



Individual's Access to PHI

Policy # 3.1

Provision of Notice of Privacy Practices

Original
Effective Date:
6/21/2016

Revised Date:
3/22/2022

Purpose: To ensure that a Notice of Privacy Practices is provided to Individuals in accordance with HIPAA regulations.

Policy:

Travis County provides its Notice of Privacy Practices ("**Notice**") consistent with the procedures described herein, and in accordance with HIPAA and State regulations.

Process:

1. The Travis County HIPAA Compliance and Privacy Officer maintains the Notice of Privacy Practices ("**Notice**") for Travis County.

Note: Individuals who reside in correctional institutions DO NOT have a right to a Notice of Privacy Practices.

2. The HIPAA Compliance and Privacy Officer also ensures that the Notice is posted on the County website and ensures substantial revisions are posted by their effective date.
3. In the event that the HIPAA Compliance and Privacy Officer makes a material change to the Notice, the HIPAA Compliance and Privacy Officer sends the revised Notice to the Covered Components, along with guidance on how to implement the changes contained in the Notice.
4. The Notice will be provided to enrollees, named insureds, and patients, and receipt of notice will be documented as follows:

Type of Covered Component	Health Plan	Health Provider
Providing the Notice	<p>Notice must be provided to new enrollees (not the enrollee's dependents) and the named insureds:</p> <ol style="list-style-type: none"> 1. at the time of enrollment or re-enrollment. 2. to the named insured of a policy under which coverage is provided or to the named insured and one 	<p>Notice must be provided to patients (clients):</p> <ol style="list-style-type: none"> 1. at the first service encounter; and/or 2. as soon as possible after emergency treatment. <p>The Notice of Privacy Practices must also be posted in a prominent location in the office for patients to see.</p>

Providing the Notice (cont...)	or more dependents, when requested. 3. Notice must also be posted on any page of the group health plan's website that provides information about the group health plan's benefits.	N/A
Receipt of Notice	No Procedure Required.	<ol style="list-style-type: none"> 1. Workforce members ask patients to sign a copy of the Travis County Notice. (which has a signature block) and file the Notice in the patient's file. 2. Patients are given an additional copy of the Notice. 3. Patients may refuse to sign the Notice. Workforce members note the refusal on the Notice and place it in the patient's medical record.
Revised Notice	<p>The revised Notice, or information about the material change and how to obtain the revised notice, will be provided to individuals then covered by the health plan within 30 days of the material revision to the notice.</p> <p>The Revised Notice must also be posted on any page of the group health plan's website that provides information about the group health plan's benefits.</p>	The revised Notice will be provided to patients upon request and will be posted in a prominent location in the office.

****SPECIAL NOTE:**

General Rule. The Privacy Rule provides that an individual has a right to adequate notice of how a covered entity may use and disclose protected health information about the individual, as well as his or her rights and the covered entity's obligations with respect to that information. Most covered entities must develop and provide individuals with this notice of their privacy practices. **The Privacy Rule does not require the following covered entities to develop a notice:**

***Health care clearinghouses:** If the only protected health information they create or receive is as a business associate of another covered entity. See [45 CFR 164.500\(b\)\(1\)](#).

***A correctional institution:** A [covered entity](#) may disclose to a [correctional institution](#) or a [law enforcement official](#) having lawful custody of an [inmate](#) or other [individual protected health information](#) about such [inmate](#) or [individual](#), if the [correctional institution](#) or such [law enforcement official](#) represents that such [protected health information](#) is necessary for:

- (A) The provision of [health care](#) to such individuals;
- (B) The health and safety of such [individual](#) or other inmates;

- (C) The health and safety of the officers or employees of or others at the [correctional institution](#);
- (D) The health and safety of such [individuals](#) and officers or other [persons](#) responsible for the transporting of [inmates](#) or their transfer from one institution, facility, or setting to another;
- (E) Law enforcement on the premises of the [correctional institution](#); or
- (F) The administration and maintenance of the safety, security, and good order of the [correctional institution](#).

(i) **Permitted uses.** A [covered entity](#) that is a [correctional institution](#) may [use protected health information](#) of [individuals](#) who are [inmates](#) for any purpose for which such [protected health information](#) may be disclosed.

(ii) **No application after release.** For the purposes of this provision, an [individual](#) is no longer an [inmate](#) when released on parole, probation, supervised release, or otherwise is no longer in lawful custody. See [45 C.F.R. §164.512\(k\)\(5\)\(i\)](#).

***A group health plan:** That provides benefits only through one or more contracts of insurance with health insurance issuers or HMOs, and that does not create or receive protected health information other than summary health information or enrollment or disenrollment information. See [45 CFR 164.520\(a\)](#).