DEPARTMENT OF HEALTH & HUMAN SERVICES
Voice (617) 565-1340, (800) 368-1019, TDD (617) 565- 1343, (800) 537-7697
FAX (617) 565-3809, http://www.hhs.gov

OFFICE OF THE SECRETARY

Office for Civil Rights, Region I
JFK Federal Building, Room 1875
Government Center
Boston, MA 02203-0002

AUG 30 2013

(b)(6),(b)(7)(C)

OCR Transaction Number: 13-159734

Dear (b)(6),(b)(7)(C):

On May 1, 2013, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), Region I received your complaint alleging that Veteran's Health Administration, the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information (45 C.F.R. Parts 160 and 164, Subparts A and E, the Privacy Rule). Specifically, you allege that, Veteran's Health Administration released your protected health information to an attorney without your knowledge. This allegation could reflect a violation of 45 C.F.R. §164.530(c).

Thank you for bringing this matter to OCR's attention. Your complaint is an integral part of OCR's enforcement efforts.

OCR enforces the Privacy, Security, and Breach Notification Rules, and also Federal civil rights laws which prohibit discrimination in the delivery of health and human services because of race, color, national origin, disability, age, and under certain circumstances, sex and religion.

A covered entity must maintain reasonable and appropriate administrative, technical, and physical safeguards to prevent intentional or unintentional use or disclosure of PHI in violation of the Privacy Rule and to limit its incidental use and disclosure pursuant to otherwise permitted or required use or disclosure. 45 C.F.R. §164.530(c). For example, such safeguards might include shredding documents containing protected health information before discarding them, securing medical records with lock and key or pass code, and limiting access to keys or pass codes.

We have carefully reviewed your complaint against Veteran's Health Administration and have determined to resolve this matter informally through the provision of technical assistance to Veteran's Health Administration. Should OCR receive a similar allegation of noncompliance against Veteran's Health Administration in the future, OCR may initiate a formal investigation of that matter.

For your informational purposes, OCR has enclosed material regarding the Privacy Rule provisions related to Safeguards.

Based on the foregoing, OCR is closing this case without further action, effective the date of this letter. OCR's determination as stated in this letter applies only to the allegations in this complaint that were reviewed by OCR.

Under the Freedom of Information Act, we may be required to release this letter and other information about this case upon request by the public. In the event OCR receives such a request, we will make every effort, as permitted by law, to protect information that identifies individuals or that, if released, could constitute a clearly unwarranted invasion of personal privacy.

If you have any questions regarding this matter, please contact Phil Lewis, Investigator, at (617) 565-1355 (Voice) or (617) 565-1343 (TDD).

Sincerely,

Peter Chan
Regional Manager

DEPARTMENT OF HEALTH & HUMAN SERVICES
Voice (617) 565-1340, (800) 368-1019, TDD (617) 565- 1343, (800) 537-7697
FAX (617) 565-3809, http://www.hhs.gov

OFFICE OF THE SECRETARY

Office for Civil Rights, Region I
JFK Federal Building, Room 1875
Government Center
Boston, MA 02203-0002

AUG 3 0 2013

Ms. Andrea Wilson
VHA Privacy Implementation Coordinator
Information Access and Privacy Office-10P2C1
Department of Veteran's Affairs-Veteran's Health Administration
810 Vermont Ave., NW
Washington, DC 20420

Re: 13-159734

Dear Ms. Wilson:

On May 1, 2013, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), Region I received a complaint alleging that Veteran's Health Administration, the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information (45 C.F.R. Parts 160 and 164, Subparts A and E, the Privacy Rule). Specifically, the complaint alleges that, Veteran's Health Administration released complainant's protected health information to an attorney without complainant's knowledge. This allegation could reflect a violation of 45 C.F.R. §164.530(c).

OCR enforces the Privacy, Security, and Breach Notification Rules, and also Federal civil rights laws which prohibit discrimination in the delivery of health and human services because of race, color, national origin, disability, age, and under certain circumstances, sex and religion.

In this matter, the complainant alleges that the covered entity does not employ reasonable safeguards to prevent impermissible disclosures of protected health information (PHI). A covered entity must maintain reasonable and appropriate administrative, technical, and physical safeguards to prevent intentional or unintentional use or disclosure of PHI in violation of the Privacy Rule and to limit its incidental use and disclosure pursuant to otherwise permitted or required use or disclosure. 45 C.F.R. §164.530(c).

Pursuant to its authority under 45 C.F.R. §§ 160.304(a) and (b), OCR has determined to resolve this matter informally through the provision of technical assistance to Veteran's Health Administration. To that end, OCR has enclosed material explaining the Privacy Rule provisions related to Reasonable Safeguards.

You are encouraged to review these materials closely and to share them with your staff as part of the Health Insurance Portability and Accountability Act (HIPAA) training you provide to your workforce. You are also encouraged to assess and determine whether there may have been any noncompliance as alleged by the complainant in this matter, and, if so, to take the steps necessary to ensure such noncompliance does not occur in the future. In addition, OCR encourages you to review the facts of this individual's complaint and provide the individual the

appropriate written response swiftly if necessary to comply with the requirements of the Privacy Rule. Should OCR receive a similar allegation of noncompliance against Veteran's Health Administration in the future, OCR may initiate a formal investigation of that matter. In addition, please note that, after a period of six months has passed, OCR may initiate and conduct a compliance review of Veteran's Health Administration related to your compliance with the Privacy Rule's provisions related to Reasonable Safeguards.

Based on the foregoing, OCR is closing this case without further action, effective the date of this letter. OCR's determination as stated in this letter applies only to the allegations in this complaint that were reviewed by OCR.

Under the Freedom of Information Act, we may be required to release this letter and other information about this case upon request by the public. In the event OCR receives such a request, we will make every effort, as permitted by law, to protect information that identifies individuals or that, if released, could constitute a clearly unwarranted invasion of personal privacy.

If you have any questions regarding this matter, please contact Phil Lewis, Investigator, at (617) 565-1355 (Voice) or (617) 565-1343 (TDD).

Sincerely,

Peter Chan
Regional Manager

Enclosure: Reasonable Safeguards