



## Oklahoma State University

<b>Title: Content of Notification to Individuals</b>	<b>Policy #: BRE-02.02</b>
<b>Category: HIPAA Compliance</b>	<b>Authority: 45 CFR HIPAA SECTION: § 164.404(c)</b>
<b>Standard: Notification in the Case of Breach of Unsecured Protected Health Information</b>	<b>Responsibility: Health Care Components</b>
<b>Effective Date: 3/26/2013</b>	<b>Page 1 of 1</b>
<b>Approved By: OSU Legal Counsel</b>	<b>Revised: 6/1/2013</b>

### **PURPOSE:**

To establish what has to be included in each notification of a breach of patient data.

### **POLICY:**

The notification shall include, to the extent possible:

- a. A brief description of what happened, including the date of the breach and the date of the discovery of the breach, if known; §164.404(c)(1)(A)
- b. A description of the types of unsecured PHI that were involved in the breach (such as whether full name, social security number, date of birth, home address, account number, diagnosis, disability code, or other types of information were involved); §164.404(c)(1)(B)
- c. Any steps individuals should take to protect themselves from potential harm resulting from the breach; §164.404(c)(1)(C)
- d. A brief description of what OSU is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches; and §164.404(c)(1)(D)
- e. Contact procedures for individuals to ask questions or learn additional information, which shall include a toll-free telephone number, an e-mail address, web site, or postal address.  
§164.404(c)(1)(E)

The notification required by BRE-02.00 shall be written in plain language.

### **PROCEDURE:**

Upon investigation, OSU shall according to the outlined steps above, write a notification and disseminate to the affected individuals appropriately