

Advanced Neighborhood Pediatrics, LLC	Policy & Procedure HIPAA / PRIVACY NOTICE OF PRIVACY PRACTICES	NUMBER 001
		PRIOR ISSUE
		EFFECTIVE DATE 01/01/2014

PURPOSE

To ensure that a *Notice of Privacy Practices* is provided to, and acknowledged by, each patient and/ or parent or his/her personal representative upon presentation to the Facility.

POLICY

The Facility’s policy is to provide a *Notice of Privacy Practices* (“*Notice*”) to each patient upon each presentation to the Facility, and make a good faith effort to obtain a signed *Acknowledgement of Receipt of Notice of Privacy Practices* (“*Acknowledgement*”) from the patient and/or parent.

(See sample *Notice* and *Acknowledgement* forms following this Policy.)

The *Notice* shall include all elements and statements that are required by law. The *Notice* shall inform the patients and their parents of:

- Uses and disclosures of Protected Health Information (“PHI”) that may be made by the Facility;
- The patient’s rights with respect to his PHI; and
- The Facility’s legal duties with respect to such PHI.

PROCEDURE

1. The *Notice* and *Acknowledgement* forms will be included in the standard clinic Packet.
2. The Facility Administrative Staff will provide the *Notice* to the patient or parent at the time of presentation.
Note: In the case of an emergency treatment situation, the Facility will provide the *Notice* to the patient or parent as soon as reasonably practicable after the emergency treatment situation.
3. The Administrative Staff will make a good faith effort to obtain the patient or parent’s signature on the *Acknowledgement* at the time the *Notice* is provided. The *Notice* and signed *Acknowledgement* will be kept in the patient’s medical chart in the business office.
4. If the patient or parent refuses or is otherwise unable to sign the *Acknowledgement*, the Administrative Staff will document, on the *Acknowledgement* form, what actions were taken to obtain the patient or parent’s signature on the *Acknowledgement* and the reason(s) why a signed *Acknowledgement* was not obtained. This document will then be placed in the patient’s Medical Chart File.
5. The Facility will provide a copy of the written *Notice* to patients or parents and to other persons upon request.
6. The Facility will post a copy of the *Notice* in a clear and prominent location such as the reception or similar location.
7. A current version of the *Notice* will be maintained on the Facility’s website, if any.
8. Whenever the *Notice* is revised, the Facility Privacy Official will assure that:
 - a. The revised *Notice* is made available upon request on or after the effective date of the revision; and
 - b. The revised *Notice* is posted in a clear and prominent location.
9. Material changes shall not be implemented prior to the effective date of the revised *Notice*.
10. A copy of each *Notice* issued by the Facility will be maintained for at least six years from the date it was last in effect.
11. Any member of the workforce who has knowledge of a violation or potential violation of this Policy must make a report directly to the Privacy Official. (See the Policy “Sanctions.”)