



I. 11.3.4 Notice of Privacy Practices

Chapter 11 - Patient Privacy	Original Effective Date: April 2003
Section: 11.3 Individual Rights in Regard to Privacy of Protected Health Information	Date Last Reviewed: January 2023
Responsible Entity: Chief Compliance and Privacy Officer	Date Last Revised: January 2023

II. Purpose

An individual has a right to receive adequate notice of the uses and disclosures of protected health information that may be made by the UT Health San Antonio, and of the individual’s rights and UT Health San Antonio’s responsibilities with respect to protected health information. UT Health San Antonio is required to provide a Notice of Privacy Practices document to all patients or to any individual requesting a copy.

III. Scope

This policy applies to all faculty, staff, students, residents, healthcare providers, researchers, contractors, or any other individual (collectively, Workforce Member, including employees and non-employees) who has direct or indirect access to patient protected health information (PHI) created, held or maintained by any UT Health San Antonio controlled affiliate, including, but not limited to its clinics, hospitals, and research operations.

IV. Policy

A. Provision of Notice of Privacy Practices

1. When there is a direct relationship with an individual, UT Health San Antonio must:
 - a. Provide the Notice of Privacy Practices no later than the date of the first service delivery, including service delivered electronically, to such individual;
 - b. Make a good faith effort to obtain a written acknowledgement of the receipt of Notice of Privacy Practices from the patient;
 - c. Have the Notice of Privacy Practices available at the service delivery site for individuals to request to take with them;
 - d. Post the Notice of Privacy Practices in a clear and prominent location where it is reasonable to expect individuals seeking service from UT Health San Antonio to be able to read the Notice of Privacy Practices; and,

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- e. Whenever the Notice of Privacy Practices is revised, make the Notice of Privacy Practices available upon request on or after the effective date of revision.

2. Exceptions

a. Emergency Treatment

If UT Health San Antonio is treating a patient during an emergency situation, UT Health San Antonio does not have to provide a Notice of Privacy Practices at the time of first service delivery. UT Health San Antonio may delay the requirement for provision of notice and good faith effort of written acknowledgement until reasonably practicable after the emergency treatment situation.

b. Inmates

An inmate of a correctional institution receiving medical attention from UT Health San Antonio does not have a right to receive a copy of the Notice of Privacy Practices.

B. Content of Notice of Privacy Practices

UT Health San Antonio must provide a Notice of Privacy Practices that is written in plain language and contains the following elements. Any exceptions must be approved by the Office of Regulatory Affairs and Compliance.

1. Header

The Notice of Privacy Practices must contain the following statement as a header, or have it otherwise prominently displayed: “This Notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.”

2. Uses and Disclosures

- a. A description, including at least one example of the types of uses and disclosures that UT Health San Antonio is permitted to make for each of the following purposes: treatment, payment, and health care operations.
- b. A description of each of the other purposes for which UT Health San Antonio is permitted or required to use or disclose protected health information without the individual’s written authorization.
- c. A statement that most uses and disclosures of psychotherapy notes, those used for marketing purposes and disclosures that constitute a sale of protected health information require an authorization. A statement that other uses and disclosures will be made only with the individual's written authorization and that the individual may revoke such authorization by following procedures outlined in the Institutional Handbook of Operating Policies (IHOP) policy [11.2.3 Uses and Disclosures of Protected Health Information Based on Patient Authorization](#) and IHOP policy [11.3.3 Revocation of Authorization to Use or Disclose Protected Health Information](#).

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- d. A statement that UT Health San Antonio may contact the individual to provide appointment reminders.
- e. A statement that UT Health San Antonio may contact the individual to raise funds for the covered entity and a method of individuals to opt-out.

3. Individual Rights

The notice must contain a statement of the individual's rights with respect to protected health information and a brief description of how the individual may exercise these rights, as follows:

- a. The right to request restrictions on certain uses and disclosures of protected health information as provided by IHOP policy [11.3.5 Right to Restrict Uses and Disclosures and Confidential Communications of Protected Health Information](#), including a statement that UT Health San Antonio is not required to agree to a requested restriction;
- b. The right to receive confidential communications of protected health information as provided by the above referenced policy;
- c. The right to inspect and copy protected health information as provided by IHOP policy [11.3.6 Access to Protected Health Information](#);
- d. The right to request amendment to protected health information as provided by IHOP policy [11.3.2 Patient Right to Amend Protected Health Information](#);
- e. The right to receive an accounting of disclosures of protected health information as provided by IHOP policy [11.3.1 Accounting of Disclosures of Protected Health Information](#); and,
- f. The right to restrict certain disclosures to a health plan as provided by IHOP policy [11.3.7 Right to Restrict Certain Disclosures of Protected Health Information to a Health Plan](#).

