ppic: Review of HIPAA Notice of Privacy Department: Entire agency				
Practices				
Original effective date: 4/1/03	Last revision date: 12/20/23			
Owner: VP for Quality and Compliance	Frequency of reviews: Annual			
Internal/Regulatory Reference(s) (all that apply): 164.520(c)(2)(i)				
Related documents/Links: HIPAA Notice of Privacy Practices; Confirmation of Receipt of HIPAA Notice				

Policy: It is the policy of The Arc of Monroe to ensure that people have opportunities for privacy and that business, administrative and support functions promote personal and organizational outcomes.

Additional Information: Per HIPAA law, The Arc must provide its HIPAA Notice of Privacy Practices ("Notice") to people enrolled in agency programs or services (or their legal representatives) no later than the first date of their receipt of services or supports, including services delivered electronically. In an emergency treatment situation, it must be given to the person as soon as reasonably practicable after the emergency treatment situation.

Proced	Procedure					
Task:		Responsible party:				
Genera						
1.	As part of someone entering an Arc of Monroe services, the program's manager will ensure that the person receives a copy of The Arc's Notice.	Managers				
2.	If the person does not have capacity to understand the Notice, it will be provided to their legal representative, as referred to in 14 NYCRR 633.11(a)(1)(iii)(a).	Managers				
3.	If there are any questions about the Notice, they will be directed to the VP for Quality and Compliance.	Managers				
4.	The person we support or their legal representative will be asked to sign the "Confirmation of receipt of HIPAA Notice" form, indicating that they have received the Notice.	Person or legal representative				
5.	The completed form will be archived by the program as proof that the person received the Notice.	Managers				
6.	The sharing of the Notice and request for the signed "Confirmation" can be done via mail or email. The program should maintain a copy of the cover letter or email in its records.	Managers				
7.	If the person or their legal representative does not return the "Confirmation" within the designated time, the program's manager should make and document 2 additional attempts to obtain it." If after 3 total attempts they have not received it, they will document a presumption that the Notice been received and summarize the attempts made to obtain it. This should then be archived with the copy of the original cover letter or email.	Managers				
Manag	er responsibilities:					
1.	Managers should have a solid understanding of the requirements of this policy.	Managers				

2.	Managers have primary responsibility for ensuring that The Arc receives confirmation of receipt of the Notice, including exercising due diligence to receive it, consistent with this policy.	Managers
VP for		
1.	Acts as the agency's Privacy Officer	VP for Quality and Compliance
2.	Responsible for administering the agency's HIPAA privacy policies and procedures	VP for Quality and Compliance
3.	Acts as a resource for staff in regards to proper implementation of the HIPAA privacy rule	VP for Quality and Compliance

Document revision record:

Revision	Release	Reason for change	Approver
Date	Date		
8/04	8/04	Reason not documented	P Dancer
9/17/08	9/17/08	Reason not documented	P Dancer
8/5/15	8/5/15	Reason not documented	P Dancer
12/31/18	12/31/18	Reason not documented	P Dancer
1/21/21	1/21/21	Transitioned to new procedural format and added what attempts staff should make to obtain signed confirmation	P Dancer
12/20/23	12/20/23	Clarified that these should be reviewed on first date of receipt of services; added a regulatory reference	ICC