Policy and Procedure: HIPAA/HITECH Compliance
Topic: Privacy Notice and Acknowledgement

HIPAA Regulation:

- Notice of Privacy Practices $164.520

Policy Purpose:

The purpose of this policy is to provide guidance with respect to the Notice of Privacy Practices in accordance with the HIPAA requirements.

Policy Description:

It is the policy of Saratoga Bridges that a Notice of Privacy Practices (the Notice) must be published, that the Notice and any revisions to it must be provided to all individuals at the earliest practical time, and that all uses and disclosures of protected health information (PHI) must be done in accordance with Organization’s Notice of Privacy Practices.

It is the policy of Saratoga Bridges that efforts will be made to gain written acknowledgement of the receipt of the Notice from all individuals to whom we provide the Notice of Privacy Practices. If written acknowledgement is not provided, Saratoga Bridges will keep documentation that Notice was sent in the individual’s universal case record (UCR).

Policy Responsibilities:

Privacy Officer

1. Maintains the Notice and updates it when changes occur.
2. Maintains all versions of the Notice in the Saratoga Bridges’ HIPAA Compliance file.
3. Posts the Notice in the general program areas, administrative office, and residences. Assures the Notice is posted on Saratoga Bridges’ website.
4. Makes the Notice available in other languages, if appropriate.
5. When the Notice changes, posts the most current Notice. Also posts a sign that indicates that the Notice has been modified and how individuals may receive a copy of the new notice.
6. Provides notification to all programs of any changes to the Notice.
Privacy Officer
1. Assures that the Notice is provided to all individuals who have not previously been given the Notice.
2. Assures individuals and/or personal representatives (involved family, guardian) are advised to read the Notice and sign the acknowledgement. Assures that assistance is provided to individuals as needed in reading and/or understanding the notice.
3. Provides each individual receiving the Notice with Saratoga Bridges Acknowledgement of Receipt of Notice of Privacy Practices. (Acknowledgement is a separate page from the Notice.)
4. Assures that the individual’s signed acknowledgement is filed in the individual’s clinical record in the HIPAA section.
5. When the Notice changes, assures a copy of revised Notice is provided to individuals and/or personal representative (involved family, guardian, advocate, etc.) at the next treatment/service plan review or service encounter, whichever comes first.
6. If the individual refuses to sign the acknowledgement, an offer to contact the Privacy Officer will be made. (Treatment/services will not be withheld upon refusal to sign the acknowledgement.)

Privacy Officer
1. Answers individual’s questions or concerns.

Program Staff
1. Documents the efforts to explain the Notice and subsequent failure to obtain a signature on the Acknowledgement Form.
2. Forwards all requests for special privacy protections, alternate confidential communication channels, amendments to PHI, disclosure accounting, or access to or copying of PHI, and complaints to the Privacy Officer. Staff will communicate all requests described above in writing to the Privacy Officer.

Appendix: Acknowledgement of Receipt of Notice Form
My signature on this page indicates that I have either read or had the following Saratoga Bridges policies explained to me and I have a copy of such in my possession.

Saratoga Bridges
Saratoga County Chapter, NYSARC, INC.
Notice of Privacy Practices

____________________________  _______________________
Individual’s Signature       Date

____________________________  _______________________
Parent/Guardian/Correspondent Date

____________________________  _______________________
Representative of Saratoga Bridges Date