



POLICY TITLE: Notice of Privacy Practices	SYSTEM POLICY AND PROCEDURE MANUAL
POLICY #: 800.45	CATEGORY: Corporate Compliance
System Approval Date: 03-21-2024	Effective Date: 04/2003
Site Implementation Date: 05-06-2024	Last Reviewed/Approved: 06/2022
Prepared by: Office of Corporate Compliance	Notations: N/A

GENERAL STATEMENT of PURPOSE

The purpose of this document is to outline the established requirements for the distribution and provision of the Northwell Health Notice of Privacy Practices (“NPP”).

POLICY STATEMENT

It is the policy of Northwell Health to provide a copy of the Northwell Health NPP (Form: *SYSHIPAA*) to all patients, or patients’ designated representatives, with the exception of inmates, no later than the date of the first service delivery, including services delivered electronically. Northwell Health will make a good faith effort to obtain the patient’s, or Personal Representative’s signature acknowledging receipt of the NPP.

SCOPE

This policy applies to all Northwell Health employees, as well as medical staff, volunteers, students, trainees, physician office staff, contractors, trustees and other persons performing work for or at Northwell Health; faculty and students of the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell or the Hofstra Northwell School of Nursing and Physician Assistant Studies conducting research on behalf of the Zucker School of Medicine on or at any Northwell Health facility.

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.

PROCEDURE

Content and Distribution of the Notice of Privacy Practices

1. Northwell Health will maintain a NPP that is written in plain language and that includes, at a minimum, the standard language attached hereto (*See SYSHIPAA—Notice of Privacy Practices*).
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, Northwell Health 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 will not be given another copy of the NPP if they are designated in Northwell Health records as previously registering and receiving the Northwell Health NPP.
5. The NPP will be posted in Northwell Health registration areas and on the Northwell Health 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 Northwell Health registration areas and on the Northwell Health 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. Northwell Health may provide the NPP to a Northwell Health patient by e-mail. A paper copy must be provided at the request of the patient or if the e-mail transmission fails.
9. Northwell Health will take reasonable steps, based upon identified language needs, to translate and provide the NPP to patients with limited English proficiency.

Obtaining Acknowledgement of Receipt

1. Patients will be asked to sign the NPP "Acknowledgement of Receipt" form attached to each Northwell Health 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, Northwell Health will document the good faith attempt to provide the NPP to the patient in the space provided on the "Acknowledgement of Receipt" form. (*See SYSHIPAA—Notice of Privacy Practices*).
4. The "Acknowledgement of Receipt" form will be filed in the same manner as if the NPP had been signed.

5. When a patient is being registered, the registration system must be checked to see if the “NPP Given” indicator field has been checked off to indicate that the patient/representative received the NPP previously. If the “NPP Given” indicator field is not checked off, the patient must be given the NPP and Acknowledgement of Receipt.

Training

The Office of Corporate Compliance will provide training on HIPAA on, at least, an annual basis.

Sanctions

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.

Document Retention

Any documentation generated in compliance with this policy will be retained for a minimum of 6 years from the date of its creation.

REPORTING AND ENFORCEMENT

All violations of this policy shall be reported to the appropriate manager/supervisor/director or to the Office of Corporate Compliance (516-465-8097) for appropriate resolution of the matter. The HelpLine is available 24 hours a day, seven days a week at (800) 894-3226 or online at www.northwell.ethicspoint.com, is accessible to all Affected Individuals and allows for questions regarding compliance issues to be asked and for compliance issues to be reported. Reports of potential fraud, waste and abuse and compliance issues also may be made directly to the Chief Corporate Compliance Officer or designee in person, in writing, via email, mobile device via a QR code, or by telephone. All reports received by the Office of Corporate Compliance are investigated and resolved to the fullest extent possible. The confidentiality of persons reporting compliance issues shall be maintained unless the matter is subject to a disciplinary proceeding, referred to, or under investigation by Medicaid Fraud Control Unit, Office of Medicaid Inspector General or law enforcement, or disclosure is required during a legal proceeding, and such persons shall be protected under the required provider’s policy for non-intimidation and non-retaliation. 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 and an Affected Individual’s contract with Northwell Health.



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)
- Northwell Health Bylaws, Rules and Regulations of the Medical Staff

CLINICAL REFERENCES/PROFESSIONAL SOCIETY GUIDELINES

N/A

ATTACHMENTS

N/A

FORMS

[Vital Documents](#)

SYSHIPAA—Notice of Privacy Practices

<u>APPROVAL:</u>	
Northwell Policy Committee	02/27/2024
System PICG/Clinical Operations Committee	03-21-2024

Standardized Versioning History:

Approvals: * =Northwell Health Policy Committee; ** = PICG/Clinical Operations Committee; ✖ = Provisional; ♦ = Expedited

8/10/10* 9/23/10**

7/25/13* 8/15/13**

3/31/16* 4/21/16**

♦6/18/18

5/21/20* 6/18/20**

5/26/22* 6/23/22**