PURPOSE:
To provide for regulatory whistleblower exceptions to HIPAA Disclosure restrictions and to ensure that Health Quest Systems, Inc. and its affiliates (“HQ”), its employees and/or business associates are able to bring forward complaints or concerns without retaliation.

POLICY:
1. It is the policy of Health Quest in compliance with 45 C.F.R. §164.502 to restrict the Use and/or Disclosure of PHI unless otherwise permitted by law.

2. 45 C.F.R. § 164.502 provides Covered Entities a Whistleblower exception to the general privacy rule. Specifically, 45 CFR §164.502(j) provides that Workforce Members may disclose PHI, to an entity noted below, if the individual believes that the Covered Entity has either:
   a. Engaged in unlawful conduct;
   b. Engaged in conduct that violates professional or clinical standards; or
   c. Provided care, services or conditions that potentially endanger patients, workers or the public.

   Therefore, HQ is not considered to have violated the requirements of this subpart if a member of its workforce or a business associate discloses protected health information in accordance with this policy.

3. It is important to note that this exception does not completely supersede the overarching Privacy Rule. The disclosing individual must have a good faith belief that one of the violations above has occurred, and the disclosure of PHI must be made to either:
   a. A health oversight agency or public health authority legally authorized to investigate the alleged violations;
   b. A healthcare accreditation organization, for the purpose of reporting violations of professional or clinical obligations; or
   c. An attorney retained by the worker or business associate for the purpose of determining her legal options with respect to the observed misconduct.
Examples in which this exception may apply include a psychiatrist reporting concerns about patient safety to the state department of mental health; and a nurse reporting deficient cancer treatment to an accreditor like The Joint Commission.

4. HQ has established and shall continue to maintain effective and confidential means for Workforce Members and other individuals to report allegations or concerns that include actual or suspected violations of law, violations of HQ policies or procedures, or any other type of wrongful conduct without fear of retaliation or retribution.

DEFINITIONS: See HIPAA Glossary

ENFORCEMENT:
All individuals whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy and related procedure may result in remedial and/or disciplinary action, up to and including termination of any employment or other relationship.

REFERENCES:
45 CFR §164.502(j); 160.316
Federal Sentencing Guidelines for Organizations, Guidelines manual section 8B2.1(b)(5)(c)
HQ 5.1.05 Detection and Prevention of Fraud, Waste and Abuse Policy and Procedure
COMP 1-1-19 Whistleblowers Protection Policy
HQ 5.2.06 Whistleblower Exceptions Procedure

POLICY HISTORY:
Supersedes: 2/13/2019
Original Implementation Date: 2/27/2014
Date Reviewed: 2/13/2019
Date Revised: 2/27/2014, 2/13/2019, 2/28/2020

APPROVAL:

Policy Owner                      Date

2/28/20