

Title: Notice of Privacy Practices	
Policy Area: Compliance	Owner: John McDowell, Director of Governance and Compliance
Date of Approval:	10/19
Approval By:	Matt Crockett, CEO
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Revision Dates:	X/XX; X/XX
Reviewed with no Changes Dates:	X/XX; X/XX
Signature:	

I. Title: Notice of Privacy Practices

II. General Statement of Purpose:

The purpose of this policy is to establish general requirements for the distribution and provision of the Wellfound Behavioral Health Hospital Notice of Privacy Practices (“NPP”).

III. Policy:

Wellfound Behavioral Health Hospital will provide a copy of the Wellfound Behavioral Health Hospital NPP to all patients, or patients’ designated representatives, no later than the date of the first service delivery or when the provider deems in the best interest of the patient, including services delivered electronically. Wellfound Behavioral Health Hospital will make a good faith effort to obtain the patient’s, or Personal Representative’s, signature acknowledging receipt of the NPP.

IV. Scope:

This policy applies to all members of the Wellfound Behavioral Health Hospital workforce including, but not limited to: employees, medical staff, volunteers, students, administrative staff, and other persons performing work for or at Wellfound Behavioral Health Hospital.

V. Definitions

Personal Representative: the individual who, for decision-making purposes, will be treated as the patient. Depending upon the facts and circumstances of each case, a Personal Representative may be directly appointed by the patient or may be deemed to serve the role of Personal Representative under applicable laws and regulations.

VI. Procedures/Guidelines:

A. Content and Distribution of the Notice of Privacy Practices

1. Wellfound Behavioral Health Hospital will maintain a NPP that is written in plain language and that includes, at a minimum, the standard language attached hereto in Appendix A.
2. The NPP will be provided to all patients, or patients’ representatives, with the exception of inmates, at the time of registration.
3. In an emergency situation, Wellfound Behavioral Health Hospital will provide the NPP to the patient, or the patient’s personal representative, as soon as reasonably practicable after the emergency treatment situation.
4. Patients should not be given another copy of the NPP if they are designated in Wellfound Behavioral Health Hospital records as previously registering and receiving the Wellfound Behavioral Health Hospital NPP.
5. The NPP will be posted in Wellfound Behavioral Health Hospital registration areas and on the Wellfound Behavioral Health Hospital website.
6. In the event that the NPP is materially revised, the new NPP will be given to new patients, made available to existing patients upon request and posted in Wellfound Behavioral Health Hospital registration areas and on the Wellfound Behavioral Health Hospital website. A material change to any term of the NPP

- may not be implemented prior to the effective date listed in the newly revised NPP.
7. Additional copies of the NPP will be made available, upon request of the patient, or Personal Representative.
 8. Wellfound Behavioral Health Hospital may provide the NPP to a Wellfound Behavioral Health Hospital patient by e-mail. A paper copy must be provided at the request of the patient or if the e-mail transmission fails.
 9. Wellfound Behavioral Health Hospital will take reasonable steps, based upon identified language needs, to translate and provide the NPP to patients with limited English proficiency.
- B. Obtaining Acknowledgement of Receipt
1. Patients will be asked to sign the NPP “Acknowledgement of Receipt” form attached to each Wellfound Behavioral Health Hospital NPP.
 2. The “Acknowledgement of Receipt” form will be filed in the patient’s medical record.
 3. If a patient, or Personal Representative, refuses to sign the “Acknowledgment of Receipt” form, Wellfound Behavioral Health Hospital will document the good faith attempt to provide the NPP to the patient in the space provided on the “Acknowledgement of Receipt” form. See Appendix A.
 4. The “Acknowledgement of Receipt” form will be filed in the same manner as if the NPP had been signed.
- C. Training
1. The Corporate Compliance Officer will provide training on HIPAA on, at least, an annual basis.
- D. Sanctions
1. In compliance with the HIPAA Privacy Rule, violations of this policy will be subject to disciplinary action as outlined in the Human Resources Policy and Procedure Manual and in the Bylaws, Rules and Regulations of the Medical Staff.
- E. Document Retention
1. Any documentation generated in compliance with this policy will be retained for a minimum of 6 years from the date of its creation.

VII. Enforcement:

All violations of this policy shall be reported to the appropriate manager/supervisor/director or to The Corporate Compliance Officer (253) 301-5466 or appropriate resolution of the matter. You can also make an anonymous report to the Compliance Help-Line, 24 hours a day, 7 days a week, by calling (800) 261-5466 or by visiting www.ethicspoint.com online. Questions related to the access, use, disclosure of PHI should be directed to the Privacy Officer, Office of Corporate Compliance.

VIII. References to Regulations and/or Other Related Policies:

Health Insurance Portability and Accountability Act, 45 CFR Parts 160 and 164
Health Information Technology for Economic and Clinical Health (HITECH) Act, Title XIII of Division A and Title IV of Division B of the American Recovery and Reinvestment Act of 2009 (ARRA), Pub. L. No. 111-5 (Feb. 17, 2009)
Final HIPAA Omnibus Rule (78 Fed. Reg. 5566)