4. UT Health San Antonio Duties

- a. Is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and privacy practices with respect to protected health information;
- b. Is required to abide by the terms of the Notice of Privacy Practices currently in effect; and
- c. Reserves the right to change the terms of its Notice of Privacy Practices and to make the new Notice of Privacy Practices provisions effective for all protected health information that it maintains. The statement must also describe how it will provide individuals with a revised Notice of Privacy Practices.

5. Complaints

The Notice of Privacy Practices must contain a statement that individuals may complain to UT Health San Antonio and to the Secretary of the Department of Health and Human Services if they believe their privacy rights have been violated. A brief description of how the individual may file a complaint with UT Health San Antonio, and a statement that the individual will not be retaliated against for filing

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a complaint. Individuals will receive notice in the event of a breach of unsecured protected health information.

6. Contact

The Notice of Privacy Practices must contain the name, or title, and telephone number of a person or office to contact for further information.

7. Effective Date

The Notice of Privacy Practices must contain the date on which the Notice of Privacy Practices is first in effect, which may not be earlier than the date on which the Notice of Privacy Practices is printed or was otherwise published.

C. Requirements for Electronic Notice

1. UT Health San Antonio will provide an electronic version of the Notice of Privacy Practices. A copy of the Notice of Privacy Practices as provided in paper format is available, as well as a comprehensive version that provides greater detail of the Notice of Privacy Practices requirements if desired by a patient or patient representative.
2. UT Health San Antonio may provide the Notice of Privacy Practices to an individual by e-mail, if the individual agrees to electronic notice and such agreement has not been withdrawn. If UT Health San Antonio knows that the e-mail transmission has failed, a paper copy of the notice must be provided to the individual. Provision of electronic notice by UT Health San Antonio will satisfy the provision requirements if receipt of the Notice of Privacy Practices by the individual is documented.
3. If the first service delivery to an individual is delivered electronically, UT Health San Antonio must provide electronic Notice of Privacy Practices automatically and contemporaneously in response to the individual's first request for service.
4. The individual who is the recipient of electronic Notice of Privacy Practices retains the right to obtain a paper copy of the Notice of Privacy Practices from UT Health San Antonio upon request.

D. Retention and Revisions

1. UT Health San Antonio must document compliance with the Notice of Privacy Practices requirements by retaining copies of the Notice of Privacy Practices issued by UT Health San Antonio. All Notice of Privacy Practices must be maintained for a period of six (6) years past any revision dates. UT Health San Antonio must retain Acknowledgement of Receipt of Notice of Privacy Practices for at least six (6) years.
2. UT Health San Antonio must promptly revise and distribute its Notice of Privacy Practice whenever there is a material change to the uses and disclosures, the individual's rights, the UT Health San Antonio's legal duties, or other privacy practices stated in the notice. Except when required by law, a material change to any term of the Notice of Privacy Practice may not be implemented prior to the effective date of the Notice of Privacy Practice in which such material change is reflected.

E. Joint Notice of Privacy Practices

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UT Health San Antonio participates in organized health care arrangements, and a joint Notice of Privacy Practice may be used, provided that:

1. The entities participating in the organized health care arrangement agree to abide by the terms of the Notice of Privacy Practice with respect to protected health information created or received by the covered entity as part of its participation in the organized health care arrangement;
2. The joint Notice of Privacy Practice meets the implementation specifications, except that the statements required by this section may be altered to reflect the fact that the Notice of Privacy Practice covers more than one covered entity; and,
 - a. Describes with reasonable specificity the entities, or class of entities, to which the joint Notice of Privacy Practice applies; and,
 - b. Describes with reasonable specificity the service delivery sites, or classes of service delivery sites, to which the joint Notice of Privacy Practice applies; and
 - c. If applicable, states that the covered entities participating in the organized health care arrangement will share protected health information with each other, as necessary to carry out treatment, payment, or health care operations relating to the organized health care arrangement.

V. Definitions

Terms used in this document have the meaning set forth in the [Patient Privacy Policies Glossary](#) unless a different meaning is required by context.

VI. Related References

For questions regarding this policy contact the privacy program director at 210-567-2014 or compliance@uthscsa.edu.

Institutional Compliance and Privacy Office, [HIPAA Privacy website](#)

Forms of Interest

Notice of Privacy Practices ([English](#)) ([Spanish](#))

Notice of Privacy Practices Acknowledgement of Receipt ([English](#)) ([Spanish](#))

VII. Review and Approval History

The approving authority of this policy is the University Executive Committee.

Effective Date	Action Taken	Approved By	Approved Date
04/2003	Policy Origination		
03/2013	Policy Revision		
01/2023	Policy Review, discretionary edits	ICPO	1/31/2023