

Purpose: To provide guidance to the Student Health Center and its providers on a patient's right to adequate notice of privacy practices as required by the Health Insurance Portability and Accountability Act, Standards for Privacy of Individually Identifiable Health Information (HIPAA Privacy Regulations), and any other applicable state or Federal laws or regulations.

Policy: The Student Health Center and its providers must provide an adequate Notice of Privacy Practices to patients. The Student Health Center must also inform the patients of their rights with respect to Protected Health Information and the Student Health Center's legal duties. The Student Health Center must obtain the patient's acknowledgement of receipt of the notice.

Definitions:

1. **Protected Health Information** (sometimes referred to as "PHI")—for purposes of this policy means Individually Identifiable Health Information that relates to the past, present or future health care services provided to an individual. Examples of Protected Health Information include medical and billing records of a patient.
2. **Direct Treatment Relationship**—means a treatment relationship between an individual and a health care provider that is not an indirect treatment relationship.
3. **Indirect Treatment Relationship**—means a relationship between an individual and a health care provider in which: (1) the health care provider delivers health care to the individual based on the orders of another health care provider; and (2) the health care provider typically provides services or products, or reports the diagnosis or results associated with the health care, directly to another health care provider, who provides the services or products or reports to the individual.
4. **Organized Health Care Arrangement**—means in part a clinically integrated care setting in which individuals typically receive health care from more than one health care provider. An example is a hospital setting where physicians are on staff at the hospital.
5. **Privacy Officer**—person designated by the Student Health Center to be the Privacy Officer and who is responsible for the implementation of the patient privacy policies and procedures.

Procedure:

1. The Student Health Center must provide a Notice of Privacy Practices that is written in plain language and includes the required elements or information identified in this policy.
2. In instances that the Student Health Center has a Direct Treatment Relationship with a patient, it must:
 - Provide the Notice of Privacy Practices to the patient no later than the date of the

first service delivery after the compliance date of the HIPAA Privacy Regulations, which is April 14, 2003; In an emergency treatment situation, provide the Notice of Privacy Practices as soon as reasonably practicable after the emergency treatment situation;

- Except in an emergency situation, make a good faith effort to obtain a written acknowledgement of receipt of the Notice, and if not obtained, document the good faith efforts by the Student Health Center to obtain an acknowledgement and the reason why the acknowledgement was not obtained;
 - If the Student Health Center maintains a physical delivery site, it must: (i) Have the Notice of Privacy Practices available at the service delivery site for individuals to take with them; and (ii) Post the Notice of Privacy Practices in a clear and prominent location where it is reasonable to expect individuals seeking service from the Student Health Center to read the notice; and
 - Whenever the Notice of Privacy Practices is revised, make the Notice available upon request or after the effective date of the revision and promptly post the revised Notice at their physical delivery site.
3. The Student Health Center will make a good faith attempt to obtain a written acknowledgment of receipt of the Notice, and if not obtained, then document the effort to obtain this acknowledgement.
4. Required Elements of the Notice:
- (1) The header statement must state: “THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.”
 - (2) A description, including at least one example of the types of uses and disclosures for the purposes of treatment, payment, and health care operations. (e.g., contact to provide appointment reminders or information about treatment alternatives or other health related benefits and services that may be of interest to the patient; fundraising; disclosure of PHI to the sponsor of a group health plan or health insurer issuer or HMO.
 - (3) A description of each of the other purposes for which the Student Health Center is permitted or required to use or disclose the information without the individual’s written authorization (e.g. , State Reporting).
 - (4) A statement that other uses or disclosures will be made only with the individual’s written authorization and that the individual may revoke this authorization.
 - (5) Separate statements that the Student Health Center may contact its patients to

provide appointment reminders or information about treatment alternatives or other health-related benefits and services, or that the Student Health Center may contact individuals to raise funds for it, if the Student Health Center intends to engage in those activities.

(6) A statement of the patient's rights with respect to Protected Health Information, including:

- The right to inspect and copy Protected Health Information;
- The right to amend Protected Health Information;
- The right to receive confidential communications;
- The right to an accounting of disclosures;
- The right to request restrictions on certain uses and disclosures;
- The right to obtain a paper copy of this notice.

(7) A statement of the Student Health Center's legal duties with respect to PHI.

- The student Health Center is required by law to maintain the privacy of PHI and provide this notice with respect to PHI;
- The Student Health Center must abide by the terms of the notice;
- The Student Health Center may apply a change to the notice and make the new

Notice effective for the entire PHI it maintains. The statement will also include how it will provide the revised notice to individuals.

(8) A statement that patients may complain to the Privacy Officer or the Secretary of the U. S. Department of Health and Human Services if they believe their privacy rights have been violated, a brief description of how the individual may and a statement that the individual will not be retaliated against for filing a complaint.

(9) A statement that includes the telephone number of the contact person.

(10) The effective date of the notice.

(11) A statement that the notice may change.

5. The Student Health Center must prominently post its notice on the website and make the notice available electronically through the website.
6. The Student Health Center may provide the notice by email. A paper copy must be provided at the request of the patient or if the mail transmission fails.
7. If the first service delivery to a patient is delivered electronically, the Student health Center must provide the notice automatically and immediately. There must be a procedure in place to notate this electronic delivery. The individual may obtain a paper copy at his or her request
8. If the Student Health Center is involved in an Organized Health Care Arrangement, then it may use a joint Notice from the Student Health Center and any physicians on its medical staff. The Student Health Center must provide the joint Notice to the patient upon the initial interaction with the patient. This joint Notice must describe the hospitals and physicians to which the joint Notice applies and must explain that Protected Health Information will be shared as necessary to carry out treatment, payment, and health care operations.
9. For recurring patients, the Notice may be provided at the initial interaction and does not need to be provided again unless a change has been made to the notice.
10. The Student Health Center must document compliance by retaining copies of the notices issued.
11. The Student Health Center may review and update the notice. Any revised notice must be distributed whenever there is a material change to the users or disclosures, individual's rights, legal duties or other privacy practices state in the notice.

References: 45 C.F.R. § 164.520