

## **PRIVACY PRACTICES NOTICE**

These Privacy Practices Notice provisions apply only to health care providers with direct treatment relationships with individuals. A health care provider has indirect treatment relationships when the health care provider delivers health care to an individual based on the orders of another health care provider and typically provides services or products, or reports the diagnosis or results associated with the health care, directly to another health care provider that provides those services or products or reports to the individual.

**POLICY - Privacy Practices Notice.** As a health care provider with direct treatment relationships with individuals, we will maintain a Privacy Practices Notice to give individuals written notice of the uses and disclosures of protected health information that we may make, and of the individuals' rights and our legal duties with respect to protected health information.

We will promptly revise our Privacy Practices Notice whenever there is a material change to our uses or disclosures of protected health information, to our legal duties, to the individuals' rights, or to other privacy practices that render the statements in our Notice no longer accurate.

### **POLICY - Distribution.**

- We will furnish our Privacy Practices Notice to each individual no later than the date of our first service delivery to the individual after April 13, 2003.
- We will furnish the Notice by personal delivery if our first service delivery is a patient visit.
- We will deliver the Notice by automatic and contemporaneous electronic response if our first delivery is by electronic mail or the Internet.
- We will promptly mail the Notice if our first service delivery is by telephone.
- We will prominently post and make electronically available our Notice on each web site we maintain that provides information about our services.
- We will post our Notice in a clear and prominent place at each of our service delivery sites so that individuals seeking service from us may reasonably be expected to be able to read the Notice.
- We will have our Notice available at each of our service delivery sites to give individuals who request it.
- We will furnish our Notice to any person on request.
- In an emergency treatment situation, we will furnish our Notice as soon as reasonably practicable after the emergency has abated.
- We may email our Notice to each individual who has agreed to electronic notification, and not withdrawn that agreement. We must provide a paper copy of our Notice to any individual whom we know failed to get our e-mail transmission of our Notice or who requests a copy.

Our Privacy Officer will coordinate with the managers of each department to ensure proper distribution of our Notice by our workforce.

**POLICY - Notice Acknowledgment.** We will make a good faith effort to obtain an individual's written acknowledgement of receipt of our Notice at the first service encounter. If the individual fails or refuses to give the acknowledgement, we will document our effort to obtain it.

If our first service encounter is an emergency treatment situation, we do not need to seek written acknowledgement of receipt of our Notice from the individual who received the emergency health care.

### **PROCEDURE**

**Notice Acknowledgement.** If you are responsible for furnishing our Notice at service encounters, you must request the individual to sign an acknowledgement of receipt of our Notice.

If the Notice is furnished in person, ask the individual to sign the Notice Acknowledgement.

If the Notice is mailed after a telephone service delivery, include Notice Acknowledgement and a stamped, self-addressed envelope with the mailing and request that the individual sign and return the Notice Acknowledgement in the included envelope.

If the Notice is furnished electronically, ask the individual to acknowledge its receipt by return email.

If the individual fails or refuses to provide a signed Notice Acknowledgement or give other written or electronic acknowledgement of receipt of the Notice, document your good faith effort to obtain acknowledgement on Notice Acknowledgement.

Attach the completed Notice Acknowledgement or any email acknowledgement to the Notice furnished to the individual and include them in the individual's records.

Although it is not necessary to furnish an individual more than one copy of our Notice, if you are unsure whether an individual has received our Notice, furnish it to the individual and attempt to obtain the individual's acknowledgement on the Notice Acknowledgement.

**POLICY - Organized Health Care Arrangement Joint Notice.** We may use a joint Privacy Practices Notice with the covered entities with which we participate in an organized health care arrangement if all agree to be bound by the terms of the joint Notice with respect to all protected health information created or received pursuant to our participation in the organized health care arrangement.

Only our Privacy Officer may determine if we are part of an organized health care arrangement and, if so, whether we will use a joint Privacy Practices Notice for that organized health care arrangement. Our Privacy Officer must approve the content of the joint Notice before we may use it.

### **PROCEDURE**

### **Joint Notice Distribution.**

**Approval Required.** You must have our Privacy Officer's confirmation that we are part of an organized health care arrangement and approval of a joint Notice for that organized health care arrangement before you may furnish the joint Notice in connection with that organized health care arrangement.

You must distribute a joint Notice and try to obtain acknowledgement of its receipt in the same way you distribute our Privacy Practices Notice, except distribution of the joint Notice to an individual by another covered entity participating in the organized health care arrangement satisfies our distribution obligation to that individual.

Complete FORM 20–Notice Acknowledgement to document that another covered entity distributed the joint Notice to an individual and we were not obligated to distribute the joint Notice to that individual. Attach completed FORM 20–Notice Acknowledgement to the joint Notice and include them in the individual's records. Send a copy to our Privacy Officer.

**POLICY - Compliance with Notice.** We will use and disclose protected health information consistently with our Notice.

**POLICY - Notice Revisions.** Each of our Notices will state that we reserve the right to change our Notice and to make the changes applicable to all protected health information we maintain.

Each of our Notices will explain how we will provide individuals with our revised Notice.

We will not implement a material change in our privacy practices before the effective date of our revised Notice unless the change is required by law, in which case we will implement the change immediately. We will revise our Notice promptly to reflect a change in our privacy practices required by law. We will promptly distribute and post our revised Notice.

### **PROCEDURE**

**Revised Notice Distribution.** You must distribute our revised Notice and try to obtain acknowledgement of its receipt in the same way you distribute our earlier Notice.

Complete the Notice Acknowledgement to document your effort to obtain acknowledgement of receipt of our revised Notice. Attach completed Notice Acknowledgement to the revised Notice and include them in the individual's records. Send a copy to our Privacy Officer.

**POLICY - Documentation.** We will document on paper or electronically our compliance with the Notice and Notice acknowledgement requirements by retaining a copy of each Privacy Practices Notice we issue, each Notice acknowledgement receipt, and any documentation of good faith efforts to obtain such acknowledgement, until 6 years after the later of their creation or last effective date.