Catholic Health POLICY AND PROCEDURE						
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RESPONSIBLE DEPARTMENT: Corporate Compliance/HIPAA Privacy	POLICY LEVEL: CHS	<b>EFFECTIVE DATE:</b> 7/2/20				
PREPARED BY:  Kimberly Whistler, Esq., Corporate Compliance & Privacy Officer (Leonardo Sette-Camara, Esq., Corporate Compliance & Privacy Officer E. Anne Mason- Compliance and Privacy Officer Privacy Committee- Marlene Grygorcewicz)	APPROVED BY: Compliance Committee (Nancy Sheehan, Esq. Senior VP Legal Services, Chief Legal Officer) Operational Policy Council 10/29/14	<b>MSMH</b> : 7/1/15				

This document is not intended to create, nor is it to be construed to constitute a contract between CHS and any of its Associates for either employment or the provision of any benefit. This policy supersedes any policy previous to this policy for any CHS organizations and any descriptions of such policies in any handbook of such organization. Personnel failing to comply with this policy may subject to disciplinary action up to and including termination.

## PURPOSE:

This Policy describes the System's responsibilities that relate to maintaining, revising, and distributing the System's Notice of Privacy Practices.

## **APPLIES TO:**

This Policy applies to all components of the System. As used in this Policy, the term "System" shall include the Catholic Health System (CHS), its Healthcare facilities and agencies, and the Workforce of such entities. For Purposes of this Policy, Workforce members include associates, volunteers, trainees, and other persons whose conduct, in the performance of work for the System (or its Healthcare facilities and agencies) is under the direct control of such entity. Members of the System's various medical staffs shall also comply with this Policy.

## POLICY:

The System shall make accessible a copy of our Privacy Notice (Form #CHS-PRIV-01-F01) to each patient with a direct treatment relationship with the System and shall display, maintain and revise the Privacy Notice in accordance with State and Federal law.

Responsibility for implementation of this policy applies to associates at each System location where patients are treated and personnel at all points of patient registration, except in emergency situations as noted below.

The Compliance & Privacy Officer is responsible for initiating revisions to the Privacy Notice.

Please refer to policy #CHS-LS-005, entitled "Records Management" for retention requirements.

## PROCEDURE:

- 1. Posting of Privacy Notice on Internet: The current version of the Notice of Privacy Practice (Privacy Notice) is posted to the Catholic Health public web page.
- 2. <u>Maintain Copies of Notice</u>: Each System location where patients are treated shall maintain a sufficient number of copies of the current Privacy Notice to distribute to requesting patients who have a direct treatment relationship with the System.

<u>Note</u>: a "direct treatment relationship" exists in most cases when the System treats a patient. The exception will be when the System delivers health care to an individual based on the orders of another health care provider and provides the diagnosis or results associated with the health care directly to the other health care provider who provides the reports to the patient. If there is any question, you should assume that we have a direct treatment relationship with a patient and deliver the Privacy Notice to the patient.

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- 3. <u>Distribute Copies of Notice</u>: Personnel at all points of patient registration and intake shall make available a current Privacy Notice as follows:
  - a. <u>In General</u>: Each patient who has not previously received a Privacy Notice shall receive a Privacy Notice upon the first date that service is provided to the patient on or after April 14, 2003 (including service provided electronically). Additionally, any individual who requests a copy shall receive a Privacy Notice.
  - b. **Exception Emergency Situations**: Patients who report to the System for emergency treatment shall not receive a Privacy Notice at the time of treatment. In such cases, if the patient has not previously received a copy of the System's Privacy Notice, the patient upon request will receive a copy with their discharge instructions, or as soon as practicable after the emergency is resolved.
  - c. <u>Special Rule Minors and Incompetents</u>: If a patient is a minor (under 18) or incompetent, then it is permissible to deliver a Privacy Notice to their personal representative.

<u>Note</u>: a "personal representative" is typically a parent of a minor, a legal guardian, or a person who has authority to make health care decisions for another individual. An agent appointed under a general power of attorney may NOT serve as a patient's "personal representative".

- 4. <u>Obtain Patient's Acknowledgement</u>: System personnel shall obtain an Acknowledgement from every patient who receives service within the System (or, in appropriate cases, the patient's personal representative) on each occasion that such service is provided. Such acknowledgment shall be recorded on form # CHS-PRIV-01-F02, entitled "Consent and Financial Agreement". Patients and their representatives should be assured that by signing the Acknowledgment, they are <u>only</u> acknowledging that they received a copy of the Privacy Notice, and not acknowledging that they have read the Notice or understand the Notice.
  - a. Exception Patient Refuses to Sign Acknowledgment: If a patient refuses to sign the Acknowledgment, System personnel shall sign the Acknowledgement in the appropriate location, and check the box which indicates that the System attempted in good faith but failed to obtain the patient's acknowledgment, and place a copy of the Acknowledgment in the patient's file.
  - b. **Exception Treatment Delivered During Emergency**: If treatment is delivered during an emergency, System personnel shall not require the patient to sign an Acknowledgment. In such cases, System personnel shall sign the Acknowledgment in the appropriate location and check the box which indicates that treatment was delivered during an emergency.
- 5. <u>Display the Current Notice</u>: A copy of the current Notice must be prominently displayed at the System's waiting rooms, registration desks, check-in windows and any other location where it is reasonable to expect individuals to seek treatment from the System. Additionally, as long as the System maintains a website that provides information about its services, the Notice must be prominently displayed on the website and available for delivery to patients in electronic format.
- 6. Revising the Notice: The effective date of the revised Notice shall be indicated on the cover page of the Notice. It is not necessary to provide revised Notices to patients who have previously received an earlier version of the Notice except when a patient requests a copy of the revised Notice. After the Notice is revised, all outdated versions must be removed from public display and must be replaced with the new version.

**Enforcement:** "An Associate's failure to comply with any portion of this policy will result in disciplinary action as defined by the CHS Code of Conduct Principles and Corrective Action Policy, HR Policy #HR-011-PC". Referenced: CHS-PRIV-31

**See associated forms:** CHS-PRIV-01-F01 Notice of Privacy Practice (Privacy Notice)- available in Arabic,

English and Spanish languages

CHS-PRIV-01-F02 Hospital Consent and Financial Agreement- available in Arabic,

English and Spanish languages

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ORIGINATION DATE: 10/31/03 REPLACES (If applicable): NA								
	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials
REVIEWED:	03/06/06 MG	05/11 EAM	08/14 LSC	08/16 LSC				
REVISED:	06/09 EAM	11/12 EAM	2/17 LSC	05/18 LSC	05/20 KW			
CSC/OPC APPROVALS: 8/31/16, 5/30/18, 6/24/20 Email								
REFERENCES: FEDERAL LAW: Federal Law: 45 C.F.R. §164.520								