



SAINT LOUIS UNIVERSITY

NOTICE OF PRIVACY PRACTICES (Provision)

Policy Number: OUC-043

Version Number: 2.0

Effective Date: 04/14/2003

Responsible University Official: Privacy Officer

Approved By: Executive Staff

Legal and Compliance Committee

1.0 INTRODUCTION

Saint Louis University (hereinafter the “University”) is committed to provide services in compliance with all state and federal laws governing its operations, incorporating the highest levels of business and professional ethics. The HIPAA Privacy Rule requires health plans and covered health care providers to develop and distribute a notice that provides a clear explanation of individuals’ rights with respect to their personal health information and the entity’s privacy practices. It must describe the uses and disclosures of protected health information as well as the individual’s rights and a covered entity’s legal duties with respect to protected health information.

2.0 PURPOSE

This policy is designed to give guidance regarding the provision of the Notice of Privacy Practices by the University’s health plan and health care providers. This policy is not applicable to inmates.

3.0 PERSONNEL AFFECTED

This policy applies to all regular full-time and part-time faculty and staff and volunteers within all divisions of the University, including employees, professional staff members, residents, agents, representatives and consultants working with the privacy provisions of HIPAA, including the University Health Plan.

4.0 DEFINITIONS

Protected Health Information (PHI): Any individually identifiable health information transmitted or maintained in any form or medium, including oral, written, and electronic. Individually identifiable health information relates to an individual’s health status or condition, furnishing health services to an individual or paying or administering health care benefits to an individual. Information is considered PHI where there is a reasonable basis to believe the information can be used to identify an individual.

5.0 POLICY

1. Saint Louis University will provide a formal notice to individuals regarding the use or disclosure of protected health information pursuant to HIPAA regulation 164.520.

2. The provision of the notice given to individuals regarding the use and disclosure of protected health information pursuant to regulation 164.520 will comply with the policies and procedures described herein.

6.0 PROCEDURES

1. The notice will be provided to individuals with whom Saint Louis University has a direct treatment provider relationship as follows:
 - a. No later than the date of the first service delivery, including service delivered electronically, to such individual after the compliance date for the covered health care provider;
 - b. Upon request;
 - c. Make a good faith effort to obtain an individual's written acknowledgment of receipt of the Notice.
 - d. On or after the effective date of a revision;
 - e. Promptly available at the service delivery site for individuals to request and to take with them;
 - f. Posted in a clear and prominent location where it is reasonable to expect individuals seeking service from the covered health care provider to be able to read the notice;
 - g. Automatically and contemporaneously for electronic notices, when the response is to the individual's first request for service and the first service delivery is delivered electronically. The individual who is the recipient of electronic notice must also be permitted to retain the right to obtain a paper copy of the notice upon request.
2. The notice will be provided by Saint Louis University when it operates as a health plan as follows:
 - a. No later than the compliance date for the health plan, to individuals then covered by the plan
 - b. Thereafter, at the time of enrollment, to individuals who are new enrollees; and
 - c. Within 60 days of a material revision to the Notice to individuals then covered by the plan
3. For Saint Louis University's physical service delivery sites the notice will be:
 - a. Available at the service delivery site for individuals to request and to take with them
 - b. Posted in a clear and prominent location where it is reasonable to expect individuals seeking service to be able to read the notice.
4. Saint Louis University will only use a joint notice when both it and the other covered entities participating in the organized health care arrangement agree to abide by the terms of the notice with respect to protected health information created or received by the University as part of its participation in the organized health care arrangement.

5. All joint notices will:
 - a. Contain all of the specifications required of a single-entity notice and describe with reasonable specificity the covered entities, or class of entities, and service delivery sites, or classes of service delivery sites, to which the joint notice applies;
 - b. Contain all of the specifications required of a single-entity notice and, if applicable, state that the covered entities participating in the organized health care arrangement will share protected health information with each other, as necessary to carry out treatment payment, or health care operations relating to the organized health care arrangement;
 - c. Be provided to individuals within the same requirements as a single-entity notice.
6. Saint Louis University will prominently post its notice on any web sites that it maintains that provides information about its customer services or benefits, and make the notice available electronically through the web site.
7. When providing the notice to an individual by e-mail, Saint Louis University will:
 - a. Ensure that the individual has agreed to electronic notice and such agreement has not been withdrawn;
 - b. Provide a paper copy of the notice to the individual if the University knows that an e-mail transmission of the electronic notice has failed.
8. Saint Louis University will document compliance with and maintain the notice, or joint notice as applicable, by retaining copies of the notices issued by the University, for a period of at least six years from the date of its creation or the date when it last was in effect, whichever is later.
9. Knowledge of a violation or potential violation of this policy must be reported directly to the Privacy Officer, Compliance Department, or to the Compliance Hotline.

7.0 SANCTIONS

Individuals who fail to comply with this policy and the procedures associated with it will be subject to disciplinary actions guided by the University's Staff Performance Management Policy, Faculty Manual, or Student Guidelines.

Non-compliance in this Policy can result in disciplinary action, including but not limited to, restricted incentive payments, suspension or termination. It may also result in the enforcement of a corrective action plan, as well as notification of the suspected misconduct and/or violation to government regulatory agencies.

This Policy does not limit the University's ability to impose greater sanctions or impose immediate action against serious violations. Disciplinary actions appropriate to the severity of the infraction will be carried out as needed.

8.0 CHANGES TO THIS POLICY

Changes to this policy may be necessary from time to time. At a minimum, the policy and all other program policies, procedures and guidelines will be reviewed on an annual basis.

9.0 RELATED POLICIES & DOCUMENTS

- Notice of Privacy Practices Policy (Content of Notice)
- SLU Notice of Privacy Practices (Form)
- Compliance Hotline Reporting Policy

REVISION HISTORY

EFFECTIVE DATE	VERSION NUMBER	MODIFICATION
4/14/2003	1.0	New Policy
7/01/2008	1.1	Review & Change Format
3/01/2015	1.2	Review & Change Format
	2.0	Ownership Shifted from Provost to General Counsel