



UNIVERSITY HOSPITAL

Newark, New Jersey

UNIVERSITY HOSPITAL POLICY

SUBJECT:	ETHICS AND COMPLIANCE	TITLE:	NOTICE OF PRIVACY PRACTICES		
CODING:	831-200-253	ADOPTED:	July 1 2013	AMENDED/ REVIEWED:	

PURPOSE:

To ensure employees at University Hospital understand the requirement to provide a Notice of Privacy Practices (“Notice”) to all patients as required by the Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information (Privacy Standards), 45 CFR Parts 160 and 164, and any and all other Federal regulations and interpretive guidelines promulgated hereunder.

RESPONSIBILITIES:

University Hospital’s Chief Compliance and Privacy Officer is to ensure compliance with this policy. The Senior Manager of Admitting and the Executive Director of Ambulatory Care are to implement this policy within their respective units.

POLICY:

University Hospital must provide the Notice of Privacy Practices to its patients.

University Hospital must make a good faith effort to obtain an acknowledgment of receipt from the patient.

University Hospital must post copies of the entire Notice within the facility in a clear and prominent location.

A copy of the Notice must be posted and made available on the University Hospital website.

PROCEDURE:

Registration/Admitting Staff (all points of service including inpatient, outpatient clinics, ER, SDS):

1. Provide Notice of Privacy Practices to each patient at his/her first service encounter.
 - a. Indirect treatment areas such as Radiology, Laboratory, and Pharmacy need not provide the Notice to University Hospital patients.
 - b. In an emergency treatment situation, the Notice is to be provided as soon as it is reasonable and practical to do so (after the emergency situation has ended).
 - c. The Notice is required to be provided to the patient once and is not necessary for repeat visits; however, patients with repeat visits could be offered another Notice.
 - d. Notices should be made available to anyone who asks for it.
 - e. The Notices will be available in English and Spanish.
 - f. Notices are available for reorder through University Hospital's Forms Vendor.
2. Good faith effort to obtain acknowledgment of receipt from patient
 - a. For SDS, MSP, Cardiac Cath, L&D, ER and Admitting, the patient will initial section #2 of the "Consent to Treatment and Financial Payment" form.
 - b. For outpatient clinics and services, the patient will sign the "Receipt of Notice of Privacy Practices Written Acknowledgement" form.
 - c. In an emergency treatment situation, it is not necessary to make a good effort to obtain the acknowledgment. It must be documented that the acknowledgement was not obtained due to emergency treatment situation.
 - d. If the acknowledgment cannot be obtained (the patient refuses to sign, etc.) efforts to obtain the acknowledgement and the reasons for why it was not obtained must be documented.
3. Enter the date of the issuance of the privacy notice into the CPI screen under the field entitled "Privacy Notice". The date is needed **only** on the initial visit.

NOTE: A date cannot be entered into the system until the patient actually receives the Notice of Privacy Practices. Therefore if a patient is pre-registered, or has a paper registration where the patient is not present, a date should **NOT** be entered into the system.

4. All acknowledgements must be forwarded and maintained in patient's Medical Records.

Chief Compliance and Privacy Officer:

1. In conjunction with the Executive Director of Hospital Support Services, the Chief Compliance and Privacy Officer will assure that Notices are posted in a clear and prominent location where it is reasonable to expect individuals seeking service from the

facility can read the notice. At minimum the Notices shall be located in the following patient treatment/service areas:

- a. Emergency Department
 - b. Admitting Department
 - c. Same Day Surgery Department
 - d. Outpatient Clinics
 - e. Patient Advocate Office
 - f. Volunteer Office
 - g. All Social Work Offices
 - h. Ancillary Departments (e.g., Laboratory, Radiology, Pharmacy, Radiology)
 - i. Nutrition Department
2. The Chief Compliance and Privacy Officer shall ensure maintenance of the hospital website which will prominently post the hospital's Notice and make the Notice available electronically through the website.
 3. The Chief Compliance and Privacy Officer shall monitor compliance with the policy and procedures.

APPROVALS BY:	NAME:	SIGNATURE:
President and CEO	James R. Gonzalez	
Interim Chief Compliance and Audit Officer	John W. Ras	
Chief Financial Officer	Tom Daly	
Director of Emergency Services	Brian Dolan	
Executive Director of Ambulatory Care Services	Kathy Opromollo	
Executive Director of Hospital Operations	Nancy Hamstra	