I. SCOPE

This policy identifies the requirements as provided by HIPAA relating to the University's Notice of Privacy Practices.

II. POLICY

It is the policy of the University to comply with the Health Insurance Portability and Accountability Act (HIPAA) rule, as amended, pertaining to the notice requirements of its uses and disclosures of PHI and any applicable related state laws that are not preempted by HIPAA. The HIPAA Privacy Regulations can be located at 45 C.F.R. Parts 160 & 164.

In order to achieve such compliance, the University will provide its Notice of Privacy Practices (the Notice) (See Attachment A) which informs the patients, prospective, current and former faculty, staff and covered dependents (Individuals) as to how information about the Individuals may be used and disclosed, how the Individual can obtain access to this information and the Individual's rights under HIPAA. This Notice shall be provided to the Individual at the time of registration and thereafter upon request. Additionally, the Individual will also have the right to request and receive additional copies of the Notice.

III. REQUIREMENTS

1. An Individual has a right to receive notice of how the University may use and disclose PHI, the Individual's related rights and the University's duties with respect to PHI.

   Exceptions: An inmate does not have a right to such notice.

2. The University shall provide its Notice in writing and plain language. Such notice will contain the required elements as set forth in HIPAA.

3. The University shall revise and make available its Notice whenever there is a material change to the uses or disclosures, the Individual's rights, the University's legal duties, or other privacy practices stated in the Notice.

4. The University shall make the Notice available on request to anyone and on the University's website.

5. If the University has a direct treatment relationship with an Individual (one which does not involve the use of another health care provider), it shall:

   (i) Provide the Notice no later than the date of the first service delivery to such Individual. For emergency treatment situations, this requirement is extended to until reasonably practicable after the emergency situation;

   (ii) Make a good faith effort to obtain the Individual's written acknowledgment of receipt of the Notice no later than the date of first service delivery. This
requirement does not apply to emergency treatment situations. If an Individual refuses to sign or otherwise fails to provide an acknowledgment, the University shall document its good faith efforts along with the reason why the acknowledgment was not obtained. The University’s “Acknowledgment of Receipt of Notice of Privacy Practice” form (see Attachment B) is where the Individual is to initial that he or she received the Notice. This form is to also be used to document if the Individual fails to acknowledge such receipt along with a reason.

(iii) If the University maintains a physical service delivery site, they shall:

(a) Have the Notice available at the service delivery site for Individuals to request to take with them; and

(b) Post the Notice in a clear and prominent location where it is reasonable to expect Individuals seeking service or benefits from the University to be able to read the Notice; and

(c) Whenever the Notice is revised, make the Notice available upon request on or after the effective date of the revision.

6. The University may provide the Notice required by this section to an Individual by e-mail, if the Individual agrees to electronic notice and such agreement has not been withdrawn. If the University knows that the e-mail transmission has failed, a paper copy of the Notice must be provided to the Individual.

7. For purposes of this section, if the first service delivery to an Individual is delivered electronically, the University shall provide electronic Notice in response to the Individual's first request for service or benefits.

8. The Individual who receives the electronic Notice retains the right to obtain a paper copy of the Notice upon request.

9. The University shall document compliance with the notice requirements by retaining copies of the Notices, including all amended or replacement versions issued, as required by HIPAA. These copies shall be retained by the Privacy Officer and by the Office of General Counsel.

IV. RESPONSIBILITY

It shall be the responsibility of each University School/unit/department subject to these requirements to implement processes and procedures to meet the requirements set forth in this policy.

V. NON-COMPLIANCE

An employee’s failure to abide by this policy may result in disciplinary action.

VI. REFERENCE

ATTACHMENT A: University of Pittsburgh Notice of Privacy Practices
ATTACHMENT B: University of Pittsburgh Acknowledgment of Receipt of Notice of Privacy Practices