

**Texas Tech University Health Sciences Center
HIPAA Privacy Policies**

Administration	Policy 1.2
Notice of Privacy Practices	Effective Date: July 21, 2009
References: 45 CFR 164.520, http://www.hhs.gov/ocr/hipaa	

Policy Statement

This policy provides instruction on how to post and deliver the Texas Tech University Health Sciences Center (TTUHSC) Notice of Privacy Practices (Privacy Notice), and document acknowledgment of receipt of the Privacy Notice.

Scope and Distribution

This policy applies to all health care clinical service areas owned and/or operated by TTUHSC. It does not apply to inmates seen or treated by TTUHSC.

Procedure

1. TTUHSC Privacy Notice
 - a. *Content of Privacy Notice.* The Privacy Notice shall be prepared and updated by the Institutional Privacy Officer (IPO). The Privacy Notice shall be in plain language and contain the elements required by 45 CFR 164.520.
 - b. *Revision to Privacy Notice.* The IPO shall revise and distribute the TTUHSC Privacy Notice whenever there is a material change to: (a) the uses or disclosure; (b) the individual's rights; (c) TTUHSC's legal duties; or (d) other privacy practices stated in the Privacy Notice. Except when required by law, a material change to any term of the Privacy Notice will not be implemented before the effective date of the revised Privacy Notice containing the material change.

2. Posting of Privacy Notice
 - a. *Clinic Locations.* The Privacy Notice shall be conspicuously posted at all TTUHSC health care delivery sites, including but not limited to medical record departments, ambulatory clinics, and retail pharmacies. The Privacy Notice shall be posted in a clear and prominent location where individuals seeking health care items or services from TTUHSC can read the Privacy Notice.
 - b. *Website.* The IPO shall post the most current Privacy Notice on TTUHSC's website at www.ttuhs.edu/hipaa/privacy. All TTUHSC patient services websites shall have a link to the electronic version of the TTUHSC Privacy Notice

3. Delivery of Privacy Notice
 - a. *New Patients.* A copy of the current TTUHSC Privacy Notice shall be given to each new TTUHSC patient (or his/her legal guardian or personal representative) seen at a TTUHSC facility (i.e., clinic, retail pharmacy) no

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later than the first visit or encounter, including electronic encounters (i.e., telemedicine or internet). The Privacy Notice can be delivered in person or electronically, through a secure electronic connection.

- b. *Requests for Privacy Notice.* Upon request, a copy of the current Privacy Notice shall be given to the patient or his/her legal guardian or personal representative.

4. Privacy Notice Acknowledgment

- a. *Written Acknowledgment of Receipt.* The acknowledgment of receipt of the Privacy Notice is located on the Consent to Treatment form. TTUHSC personnel shall make a good faith effort to obtain a signed written acknowledgment of receipt of the Privacy Notice from the patient or his/her legal guardian or personal representative.
- b. *Refusal to Sign Acknowledgment.* If an individual refuses to sign the acknowledgment of receipt of Privacy Notice, personnel shall document on the Consent to Treatment form the individual's refusal to sign the acknowledgment of receipt of the Privacy Notice.
- c. *Failure to Obtain Signed Acknowledgment.* If an acknowledgment cannot be obtained (other than as noted in 4b above), personnel shall document the efforts taken to obtain the acknowledgment and the reason why it was not obtained.
- d. *Documentation Retention.* The signed acknowledgment or documentation of good faith efforts to obtain a signed acknowledgment (See 4b and 4c above) shall be maintained in the patient's medical record, or in the absence of a medical record, in a departmental log book.

5. Responsibilities of the TTUHSC Institutional Privacy Officer

- a. *Documentation.* The IPO shall retain copies of the Privacy Notices issued by TTUHSC for six (6) years from its effective date.
- b. *Monitoring.* The IPO shall routinely monitor compliance with policy related to posting and delivery of the privacy notice.

Approval Authority

Questions regarding this policy may be addressed to the Regional Privacy Officer ([Amarillo](#), [El Paso](#), [Permian Basin](#)), the [Institutional Privacy Officer](#), or the [Institutional Compliance Officer](#).

Responsibility and Revisions

This policy may be amended or terminated at any time.