**Sanctions Policy - SAMPLE**

## Protected health information (PHI) is confidential and may not be used or disclosed except as authorized. When appropriate, sanctions will be applied to workers of any level or status. Sanctions will not apply to activities covered by the *Non-Retaliation* policy in this Manual or those who are *whistleblowers* or *crime victims*.

**Reporting and Filing Requirements**

Workers who observe or are aware of an incident or misconduct must immediately report it to a manager or the Privacy Officer. Failure to report a known incident could result in disciplinary action. Incidents and reports will be documented and investigated.

**Offenses & Sanctions**

A progressive disciplinary process that starts with an oral warning, then a written warning or corrective action plan, through retraining, suspension, up to termination will be used to apply sanctions based on intent, severity, and frequency of offenses. Sanctions will not be applied as a form of retaliation in any circumstance.

The offenses listed below are not all-inclusive and are organized according to severity.

Level I: Unintentional violation of HIPAA rules, including improper disclosure of PHI.

This type of offense occurs when a worker unintentionally or carelessly accesses, uses, or discloses PHI.

* Discussing patient information in a public area.
* Not properly securing hard copy PHI when unattended.
* Leaving a computer unattended in an accessible area with patient information unsecured.
* Retaliatory actions.

Level II: Unauthorized use and/or misuse of PHI.

Intentional access, use, or disclosures of PHI in a manner that is inconsistent with policies and procedures, but for reasons unrelated to personal gain.

* Accessing birth dates.
* Address of friends or relatives.
* Accessing the record of a patient out of curiosity or concern.
* Reviewing a public personality’s record.

Level III: Willful and/or intentional disregard for HIPAA rules.

This level of offense occurs when PHI is accessed, used, or disclosed for personal gain or with malicious intent.

* Reviewing a patient record to use information in a personal relationship.
* Compiling a mailing list of patients for personal use or to be sold.
* Using PHI to commit identity theft or other criminal acts.
* Retaliatory actions.

I have read and understand this policy. I understand my responsibilities and potential disciplinary sanctions for any offense I commit, as described above. I have also been given the opportunity to ask questions about this policy.

EMPLOYEE SIGNATURE DATE OF SIGNATURE

EMPLOYEE’S PRINTED NAME FIRST AND LAST

OFFICE MANAGER/SUPERVISOR SIGNATURE DATE OF SIGNATURE

OFFICE MANAGER/SUPERVISOR PRINTED NAME FIRST AND LAST