

Notice of Privacy Practices

Effective: June 1, 2019

Revised: March 1, 2019

Meredith College (or the College) is committed to maintaining and protecting the confidentiality of the individual's Protected Health Information (PHI) under the Health Insurance Portability and Accountability Act (HIPAA). This Notice of Privacy Practices applies only to Meredith College's designated areas covered under HIPAA, as set out in its HIPAA Hybrid Entity Policy limited to: the Meredith College Autism Program (MAP), Technology Services to the extent supporting MAP, and the Department of Accounting to the extent supporting MAP. This Hybrid Entity Policy describes the limited components of Meredith College subject to HIPAA. Meredith College is required by federal and state law, including HIPAA, to protect the individual's PHI. Meredith College is also required to provide the individual with this Notice of Privacy Practices about the College's policies, safeguards, and practices relative to PHI. When Meredith College uses or discloses an individual's PHI, Meredith College is bound by the terms of this Notice of Privacy Practices, or the revised Notice of Privacy Practices, if applicable.

The College's Obligations:

Meredith College is required by law to:

1. Maintain the privacy of PHI.
2. Give the individual this notice of the College's legal duties and privacy practices regarding PHI about the individual
3. Follow the terms of the College's Notice of Privacy Practice that is currently in effect.

PROCEDURE

How the College may use and disclose PHI:

The following describes the ways the College may use and disclose PHI. Except for the purposes described below, the College will use and disclose PHI only with the individual's written permission. The individual may revoke such permission at any time by writing to Meredith College's HIPAA Security Officer.

1. For Treatment. The College may use and disclose PHI for the individual's treatment and to provide the individual with treatment-related health care services. For example, the College may disclose PHI to pre-approved visiting therapists, or other personnel, including people outside the MAP office, who are involved in the individual's behavioral health care and need the information to provide the individual with health care.
2. For Payment. The College may use and disclose PHI so that the College or others may bill and receive payment from the individual, an insurance company or a third party for the treatment and services the individual received. For example, the College may tell the individual's insurance company about a treatment the individual is going to receive to determine whether the individual's insurance company will cover the treatment.
3. For Health Care Operations. The College may use and disclose PHI for health care operation purposes. These uses and disclosures are necessary to provide all of the College's clients of MAP with quality care and to operate and manage the College's MAP office. For example, the College may share information with onsite staff, including consultants, student workers, technicians, clerks, and other personnel under the umbrella of the HIPAA Hybrid Entity Policy for quality assurance and educational purposes. The College may also share information with other entities that have a relationship with the individual, under the exclusive permission of the individual, for the individual's health care operation activities.

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4. Appointment Reminders, Treatment Alternatives, and Health Related Benefits and Services. The College may use and disclose PHI to contact the individual to remind them that they have an appointment with MAP. The College also may use and disclose PHI to tell the individual about treatment alternatives or health-related benefits and services that may be of interest to the individual.
5. Research. Under certain circumstances, the College may use and disclose PHI for research. For example, a research project may involve comparing the condition of one client who received one treatment to those who received another. The College will generally ask for the individual's written authorization before using the individual's PHI or sharing it with others to conduct research. Under limited circumstances, the College may use and disclose PHI for research purposes without the individual's permission. Before the College uses or discloses PHI for research without the individual's permission, the project will go through a special approval process to review that research conducted poses minimal risk to the individual's privacy. The individual's information will be de-identified. Researchers may contact the individual to see if the individual is interested in or eligible to participate in a study.

SPECIAL SITUATIONS:

