

## **HIPAA Privacy Complaint Form**

This complaint form concerns protected health information maintained by HMAA and related Business Associates subject to the HIPAA Privacy Rules. Member Name: \_\_\_\_\_ Member ID: Date of Birth: Address: City, State Zip: Phone: Who do you believe violated your (or someone else's) health information privacy rights or committed another violation of the Privacy Rule? Violation Date: (mm/dd/vv) Workforce Member or Department Name What right was violated? ☐ Access to Records Request Denied ☐ Amendment of Health Request Denied ☐ Confidential Communications Request Denied ☐ Restriction of Use and Disclosures Request Denied ☐ Accounting of Disclosures Request Denied ☐ Breach of Confidentiality ☐ Other Describe the Privacy violation: (Required; attach additional pages if necessary) What action, if any, do you believe will correct the problem? Member or Legal Representative's Signature Date Member or Legal Representative's Name (please print) Relationship of Representative to Member (A Written Authorization Form may be requested.)

(continued)

## You have the following rights if you are filing a privacy complaint.

- The complaint must be filed within 180 calendar days of when you knew that the identified act or omission occurred. This time period may be extended if you can show good cause.
- Any alleged violation must have occurred after April 14, 2003.
- Individuals may file privacy complaints with HMAA or the U.S. Department of Health and Human Services, Office of Civil Rights. You will not be penalized for filing a complaint.

## Privacy complaints may be directed to either of the following.

Privacy Officer - HMAA 220 South King Street, Suite 1200 Honolulu, HI 96813 Phone (808) 591-0088 Toll-Free (800) 621-6998 Fax (808) 591-0463 Region IX, Office of Civil Rights
U.S. Department of Health and Human Services
50 United Nations Plaza- Room 332
San Francisco, CA 94102
Phone (415) 437-8310
Fax (415) 437-8329
TDD (415) 437-8311
Email OCRComplaint@hhs.gov

Internal Use Only	
Date Received:	