



*Issuing Department:* Internal Audit, Compliance, and Enterprise Risk Management

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## **Complaints, No Retaliation, No Waiver of Rights**

### **Policy**

Any individual who has a complaint concerning NYU Langone’s HIPAA Privacy Policies and Procedures or NYU Langone’s compliance with those policies and procedures may file a complaint with NYU Langone, the Secretary of the U.S. Department of Health and Human Services, the New York State Department of Health, or other appropriate oversight agency.

NYU Langone will not intimidate, threaten, coerce, discriminate against, or retaliate against an individual for filing a complaint, assisting in an investigation, or for opposing any act or practice that the person believes in good faith is unlawful, so long as the manner of such opposition is reasonable and does not involve a Disclosure of Protected Health Information (“PHI”) in violation of HIPAA (see also *Compliance Concerns: Reporting, Investigating, and Protection from Retaliation Policy*).

NYU Langone will not require an individual to waive his or her rights granted by the HIPAA regulations as a condition to receive Treatment, Payment, enrollment in a health plan, or eligibility for benefits.

- This includes the filing of a complaint with the Secretary of the U.S. Department of Health and Human Services or any other enforcement agency regarding NYU Langone’s compliance with HIPAA or state privacy regulations.

### **Procedure**

If an individual wishes to file a complaint with NYU Langone, he or she should be immediately directed to the Patient Relations Office (212-263-6906) or the Office of Internal Audit, Compliance, and Enterprise Risk Management (“IACERM”) (212-404-4079), the HIPAA Hotline (1-877-PHI-LOSS), or the Compliance Hotline (1-866-NYU-1212).

IACERM will investigate, attempt to resolve, and document the complaint and resolution of all privacy complaints in coordination with the Patient Relations Office as necessary. All formal grievances will be referred to the Patient Relations Office for a coordinated investigation and response, in compliance with the *Complaint and Grievance Policy*. Documentation will be retained for a period of at least six (6) years, in accordance with applicable laws and regulations.

### **Related Documents**

Breach Notification

Complaint and Grievance Policy

Compliance Concerns: Reporting, Investigating, and Protection from Retaliation

Mitigation of HIPAA Related Incidents

Your Guide to the Investigations Process

### **Legal Reference**

45 C.F.R. §164.530(d)

42 C.F.R. §482.13

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This version supersedes all previous NYU Langone (as defined in these Policies) entity HIPAA policies, including but not limited to NYU Langone Hospitals, New York University School of Medicine, and/or Lutheran Medical Center.