1. As Required by Law. The College will disclose PHI when required to do so by international, federal, state or local law.
2. To Avert a Serious Threat to Health or Safety. The College may use and disclose PHI when necessary to prevent a serious threat to the individual's health and safety or the health and safety of others. Disclosures, however, will be made only to someone who may be able to help prevent or respond to the threat, such as law enforcement or a potential victim.
3. Business Associates. The College may disclose PHI to the College's business associates that perform functions on the College's behalf or provide the College with services if the information is necessary for such functions or services. For example, the College may use another company to perform billing services on the College's behalf. Business associates are obligated under HIPAA to protect the privacy of the individual's information.
4. Public Health Risks. The College may disclose PHI for public health risks or certain occurrences. These risks and occurrences associated with MAP generally include disclosures to government authority if we believe a patient has been the victim of abuse, or neglect (we will only make this disclosure when required or authorized by law).
5. Health Oversight Activities. The College may disclose PHI to a health oversight agency, such as the North Carolina Department of Health and Human Services for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.
6. Data Breach Notification Purposes. The College may use or disclose the individual's PHI to provide legally required notices of unauthorized access to or disclosure of PHI.
7. Lawsuits and Disputes. If the individual is involved in a lawsuit or a dispute, the College may disclose PHI in response to a court or administrative order. The College also may disclose PHI in response to a subpoena, discovery request, or other lawful request by someone else involved in the dispute, but only if efforts have been made to tell the individual about the request or to allow the individual to obtain an order protecting the information requested.
8. Law Enforcement. The College may release PHI if asked by a law enforcement official if the information is: (1) in response to a court order, subpoena, warrant, summons or similar process; (2) limited information to identify or locate a suspect, fugitive, material witness, or missing person; (3) about the victim of a crime even if, under certain very limited circumstances, the College is unable to obtain the individual's agreement; (4) about a death the College believes may be the result of

criminal conduct; (5) about criminal conduct on the College's premises; and (6) in an emergency to report a crime, the location of the crime or victims, or the identity, description or location of the person who committed the crime.

USES AND DISCLOSURES THAT REQUIRES THE COLLEGE TO GIVE THE INDIVIDUAL AN OPPORTUNITY TO OBJECT/OPT OUT:

1. Disaster Relief. The College may disclose the individual's PHI to disaster relief organizations that seek the individual's PHI to coordinate the individual's care, or notify family and friends of the individual's location or condition in a disaster. The College will provide the individual with an opportunity to agree or object to such a disclosure whenever the College practically can do so.
2. Fundraising. The College may notify the individual about fundraising events that support Meredith College.

INDIVIDUAL'S WRITTEN AUTHORIZATION IS REQUIRED FOR OTHER USES AND DISCLOSURES:

Except in limited circumstances to the extent permitted or required by law, the following uses and disclosures of the individual's PHI will be made only with the individual's written authorization:

1. Uses and disclosures of PHI for third-party marketing purposes; and
2. Disclosures of psychotherapy notes, or a term familiar with MAP – behavioral health notes. Other uses and disclosures of PHI not covered by this Notice of Privacy Practice or under the laws that apply to the College will be made only with the individual's written authorization. If the individual gives us authorization, the individual may revoke it at any time by submitting a written revocation to Meredith College's HIPAA Security Officer, and we will no longer disclose PHI under the authorization on a going forward basis after we receive the written revocation. But disclosures that the College made in reliance on an individual's authorization before the individual revoked it will not be affected by the revocation.

INDIVIDUAL'S RIGHTS REGARDING PHI:

1. Right to Inspect and Copy. The individual has a right to inspect and copy PHI that may be used to make decisions about the individual's care or payment for the individual's care. This includes medical and billing records, other than psychotherapy notes (or behavioral health notes). To inspect and copy the individual's PHI, the individual must make their request, in writing, to the MAP. The College has up to 30 days to make the individual PHI available to the individual and the College may charge the individual a reasonable fee for the costs of copying, mailing or other supplies associated with the individual's request. The College may not charge the individual a fee if the individual needs the information for a claim for benefits under the Social Security Act or any other state or federal needs-based benefit program. The College may deny the individual's request in certain limited circumstances. If the College does deny the individual's request, the individual has the right to have the denial reviewed by a licensed healthcare professional that was not directly involved in the denial of the individual's request, and the College will comply with the outcome of the review.
2. Right to Get Notice of a Breach. Meredith College is committed to safeguarding the individual's PHI. If a breach of the individual's PHI occurs, the College will notify the individual in accordance with state and federal law.
3. Right to Amend, Correct or Add an Addendum. If the individual feels that the PHI the College has is incorrect, incomplete, or the individual wishes to add an addendum to the individual's records,

the individual has the right to make such request for as long as the information is kept by or for the College's office. The individual must make their request in writing to the MAP. In the case of claims that the information is incorrect, incomplete, or if the record was not created by Meredith College, the College may deny the individual's request. However, if the College denies any part of the individual's request, the College will provide the individual with a written explanation of the reasons for doing so within 60 days of the individual's request.

