

# Stark County Board of Developmental Disabilities

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|---|----------------------|
| HIPAA Procedure 5: HIPAA Privacy Notice | Effective: 4/14/2003 |
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## **Subject: HIPAA Privacy Notice**

The Privacy Officer is responsible to assure that a document called a "[Privacy Notice](#)" is developed, revised as necessary, and distributed to those individuals served by the Board.

The Privacy Notice shall be written in plain understandable language and accurately describe the privacy practices of the Board.

The Privacy Notice must clearly inform the individual served of its importance and contain the following statement in its header: "THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY."

The Privacy Notice must include a description, including at least one example, of uses and disclosures that are permitted for the purposes of payment, treatment, and healthcare operations. Additionally, the Privacy Notice must include a description of each of the other purposes for which the Board is permitted or required to use and disclose the PHI without the authorization of the individual served in sufficient detail to put the individual served on notice of the use and disclosures that are permitted under the privacy rule as well as any more stringent state law regarding these uses and disclosures. Lastly, the Privacy Notice must contain a statement that any use or disclosure that is not included in the Privacy Notice will be made only with the authorization of the individual served, legal guardian of the individual served, or parent or legal guardian of the individual served if the individual served is under the age of eighteen (18).

If the Board is going to contact individuals served for any of the following reasons, it must include this in the Privacy Notice: (a) Appointment reminders; (b) describing and/or recommending treatment alternatives; (c) providing information about health related benefits and services that may be of interest to the individual; and (d) to contact individuals for assistance in passing levies.

The Privacy Notice must describe the rights of the individual served regarding their own PHI, and how to exercise those rights. The Privacy Notice must therefore include information regarding the following: (a) one's right to revoke an authorization; (b) one's right to request restrictions on the use of PHI and the Board's concurrent right to refuse to accept the requested restrictions; (c) one's right to receive confidential communication; (d) one's right to inspect and copy information; (e) one's right to amend the PHI; (f) one's right to an accounting of the disclosures; (g) one's right to receive a paper copy of the Privacy Notice; and (h) information on how to lodge complaints, and a statement that the individual will not suffer from retaliation for lodging such a complaint.

The Privacy Notice must include a statement that the Board is required by law to maintain the privacy of one's PHI. The Board is also required to give notice of its legal duties and privacy practices, and the fact that the Board must abide by the terms of the Privacy Notice. The Privacy Notice must include a statement that the Board is reserving its right to change its own privacy practices, and information on how the Board will provide the revised privacy notice to the individuals served. Additionally, the Privacy Notice must give the individual served information on how to contact a representative of the Board and make a complaint to the Board or the Secretary of

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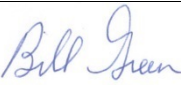
Health and Human Services. The Privacy Notice must include an effective date, which must not precede the date it is printed or published.

The Privacy Notice must be provided to an individual having a direct treatment relationship with the Board on the first day of providing a service to an individual. The Privacy Officer is responsible for overseeing the proper dissemination of the Privacy Notice. At the time of providing the Privacy Notice, the Board must make a good faith attempt to obtain a [written acknowledgment of receipt of the Privacy Notice](#) from the individual served, legal guardian, or parent or legal guardian if the individual is under the age of eighteen (18). The responsible Compliance Committee Member shall assure that those staff members and Business Associates who are responsible for initial contact, including those involved in admissions and Major Unusual Incident (MUI) Investigations, understand these responsibilities. If the first point of service is an emergency situation, the Privacy Notice and written acknowledgement need not be requested until reasonably practicable after the emergency treatment situation.

The staff person responsible for the development of the individual's personal plan will provide the individual, legal guardian or parent a copy of the Privacy Notice at the annual planning meeting (IP, ISP, IEP, and IFSP) and request the completion of the written acknowledgement.

The Privacy Notice must also be posted in a prominent location in the lobby of the Board sites. The Board must have copies of the Privacy Notice available to give upon request. The Board must maintain a copy of the Privacy Notice that it issues for a minimum of six (6) years.

Ref. CFR 164.520(a)

|  |  |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
|--|--|-----|----|---------------|---|--|-----------------|--|--|--------|--|--|----------|--|--|---|--|--|--|-------------|--------------------------|---------|----------|
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Applies to:</td> <td style="width: 15%;">Yes</td> <td style="width: 15%;">No</td> </tr> <tr> <td>All Employees</td> <td style="text-align: center;">X</td> <td></td> </tr> <tr> <td>Non Represented</td> <td></td> <td></td> </tr> <tr> <td>SCEPTA</td> <td></td> <td></td> </tr> <tr> <td>SCDD SSA</td> <td></td> <td></td> </tr> <tr> <td colspan="3" style="padding-left: 20px;">(1) <u>See Current Bargaining Agreement</u></td> </tr> </table> | Applies to:                                      | Yes | No | All Employees | X |  | Non Represented |  |  | SCEPTA |  |  | SCDD SSA |  |  | (1) <u>See Current Bargaining Agreement</u> |  |  | <p><b>Historical Resolution Information</b><br/>Policy 2.22 HIPAA</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"><b>Date</b></td> <td style="width: 70%;"><b>Resolution Number</b></td> </tr> <tr> <td>1/19/13</td> <td>01-09-13</td> </tr> </table> <p><b>Procedure Revised:</b> 5/4/12</p> | <b>Date</b> | <b>Resolution Number</b> | 1/19/13 | 01-09-13 |
| Applies to:  | Yes  | No  |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
| All Employees  | X  |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
| Non Represented  |  |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
| SCEPTA   |  |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
| SCDD SSA   |  |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
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| 1/19/13  | 01-09-13   |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |
| Superintendent's Signature:   | Reviewer(s): Privacy Officer<br>Security Officer |     |    |               |   |  |                 |  |  |        |  |  |          |  |  |   |  |  |  |             |                          |         |          |