

## **MEM – Member Calls Regarding Health Insurance Portability and Accountability Act (HIPAA) Breaches**

### **Purpose:**

This procedure explains the process of how to report a HIPAA Breach.

### **Identification of Roles:**

Account Manager (AM)  
Operations Manager (OM)  
Enrollment Service Representative (ESR)  
Call Center Supervisor (CSS)  
Quality Assurance (QA) Analyst  
Contract Administration Officer (CAO)

### **Performance Standards:**

HIPAA Breaches should be reported within 2 business days of the discovery of the breach.

### **Path of Business Procedure:**

Step 1: HIPAA Breach should be reported to Call Center Supervisor (CSS) as soon as the breach is discovered.

Step 2: Call Center Supervisor will research the reported breach to verify if there was a true HIPAA breach or an error was made.

- a. If the report was a HIPAA breach, the CSS will notify the QA Analyst and ESR, then move onto step 3.
- b. If the report was not a HIPAA breach but an error, the CCS will educate the staff member on their mistake.

Step 3: The ESR will complete the Department of Human Services (DHS) Incident Report Form found at the following location:

[\\Dhsime\memsrv\\_management\HIPAA\HIPAA Breaches](#)

- a. The Contact Person for Incident will be the OM and the AM.
- b. Contact Person's Title will be the OM and the AM's title.
- c. Contact's Address: 100 Army Post Rd, Des Moines, IA 50315
- d. Contact's Email: The OM or the AM's email address.
- e. Contact's Phone number: The OM and the AM's phone number.
- f. Date of Breach: This is the date the violation occurred.
- g. Date of Discovery of Breach: This is the date the breach was discovered.
- h. Detailed Description of the Breach: This is the details of how the breach happened.

- i. Types of Unsecured PHI involved: This area details what information was released during the violation.
- j. What steps are being taken to investigate the breach or mitigate losses

Step 4: ESR will forward the Incident Report Form to the QA Analyst, OM, AM, and CAO at [Privacyofficial@maximus.com](mailto:Privacyofficial@maximus.com), for processing.

Step 5: ESR, QA Analyst, OM, or AM will follow the action detailed in the box detailed in step 3 letter j.

Step 6: AM will submit a quarterly HIPAA Compliance Report (SFY) to the CAO. Reports can be found in the following location:

[\\Dhsime\memsrv\\_management\HIPAA\HIPAA Breaches](\\Dhsime\memsrv_management\HIPAA\HIPAA Breaches)

**Forms/Reports:**

None

**RFP References:**

NA

**Interfaces:**

MMIS RECIPIENT ELIGIBILITY SUBSYSTEM

OnBase Workview

OnBase Workflow

Microsoft Office

**Attachments:**

None