4. Right to an Accounting of Disclosures. Individuals have the right to request a list of certain disclosures the College made of PHI for purposes other than treatment, payment, health care operations, and certain other purposes consistent with law, or for which the individual provided written authorization. To request an accounting of disclosure, individuals must make their request, in writing, to the MAP. The individual may request an accounting of disclosures for up to the previous six (6) years of services provided before the date of the individual's request. If more than one request is made during a twelve (12) month period, Meredith College may charge a cost based fee.
5. Right to Request Restrictions. Individuals have the right to request a restriction or limitation on the PHI Meredith College uses or discloses for treatment, payment, or health care operations. Individuals also have the right to request a limit on the PHI we disclose to someone involved in the individual's care or the payment for the individual's care, like a family member or friend. To request a restriction, the individual must make their request, in writing, to the MAP. The College is not required to agree to the individual's request unless the individual is asking us to restrict the use and disclosure of the individual's PHI to a health plan for payment or health care operation purposes and such information the individual wishes to restrict pertains solely to a health care item or service for which the individual has paid the College out-of-pocket in full. If the College agrees, the College will comply with the individual's request unless the information is needed to provide the individual with emergency treatment or to comply with law. If the College does not agree, the College will provide an explanation in writing.
6. Out-of-Pocket-Payments. If the individual pays out-of-pocket (or in other words, the individual has requested that the College not bill the individual's health plan) in full for a specific item or service, the individual has the right to ask that the individual's PHI with respect to that item service not be disclosed to a health plan for purposes of payment or health care operations, and the College will honor that request.
7. Right to Request Confidential Communications. Individuals have the right to request that the College communicate with them about medical matters in a certain way or at a certain location. For example, the individual can ask that the College only contact individuals by mail, via text, or at work. To request confidential communications, individuals must make their request, in writing, to the MAP. The individual's request must specify how or where the individual wishes to be contacted. The College will accommodate reasonable requests.
8. Right to Choose Someone to Act for the Individual. If the individual gives someone medical power of attorney or if someone is the individual's legal guardian, that person can exercise the individual's rights and make choices about the individual's PHI. The College reserves the right to verify, in its discretion, that person has authority to act for the individual before the College takes any action.
9. Right to a Paper Copy of This Notice of Privacy Practices. Individuals have the right to a paper copy of this Notice of Privacy Practices. Individuals may ask the College to give the individual a copy of this Notice of Privacy Practices at any time. Even if the individual has agreed to receive this Notice of Privacy Practices electronically, individuals are still entitled to a paper copy of this Notice of Privacy Practices. Individuals may also obtain a copy of this Notice of Privacy Practices on our web site at: <https://www.meredith.edu/autism>.

CHANGES TO THIS NOTICE OF PRIVACY PRACTICES:

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Meredith College reserves the right to change this Notice of Privacy Practices and make the new Notice of Privacy Practices apply to PHI the College already has as well as any information the College receives in the future. The College will post a copy of the College's current Notice of Privacy Practice at the MAP office. The Notice of Privacy Practices will contain the effective date on the first page, in the top right-hand corner. Individuals may be sent information regarding the changes via e-mail or via mail. Individuals will be asked to sign off on the new Notice of Privacy Practices at the individual's next visit.

COMPLAINTS:

If an individual believes their privacy rights have been violated, the individual may file a complaint with the HIPAA Security Officer, 3800 Hillsborough Street, Raleigh, NC 27607, (919) 760-8713. All complaints must be made in writing. Individuals may also contact the Secretary of the Department of Health and Human Services or Director, Office of Civil Rights of the U.S. Department of Health and Human Services. Please contact the College's HIPAA Security Officer if an individual needs assistance locating current contact information. Individuals will not be penalized or retaliated against for filing a complaint.