

Privacy Policy

Lehigh University Health and Wellness Center Notice of Privacy Policies and Procedures

Effective Date: May 17, 2018

Amended: November 03, 2021

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.

PERSONAL HEALTH INFORMATION (PHI)

Each time you visit the Lehigh University Health and Wellness Center office and see a clinician (nurse, nurse practitioner, or physician) a record of your visit is made. Your medical record is comprised of information about your symptoms, examinations, test results, medications you take, your allergies and the plan for your care. There are state and federal laws to protect the privacy of personal health information (PHI) that is contained in your medical record.

USES AND DISCLOSURES OF HEALTH INFORMATION

For treatment:

The clinical staff involved with your care will document in your health record information about your examination and the care planned for you. We will provide other physicians or healthcare providers who are treating you with copies of reports from your medical record that would assist them with your treatment only with your expressed consent.

For regular healthcare operations:

The Lehigh University Health and Wellness Center physicians, nurses and nurse practitioners may look at your health information to complete a quality assurance review to assess care and results in your case and others like yours. Administrative Staff need access to the entire medical record in order to file all components of the chart. Administrative Staff who assist students with insurance questions may need to access the entire record in order to determine dates of service and services rendered. Graduate Assistant employees working in case management capacity (i.e. contact tracing) will also have access to

the entire record to assist clinical staff in case management and follow-up with student. At the time of their employment, graduate assistant student employees and undergraduate employees are informed of this policy and sign a statement acknowledging their understanding. HWC Staff also sign a statement acknowledging their agreement with the policy, annually. Graduate assistant employees and undergraduate student employees who would violate this policy would be terminated immediately and other university disciplinary actions may be imposed. HWC staff who violate this policy will also be subject to disciplinary action.

OTHER DISCLOSURES

Healthcare Partners:

There are some services provided through contact with healthcare partners, most notably radiology and laboratories. To protect your PHI, we require these constituents to protect your information.

Communication with others:

Health professionals, after receiving your expressed consent (documented verbal, or written) may disclose to a parent, guardian, or any other person you identify, health information relevant to your visit(s) or payment related to your visit(s).

Research:

Under certain circumstances, we may use and disclose non-identifiable medical information about your visit(s) for research purposes. All research projects, however, are subject to an approval process.

As required by Law:

We may also disclose health information to the following types of entities but not limited to:

- Public Health authorities charged with disease prevention when required by law
- Law enforcement as required by law
- Courts and/or attorneys in accordance with a valid subpoena when required by law
- National Security and Intelligence Agencies as required by law
- To avoid a serious threat to the health and safety of a person or the public

The Privacy Policy prohibits releasing information for non-medical purposes, including marketing by pharmaceutical manufacturers.

AUTHORIZATIONS TO RELEASE PHI

Medical records will be sent only with a written authorization at the request of the patient.

Authorization forms that can be used for faxing or sending medical information are available at the Health and Wellness Center. Only the minimum amount of information necessary to satisfy the needs of the request will be sent. In the event of referring physicians, information will be exchanged with the specific verbal consent of the patient.

Emergency situations and public safety concerns are exceptions to this authorization process.

PATIENT RIGHTS

You have the right to:

- Request a restriction on certain uses and disclosures of your information; we are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment
- Obtain a paper copy of the notice of information practices upon request
- Inspect and obtain a copy of your health record
- Request an amendment to your health records
- Obtain an account or disclosures of your health information
- Request communication of your health information in a certain way or at a certain location. For example, you may request us to mail test results to a specific address rather than call you
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken. To exercise any of your rights, please inquire at the reception desk. We may ask you to submit your request in writing

Our duties are to:

- Maintain the privacy of your health information
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect about you through this notice
- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction
- Accommodate reasonable requests you have to communicate health information by alternative means or at alternative locations.

SECURITY

Privacy measures are designed to protect the confidentiality of PHI. All staff will observe the following rules:

- Staff will observe due diligence when discussing PHI
- All records will be kept secured. When the Health and Wellness Center is closed, the facility is locked and alarmed.
- Historical paper charts prior to the inception of our current EHR (01/2021) are locked in file cabinets, inside a locked room.
- Access to HWC EHR is through password protected security.

Privacy Contact and Privacy Official:

The Privacy Contact for the Lehigh University Health and Wellness Center is David Rubenstein, PsyD, 610-758-3870, who monitors regulation changes, oversees staff training and compliance and enforces policy. The Privacy Official for Lehigh University is Frank Roth, General Counsel, 610-758-3572. For complaints and concerns, please contact either individual.

Employee Training:

Upon employment and annually thereafter, all employees will receive a copy of Lehigh University Health and Wellness Center's "Notice of Privacy Policies and Procedures". An in-service will be conducted that will cover the need for a federal privacy policy, the requirements for disclosures of medical information and patients' rights and emergency exceptions. Annually, the Privacy Contact will assure Lehigh University Health and Wellness Center is in compliance with government policies.

Enforcement/Complaint Process:

Employees must sign and date the "Notice of Privacy Policies and Procedures". Failure to adhere to the privacy policy or breach of confidentiality is grounds for disciplinary action. Any patient who believes his or her rights have been violated may contact fill out a Privacy Policy Complaint Form, available at the Health and Wellness Center. You will not be penalized for filing a complaint.

Information on changes to this policy:

We reserve the right to change the terms of this notice and our privacy policies at any time. Before we make a change to our policies, this notice will be updated and will be made available in the Health and Wellness Center waiting room as well as our web site.

