LAC+USC MEDICAL CENTER POLICY

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Subject: WHISTLEBLOWER PROTECTION		Original Issue Date:		Policy #			
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			5/9/17			11/16/20	
Departments Consulted:	Reviewed & Approve	Approved by	:				
Office of Human Resources	Attending Staff As Executive Com Senior Executive (mittee	(Signature on File) Chief Medical Officer				
				ignature on File) of Executive Officer			

PURPOSE

To ensure retaliatory actions are not taken against employees who report violations of law or regulations that occur in the workplace. Such reported violations may include, but are not limited to, violations of the Health Insurance Portability Accountability Act (HIPAA) regulations, abuse of authority, waste of County funds or resources, and specific dangers to public health or safety.

POLICY

LAC+USC Medical Center employees may disclose protected health information (PHI) when they believe, in good faith:

- The Medical Center has engaged in conduct that is unlawful;
- Conduct violates professional or clinical standards; or
- Care, services, or conditions potentially endanger patients, employees, or the public; and
- The disclosure is to a health oversight agency or public health authority authorized by law to investigate or oversee the Medical Center.

If such disclosure occurs:

No employee of the Medical Center will use or threaten to use any official authority or influence to prevent any other person, acting in good faith and upon reasonable belief, from reporting or otherwise bringing to the attention of the appropriate agency, office, or department of the County of Los Angeles any information which, if true, would constitute:

- A work-related violation by an employee of any law or regulation;
- Gross waste of County funds;
- Gross abuse of authority:
- A specific and substantial danger to public health or safety due to an act or omission of a County employee; or
- Use of a County position or of County resources for personal gain.

Once a formal complaint is filed, it is unlawful for an employer to permit any reprisal action against the complainant. A reprisal action is broadly defined as "any act of intimidation, restraint, coercion, or discrimination against the employee, or applicant for employment, who files a complaint."

Any employee of the Medical Center, who knowingly engages in conduct prohibited by this policy, will be disciplined, including but not limited to, discharge.

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DEFINITIONS

Protected Health Information (PHI)

Information that is created or received by a health care provider, health plan, employer, or health care clearinghouse; relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual and identifies the individual (or for which there is a reasonable basis for believing that the information can be used to identify the individual). PHI does not include employment records maintained by the Medical Center in its role as employer.

<u>Disclose</u>

Disclosure

With respect to PHI, the release of, transfer of, provision of access to, or divulging in any manner PHI outside of the Medical Center's internal

operations or to other than its workforce members.

Use or UsesWith respect to PHI, the sharing, employment, application, utilization,

examination, or analysis of such information within the Medical Center's

internal operations.

Violation A violation of DHS and/or the Medical Center's privacy-related policies or

any of the provisions of HIPAA. The term, violation, does not include disclosures by whistleblowers or disclosures by workforce crime victims.

Workforce or

Workforce Members Employees, volunteers, trainees, and other persons whose conduct, in

the performance of work for the Medical Center, is under the direct control

of the Medical Center, whether or not they are paid by the County.

RESPONSIBILITY

Administrators
Department Managers
Supervisors

REFERENCES

45 Code of Federal Regulations, Parts 160 and 164, § 164.530(f)
DHS Policy No. 361.25, Disclosures of Protected Health Information (PHI) By Whistleblowers and Workforce Crime Victims

REVISIONS DATES

April 10, 2007; September 25, 2008; March 11, 2014; May 9, 2017; November 16, 2020

DISTRIBUTION: LAC+USC Medical Center Policy Manual