

(b)(5)

**From:** (b)(6);(b)(7)(C)  
**Sent:** Tuesday, December 08, 2015 1:24 PM  
**To:** OCR Mail  
**Subject:** Violation

DEC 10 2015  
HHS/OCR/HQ

To whom it may concern

I (b)(6);(b)(7)(C) feel as if I've been violated by planned parenthood canton Ohio campus

The incident took place on December 8 2015  
At approximately at 12:30pm

An employee called me to give me test results, but before revealing my lab results she never asked no one to verify any information , so my friend told her she wasn't I (b)(6);(b)(7)(C) and her responds was relay the message to I

I can't express how upset I am at this moment I feel so violated I called the office and spoke with an adminstration but I feel as if no one is taking me serious at all

The location is in canton Ohio  
2663 cleveland ave nw 44709  
330 456 7191phone

My information

(b)(6);(b)(7)(C)



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary

Voice - (800) 368-1019  
TDD - (202) 619-3257  
Fax - (202) 619-3818  
<http://www.hhs.gov/ocr>

Office for Civil Rights  
200 Independence Avenue, S.W.,  
Room 509F  
Washington, DC 20201

August 9, 2017

(b)(6);(b)(7)(C)

Re: OCR Transaction Number: 16-229029  
(b)(6);(b)(7)(C) vs. Planned Parenthood Canton Health Center

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

On December 10, 2015, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), received your complaint alleging that Planned Parenthood Canton Health Center, the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information and/or the Security Standards for the Protection of Electronic Protected Health Information (45 C.F.R. Parts 160 and 164, Subparts A, C, and E, the Privacy and Security Rules). Specifically, you allege that an employee for Planned Parenthood Canton Health Center located at 2663 Cleveland Ave, NW, Canton, Ohio called the complainant to provide her lab results without verification of identity. As a result, your friend received your information. 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 protected health information (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 Planned Parenthood Canton Health Center and have determined to resolve this matter through the provision of technical assistance to Planned Parenthood Canton Health Center. Should OCR receive a similar allegation of noncompliance against Planned Parenthood Canton Health Center in the future, OCR may initiate an 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 about this matter, please contact Centralized Case Management Operations at (800) 368-1019 or (202) 619-3257 (TDD).

Sincerely yours,

A handwritten signature in cursive script that reads "Sarah C. Brown". The signature is written in black ink and includes a horizontal line extending to the right from the end of the name.

Sarah C. Brown  
Associate Deputy Director for Regional Operations

Enclosure: Reasonable Safeguards

## **Reasonable Safeguards**

### **45 C.F.R. § 164.530 (c)**

A covered entity must have in place appropriate administrative, technical, and physical safeguards that protect against uses and disclosures not permitted by the Privacy Rule, as well as that limit incidental uses or disclosures. See 45 C.F.R. §164.530 (c). It is not expected that a covered entity's safeguards guarantee the privacy of protected health information from any and all potential risks. Reasonable safeguards will vary from covered entity to covered entity depending on factors, such as the size of the covered entity and the nature of its business. In implementing reasonable safeguards, covered entities should analyze their own needs and circumstances, such as the nature of the protected health information it holds, and assess the potential risks to patients' privacy. Covered entities should also take into account the potential effects on patient care and may consider other issues, such as the financial and administrative burden of implementing particular safeguards.

Many health care providers and professionals have long made it a practice to ensure reasonable safeguards for individuals' health information – for instance:

- By speaking quietly when discussing a patient's condition with family members in a waiting room or other public area;
- By avoiding using patients' names in public hallways and elevators, and posting signs to remind employees to protect patient confidentiality;
- By isolating or locking file cabinets or records rooms; or
- By providing additional security, such as passwords, on computers maintaining personal information.

Protection of patient confidentiality is an important practice for many health care and health information management professionals; covered entities can build upon those codes of conduct to develop the reasonable safeguards required by the Privacy Rule.



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Office for Civil Rights  
200 Independence Avenue, S.W.,  
Room 509F  
Washington, DC 20201

April 4, 2016

Mrs. Cecile Richards  
President  
Planned Parenthood Canton Health Center  
2663 Cleveland Ave NW  
Canton, OH 44709

Re: OCR Transaction Number: 16-229029  
[REDACTED] vs. Planned Parenthood Canton Health Center

Dear Mrs. Richards,

On December 10, 2015, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), received a complaint alleging that Planned Parenthood Canton Health Center, the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information and/or the Security Standards for the Protection of Electronic Protected Health Information (45 C.F.R. Parts 160 and 164, Subparts A, C, and E, the Privacy and Security Rules). Specifically, the complainant alleges that an employee for Planned Parenthood Canton Health Center located at 2663 Cleveland Ave, NW, Canton, Ohio called the complainant to provide her lab results without verification of identity. As a result, the Complainant's friend received Complainant's information. 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 through the provision of technical assistance to Planned Parenthood Canton Health Center. 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 Planned Parenthood Canton Health Center in the future, OCR may initiate an 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 Planned Parenthood Canton Health Center 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 about this matter, please contact Centralized Case Management Operations at (800) 368-1019 or (202) 619-3257 (TDD).

Sincerely yours,

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Sarah C. Brown  
Associate Deputy Director for Regional Operations

Enclosure: Reasonable Safeguards