

NOTICE OF PRIVACY PRACTICES

Purpose: To provide that patients and other interested persons have a defined opportunity to receive adequate notice of 1) the uses and disclosures of protected health information (“PHI”) that may be made by the provider; 2) patient rights concerning PHI; and 3) the provider’s legal duties pertaining to PHI.

Policy:

1. Reasonable effort shall be made to provide patients or their legally authorized representative the current Notice of Privacy Practices (NPP) on the date of the first service delivery on or after the April 14, 2003, compliance date. An exception exists where the first service delivery involves emergency medical treatment; in such cases, the NPP shall be provided as soon as it is reasonably practicable to do so.
2. Except in emergencies, reasonable effort shall be made to obtain a signed acknowledgement of receipt of the current NPP from the patient or the legally authorized representative.¹
3. Document reasonable attempts to provide the current NPP by filing the signed acknowledgement of receipt in the medical record. Refusals to sign the acknowledgement, or refusals to accept the NPP, shall also be documented.
4. A current NPP will be posted in a prominent location where it is reasonable to expect that patients will see and have an opportunity to read the document. At any time, a patient or the patient’s legally authorized representative may request and receive a copy of the current NPP.
5. The Notice of Information Practices required by Washington State law will be placed in a conspicuous place or provided to the patient in another notice. The Acknowledgement of Receipt of the NPP may contain this required Notice of Information Practices.²
6. The NPP shall describe actual privacy practices and examples of all uses and disclosures of PHI.³ Any change to actual privacy practices shall be reflected in the NPP. Subsequent to any revision, a copy of the “old” NPP shall be retained for 6 years from the date it was last effective.⁴
7. Any person, not only a patient, having questions about the NPP, or privacy/confidentiality practices, shall be directed to the Privacy Officer for further information if necessary.
8. Any member of the general public (who is not a patient or a patient’s legally authorized representative) requesting the NPP shall be provided the current NPP as promptly as circumstances permit. The documentation requirements do not apply.⁵

Policy effective date: ___/___/___ Revision date(s): ___/___/___

¹ It is strongly recommended that such acknowledgements also be obtained from patients receiving the NPP after a first-service delivery that involves emergency medical treatment.

² While the cover sheet for the NPP may contain the required Washington State language, it is still advisable to post it in a prominent location since patients do not have to sign the acknowledgement.

³ If you contact patients to remind them about appointments, or give them information about treatment alternatives or other health-related benefits and services or fundraising activities, you must make mention of these examples of uses or disclosures of PHI in the section pertaining to health care operations in the NPP. The NPP need not mention the required offer to opt out of fundraising that must accompany the first solicitation sent on or after April 14, 2003.

⁴ The NPP must contain a statement reserving the right to make modifications to the practice/health care facility’s practices regarding the PHI maintained.

⁵ Since the documentation requirements do not apply in these circumstances, it would be necessary to provide and document the provision of the NPP if and when the individual becomes a patient at the practice/health care facility.

Primary Responsible Party:

Privacy Officer and Admitting/Front Office Staff

Other Responsible Party:

All staff should have general knowledge and be able to direct questions/concerns appropriately)

Procedure:

1. Patients or their legally authorized representative must be provided the current Notice of Privacy Practices (NPP) no later than the date of the first service delivery, falling on or after the April 14, 2003, Privacy Rule compliance date.⁶
 - a) Ask the individual to sign the written acknowledgement form attached to the NPP.⁷ The signed document shall be filed and maintained in the patient record.
 - b) If the individual refuses the offered NPP or declines to sign the acknowledgement form:
 - Document the refusal on the acknowledgement of receipt form, and
 - File it in the medical record.
For example: "Mr. Smith declined to accept NPP" or "Mr. Smith accepted NPP, but refused to sign the acknowledgement form when requested."
 - Sign and date the notation.
2. There is no requirement to provide the current NPP, or attempt to do so, where the first patient encounter involves emergency medical treatment, making the provision of notice and related documentation requirements impractical and/or inappropriate.
 - a) The documentation in the medical record should corroborate that the patient required and received emergency medical treatment. In such cases, the current NPP shall be provided as soon as it is reasonably practicable to do so. This may be when the patient has stabilized, at the next scheduled appointment, via mail if it appears the patient may not return for another appointment, or by any other means reasonable and appropriate under the specific circumstances.
 - b) When provision of the current NPP at the first service is not accomplished due to the emergency exception, written acknowledgement of subsequent provision [is/is not] required. [Select the option that works best for your practice/health care facility—the HIPAA Privacy Regulations do not require acknowledgement in this case—but it is strongly recommended from a risk management perspective.]
3. Copies of the current NPP shall be maintained and available to give to any patient, legally authorized representative, or other person, so requesting.⁸

⁶ Providers and health care facilities may want to work together on a system to enable compliance with this requirement when the first-service delivery is at the health care facilities in a nonemergency situation.

⁷ A copy of the notice must be distributed to the patient without any express or implied request to return it. It is permissible to have a "recycle" basket with a sign stating, "You have a right to keep the notice of privacy practices. If you do not wish to keep it, please place it in this basket."

⁸ A charge for a copy of the NPP is not permissible under HIPAA.

4. The NPP shall be revised any time there are material changes to the uses and disclosures of PHI, patient rights, provider duties, or other privacy practices referenced in the original NPP.
5. Patients receiving the NPP who have questions or desire further information should be directed to the practice/health care facility Privacy Officer, as necessary. Every effort should be made to help interested patients understand the information contained in the NPP.

Policies and Procedures Specific to Electronic Notices of Privacy Practices and/or Electronic Service Delivery:

1. The current NPP will be prominently posted on the Web site and made readily available electronically through our Web site. [This section is mandatory and applies if you provide information on a Web site about your services.]
2. The current NPP may be provided by e-mail if the patient or individual agrees.
3. If the first service is delivered electronically, the patient shall be provided the current NPP automatically and contemporaneously in response to the first request for service. The required “written acknowledgement” should be captured electronically, by whatever means technologically feasible.⁹

References:

RCW: 70.02.120
45 CFR Subtitle A, Subchapter C. Section 164.520

⁹ If it is not feasible (patient does not have e-mail or facsimile machine) to deliver the NPP as required by the rule, we recommend that you inform the patient that you will mail the NPP and the acknowledgement form (for the patient to complete and return) and document your actions.