

POLICY TITLE: <b>Notice of Privacy Practices</b>	DEPARTMENT: <b>Compliance</b>	
POLICY AUTHOR: <b>Chief Compliance Officer</b>	POLICY NUMBER: <b>MGCOM-019</b>	VERSION NUMBER: <b>.01</b>
APPROVED BY: <b>Clinical Governance Board</b>	APPROVAL DATE: <b>12/15/2022</b>	EFFECTIVE DATE: <b>12/15/2022</b>

## SCOPE

This policy is applicable to all Team Members of UWH of Michigan’s clinical and operations organizations.

## SUMMARY

To ensure that the Company adopts and implements a Notice of Privacy Practices that meets the requirements of the HIPAA Regulations.

## DEFINITIONS

**Company** – For the purposes of this policy, “Company” refers to UWH of Michigan’s clinical and operations organizations.

**Notice of Privacy Practices (NPP)** – Describes the HIPAA defined patient rights related to use and disclosure of the individual’s health information.

**Protected Health Information (PHI)** – Protected Health Information, (according to HIPAA 45 C.F.R. § 160.103) is all “individually identifiable health information” that is transmitted or maintained in any form or media, whether electronic, paper, or oral. “Individually identifiable health information” is information, including demographic data, that relates to an individual’s past, present or future physical or mental health or condition, the provision of health care to an individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number). PHI does not include employment records.

**Team Members** – All individuals working at the Company’s care centers including all providers, employees, employees of the Company’s management company, operations staff, clinical staff, temporary employees, and contractors.

## POLICY

It is the policy of the Company that patients are provided with a Notice of Privacy Practices (NPP) that describes how the Company may use and disclose their Protected Health Information (PHI), their rights concerning PHI and the legal obligations of the Company and that meets the requirements of the HIPAA Regulations.

### Provision of Notice.

A. Provide the NPP by the first service date, or as soon as reasonably practicable after an emergency treatment situation.

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- B. Annually following the first date of service
- C. The NPP must also be posted in a prominent location, visible to all patients.

Acknowledgement of Notice

Ensure patients confirm receipt of the NPP by signing the Acknowledgement of Notice of Privacy Practices as a new patient and annually thereafter.

Content of Notice

The Compliance Department provides an NPP that meets all regulatory requirements.

Revisions to Notice

The Compliance Department will revise and distribute its NPP whenever there is a material change to the uses or disclosures, the individual's rights, the Company's legal duties, or other privacy practices stated in the notice.

Specific requirements for electronic notice

- A. If the Company maintains a website that provides information regarding customer services or benefits, it will prominently post its NPP and make it available electronically from its website.
- B. The Company may email the notice to patients if the patient has agreed or requested.

**ENFORCEMENT**

Suspected non-adherence to this policy will be investigated, which may result in appropriate action taken in accordance with the Sanctions, Enforcement and Discipline policy (MGCOM-040).

**EXCEPTIONS TO POLICY**

Any exceptions to these policies must be for valid patient care or a business reason and must be approved by the Clinical Governance Board and/or the Compliance Committee, as appropriate.

**ATTACHMENTS & FORMS**

- XXCOM-019.00.a01 – Acknowledgement of Notice of Privacy Practices
- XXCOM-019.00.a02 - Notice of Privacy Practices Document

**REFERENCES**

- MGCOM-040 – Sanctions, Enforcement and Discipline