

TITLE: PRIVACY PROGRAM / PATIENT RIGHTS

POLICY:

Columbia University Medical Center will comply with all new requirements and Patient Rights as granted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and in accordance with city, state, and federal laws and regulations.

PURPOSE :

HIPAA provides patients with specific rights related to their protected health information (PHI):

1. The right to inspect their PHI and to obtain a copy of it;
2. The right to request an amendment to their PHI;
3. The right to an Accounting of Disclosures made by Columbia University Medical Center;
4. The right to request restrictions on the uses and disclosures of their PHI made by Columbia University Medical Center;
5. The right to request that Columbia University Medical Center communicate with them about their PHI at an alternative location (i.e., at work instead of at home) or via alternative means (i.e., mail only); and
6. The right to receive a paper copy of Columbia University Medical Center's Notice of Privacy Practices even if the patient has requested the Notice electronically.

Each of these rights is described within the Columbia University Medical Center's Notice of Privacy Practices, including a description of any limitations to a specific right. In addition, some of the rights require action on the part of the patient before Columbia University Medical Center can respond. This Policy describes each of the rights granted to patients under HIPAA, how a patient can exercise each right, if and how Columbia University Medical Center respond to patients who exercise their rights.

PROCEDURES:

1. **Right to Inspect and Receive a Copy of the Patient's PHI.**
 - a. Patients have the right to inspect and to obtain a copy of their PHI. This right, however, has some limitations:
 1. A patient must request to access, inspection, or obtain a copy of his/her PHI in writing. (See 1.b below)
 2. The patient may only access, inspect, and/or obtain a copy of his/her PHI in a "designated record set." The designated record set does not include, and the patient may not access:
 - a. Psychotherapy notes about the patient;
 - b. Personal notes and observations about the patient created by a

health care provider (provided such notes and observations are not included in the patient's medical record);

- c. PHI that is compiled in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding; and
 - d. PHI that is subject to the Clinical Laboratory Improvements Amendments of 1988 (CLIA).
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- 3. The patient's provider can provide a summary of the patient's PHI in lieu of granting access to all the patient's PHI if, in the professional judgment of the patient's provider, providing the patient with unlimited access to his/her PHI would endanger the life or physical safety of the patient or another person.
 - 4. Columbia University Medical Center is not required to provide the patient with access to, the opportunity to inspect, or a copy of any PHI created by a provider or entity outside of Columbia University Medical Center. Information created by a provider or entity outside of CUMC shouldn't be made part of the designated record set unless treatment decision are based on that information.
 - 5. Access to inspect or (view) the original medical information, may be permitted but is not required. This can only be done under direct supervision of a CUMC workforce member.
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- a. If a patient requests access to his/her PHI, the individual receiving the request must obtain a completed Authorization to Release Medical Information form from the patient prior to processing his/her request.

The Authorization to Release Medical Information form is available on the Columbia University Medical Center website. Click on Administrative Services or "Patient Care" from the home page, then, click on the link to HIPAA. Select the form needed.

- b. Completed forms should be maintained by the office processing the patient's request for a minimum of six (6) years. The completed forms may be stored in the patient's file, but are not part of the patient's designated record set.

2. **Right to Request Amendments**
Right to an Accounting of Disclosures
Right to Request Restrictions

The rights above will be processed by the HIPAA Compliance Office within the timeframes required by law once the appropriate request form is received by the

Privacy Officer.

- a. If a patient requests an amendment of his/her PHI, an accounting of the disclosures made by Columbia University Medical Center of his/her PHI, or a restriction on the use or disclosure of his/her PHI, the individual receiving the request should advise the patient to complete the appropriate request form and send it to the Privacy Officer.

Each of the specific request forms, Request for an Amendment to Health Information, Request for an Accounting of Disclosures, and Request for Restrictions on Uses and Disclosures of Health Information, are available on the Columbia University Medical Center HIPAA website.

- b. Patients with questions about how to complete the form or the status of a request should be directed to contact the HIPAA Compliance Office at 212-305-7315.

3. Request for Communications at an Alternative Location or by Alternative Means

Patients may request Columbia University Medical Center communicate with them about medical matters in a certain way (e.g., by mail only) or at a certain location (e.g., at work). The individual receiving a request from the patient for communications at an alternative location or by alternative means should ask the patient to complete the Request for Communications at an Alternative Location or by an Alternative Means.

The Request for Communications at an Alternative Location or by an Alternative Means form is available on the Columbia University Medical Center website.

- a. All completed Request for Communications at an Alternative Location or by an Alternative Means forms are maintained by the office processing the patient's request for a minimum of six (6) years. The completed Request for Communications at an Alternative Location or by an Alternative Means form(s) may be stored in the patient's file and are not considered part of the patient's designated record set. The patient must complete one form for each provider treatment program.

4. Right to a Paper Copy of the Columbia University Medical Center Notice of Privacy Practices.

See CUMC Policy Notice of Privacy Practices. Any person who requests a copy of the Columbia University Medical Center Notice of Privacy Practices should be given a copy.

5. Minors.

A minor is an individual who is younger than 18 years of age.

- a. A minor's personal representative is the minor's parent, legal guardian, or another person who has documentation proving he/she has legal custody of

the minor (e.g., a stepparent who presents valid custody papers).

- b. Unless the minor's PHI is or includes a category of PHI described in the Rights of Minors to Keep Certain Categories of Protected Health Information Confidential Policy, a minor's personal representative may exercise any of the patient rights defined in this Policy as if he/she were the patient.

2. **Document Retention.** All documentation relating to requests for a patient's PHI are maintained for a minimum of six (6) years.

3. **Definitions**

Protected Health Information (PHI) means information that relates to the past, present or future physical or mental health or condition of an individual, the provision of health care to an individual or the past, present or future payment for the provision of health care to an individual and identifies or could reasonably be used to identify the individual.

Designated Record Set (DRS) means the set of clinical and/or financial information, records, and documents the healthcare provider would provide to the patient upon a request from the patient to access his/her PHI at that healthcare provider's office.

RESPONSIBILITY: HIPAA Compliance Office, Columbia Doctors

ISSUED:	December 2003
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