

Section 6	Compliance Policies	04/11/03 - Originated
Subject 6.2	Privacy Related	02/02/12 - Reviewed w changes - Reviewed w/o changes
Policy 6.2.5	Mitigation after Improper Use or Disclosure of Protected Health Information (PHI)	03/02/12 - Effective Compliance Office - Author

Mitigation after Improper Use or Disclosure of 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 by UTMB or its business associates in violation of UTMB’s policies and procedures or applicable law. Mitigation 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 solutions into UTMB’s IHOP policies as appropriate.
- Addressing and investigating faculty and student violations.

Violation of this policy may result in disciplinary action up to and including termination for employees; a termination of employment relationship in the case of contractors or consultants; or suspension or expulsion in the case of a student. Additionally, individuals may be subject to loss of access privileges and civil and/or criminal prosecution.

References

45 C.F.R. §164.530(f)
[IHOP Policy 3.10.1, Discipline and Dismissal](#)
[IHOP Policy 6.2.39, Privacy Incident Response and Breach Notification](#)
[IHOP Policy 7.1.3, Student Conduct & Discipline](#)
