PHI. To the extent practicable, UTMB will mitigate (*i.e.*, lessen or alleviate) any harmful effect that becomes known to UTMB as a result of a use or disclosure of PHI in violation of UTMB's policies and procedures or applicable law.

This may include, but is not limited to, the following:

- Taking operational and procedural corrective measures to remedy violations.
 - Taking employment actions to re-train, reprimand, or discipline employees as necessary, up to and including termination.
 - Addressing problems with business associates once UTMB is aware of a breach of privacy.
 - Incorporating mitigation solution into UTMB's IHOP policies as appropriate.
 - Addressing and investigating faculty and student violations.
-

Enforcement

Individuals who violate this policy will be subject to the disciplinary process for faculty, staff, students, or volunteers.

References

45 C.F.R. §164.530(f)
IHOP Policy 7.1.3, *Student Conduct & Discipline*
