


<b>Name of Policy:</b>	<u>Privacy Notification</u>	 <b>Effective Date:</b> November 20, 2009 Initial Effective Date: August 22, 2005
<b>Policy Number:</b>	3364-101-01-08	
<b>Department:</b>	Ambulatory Services	
<b>Approving Officer:</b>	Associate Vice President Associate Executive Director	
<b>Responsible Agent:</b>	Administrator, Ambulatory Services & Behavioral Health	
<b>Scope:</b>	Ambulatory Services	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

**(A) Policy Statement**

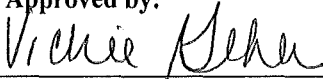
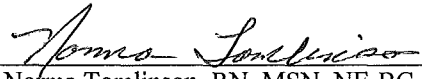
In keeping with Hospital Policy 3364-100-90-09, all outpatients will receive and sign the Joint Notice of Information Practices Notice, and this notification will be entered into the STAR registration system by the registration/desk staff when the patient signature is received.

**(B) Purpose of Policy**

To meet the requirements of the HIPAA Privacy Regulations as specified in DRF 164.520 and 164.530 (j).

**(C) Procedure**

1. Upon registration for an outpatient visit, the registration staff, or department desk staff, who is registering the patient for the visit will review the patient's STAR face sheet to assure the "Privacy Notice" field states "Yes" (top left corner of the face sheet).
2. If the face sheet field (top left corner) states "No", the registration or desk staff will provide the Joint Notice of Information Practices Notice to the patient for review and signature/date. The registration/desk staff will then go into the STAR system on the Number Assignment screen and type a "Yes" into the "Notice of Privacy" field.
3. The signed and dated Joint Notice of Information Practices notice will be forwarded to HIM to store according to Policy 3364-100-90-09.

<b>Approved by:</b>  Vickie Geha Administrator, Ambulatory Services & Behavioral Health   Norma Tomlinson, RN, MSN, NE-BC Associate Vice President Associate Executive Director  <i>Review/Revision Completed By:</i> Ambulatory Services	<b>Review/Revision Date:</b> 8/06 11/20/2009      <b>Next Review Date:</b> 11/1/2012
<b>Policies Superseded by This Policy:</b>	

*It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.*