

## **NOTICE OF PRIVACY PRACTICES PROCEDURE**

### **WRITING THE NOTICE OF PRIVACY PRACTICES**

1. The Privacy Official, or his or her designee, is responsible to write (or revise) the **NOTICE OF PRIVACY PRACTICES**.
2. Before a NOTICE OF PRIVACY PRACTICES takes effect, it must be reviewed by senior management to assure that it accurately describes all pertinent privacy policies, procedures, and practices in effect at the BBHMF.
3. Before a notice takes effect, it must be reviewed by the Designated Attorney or Designee(s) to assure that it complies with this policy and with applicable federal and state laws.
4. The BBHMF Privacy Official or Designee(s) will incorporate any changes identified by the above review steps into a final notice.
5. The Chief Executive Officer of the BBHMF must approve the final NOTICE OF PRIVACY PRACTICES before it takes effect.
6. The Privacy Official or Designee(s) will retain the official copy of the NOTICE OF PRIVACY PRACTICES.
7. The Privacy Official or Designee(s) will retain copies of each NOTICE OF PRIVACY PRACTICES for at least six years or longer if required by state law or regulation after the date the notice is superseded by a revised notice.
8. The BBHMF Privacy Official or Designee(s) is responsible for distributing sufficient copies of the NOTICE OF PRIVACY PRACTICES to each BBHMF location where patients may be registered, and for working with administrative personnel in those locations to maintain an adequate supply.

### **DISTRIBUTING THE NOTICE OF PRIVACY PRACTICES**

1. The NOTICE OF PRIVACY PRACTICES will be distributed to patients by registration. It will also be available at the registration and information desk of each BBHMF location providing health care services. Registration and information desk workers will give a copy of the notice to anyone who requests one.
2. Patients will be asked if this is the first time they have received this notice of privacy practices. If so, they will be asked to sign an acknowledgement and consent to use or disclose PHI for treatment, payment or health care operations (see the COVER SHEET attached to this policy).
3. Signed acknowledgements will be filed in the patients' medical record.

4. If the patient is not willing to sign an acknowledgement and consent, the registration worker (or other worker who made the good faith attempt to receive the written acknowledgement), will note on the acknowledgement cover sheet that the patient was unwilling to sign, and the reason, if known.
5. The senior administrative person at each location, or in each department, is responsible for maintaining an adequate supply of privacy notices, for assuring that the notice is posted prominently, and that revised notices are available and posted by the date they take effect.

REFERENCE: 45 CFR §§ 160.306, 164.502(i), and 164.520; 64 FR 82549

Effective Date: 4/14/03

Dates Revised: 9/23/13



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Victoria L. Jones, Commissioner, Bureau for Behavioral Health and Health Facilities