

# TUSCULUM COLLEGE

## ***PRIVACY NOTICE***

Effective 14 April 2004

***THIS NOTICE DESCRIBES HOW YOUR PROTECTED HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.***

TUSCULUM COLLEGE understands that medical information is personal and respects your privacy and is required by law to comply with the Health Insurance Portability and Accountability Act and Privacy regulation (45 C. F. R. Parts 160 – 64, collectively “HIPAA”). HIPAA requires TUSCULUM COLLEGE to maintain the privacy of Protected Health Information (PHI) and to provide you with notice of its legal duties and privacy practices concerning PHI. When PHI is mentioned in this Notice, it means health information that can be associated with you by using your personal identifiers, such as your name or Social Security number.

TUSCULUM COLLEGE is required to distribute this Notice to all subscribers of any of its health or dental plans and must abide by the terms of this Notice until the Notice is replaced or withdrawn. TUSCULUM COLLEGE reserves the right to change its privacy practices and the terms of its Notice to the extent such changes are allowed by law. TUSCULUM COLLEGE will send a new notice reflecting any significant changes prior to implementation of such changes and reserves the right to use information it obtained or created prior to the date of the change in accordance with any such changes.

TUSCULUM COLLEGE’s judicious use and disclosure of PHI is generally limited to the payment of invoices, maintenance of employee enrollment records, discussions and negotiations with health insurance carriers at renewal, and those items necessary to the smooth operation of the Plan. TUSCULUM COLLEGE purposely uses only the minimum information necessary to perform such operations. However, TUSCULUM COLLEGE’s privacy practices may be affected when enacting contingency plans during an emergency or disaster.

It is your right to request and receive a copy of this Privacy Notice at any time by calling the TUSCULUM COLLEGE Human Resources Office, by accessing the Human Resources internet site, or by contacting TUSCULUM COLLEGE’s Privacy Officer in writing or by telephone. TUSCULUM COLLEGE’s street address, internet site addresses and telephone number are printed at the end of this Notice.

## **TUSCULUM COLLEGE's uses of PHI:**

HIPAA allows PHI to be used without a signed member authorization or consent for purposes of treatment, payment, and health care operations. TUSCULUM COLLEGE uses PHI in the following ways:

- To determine or fulfill TUSCULUM COLLEGE's responsibility to the Plan Participants.
- To develop appropriate benefit plans for Employees.
- To provide data on enrollee health status, demographics, and other factors as permitted by law to obtain competitive quotes at renewal.
- To provide payment-related administration for services received from a Plan Administrator.
- For negotiating reinsurance agreements between TUSCULUM COLLEGE and reinsurance companies.
- For customer services necessary to respond to inquiries posed by you or your personal representatives concerning the administration of a benefit plan.
- For the Resolution of complaints, appeals, and grievances.
- For any activities required by privacy regulations.
- For medical review, legal services, and financial and claims auditing functions including fraud or abuse detection and compliance programs.
- Cost management and business planning activities.

## **TUSCULUM COLLEGE's disclosures of PHI:**

TUSCULUM COLLEGE's disclosure of PHI will generally be limited to activities listed above. The following are disclosures that may be made:

- TUSCULUM COLLEGE discloses PHI to you, or to your personal representatives, to assist you with questions about your health care benefits and the administration of your benefits.
- TUSCULUM COLLEGE discloses PHI, subject to the Privacy regulation, to others as you designate to us in writing. You may provide TUSCULUM COLLEGE with written authorization to disclose your PHI to any party to be used for any purpose. When you provide such authorization, you may revoke it at any time in writing. Without your authorization, our disclosure of PHI is limited to that which is permitted by Privacy regulations and as described in this Notice.
- TUSCULUM COLLEGE discloses to a Plan Administrator PHI that is provided by you on the plan enrollment form and other PHI information necessary to the administration of a benefit plan.
- TUSCULUM COLLEGE discloses PHI to clearinghouses, other insurers or health plan providers, and business associates to obtain quotes during the renewal process.

## **State privacy preemption:**

To the extent that existing or future state privacy regulations are more stringent than the HIPAA Privacy regulation, HIPAA requires TUSCULUM COLLEGE to comply with the more stringent state privacy requirements.

## **Individual rights:**

The Privacy regulations provide individuals with various rights as follows:

- **Right to request restrictions on certain uses and disclosures of PHI.** You have the right to request restrictions on TUSCULUM COLLEGE's use and disclosure of your PHI. TUSCULUM COLLEGE may refuse to honor your request if your requested restriction would prevent it from performing its responsibilities under a group benefits contract. If TUSCULUM COLLEGE honors your request, your restriction will remain in effect until you provide a revocation. Your requests and revocations must be in writing and directed to the Privacy Officer.
- **Right to request confidential communications containing PHI.** You may request TUSCULUM COLLEGE to communicate your PHI, such as that contained in Explanations of Benefits (EOB), by alternative means or to an alternative address. Your request should be made to the Privacy Officer. TUSCULUM COLLEGE will attempt to accommodate reasonable requests. To the extent that your request is honored, TUSCULUM COLLEGE will provide you with the date that you may begin receiving communications by alternate means or at the alternate address.
- **Right to receive an accounting of PHI disclosures made for purposes other than for payment or health care operations.** You may request TUSCULUM COLLEGE to provide an accounting of disclosures of your PHI made by TUSCULUM COLLEGE for purposes other than for administrative operations as stated before. Requests must be in writing and directed to the Privacy Officer. TUSCULUM COLLEGE is required to provide such an accounting for disclosures made on or after April 14, 2004. You can request an accounting of disclosures for a period of up to six years.
- **Right to access and receive a copy of PHI.** TUSCULUM COLLEGE's designated record set contains information about you that is necessary for TUSCULUM COLLEGE for administrative functions and includes enrollment records, summary claims records, and payment records. You have the right to access and receive a copy of your PHI contained in TUSCULUM COLLEGE's designated record set except for the following (which are exempt from inspection in accordance with Privacy regulations):
  - Information compiled in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding.
  - PHI that is related to the Clinical Laboratory Improvements Amendments of 1988.
  - Psychotherapy notes.

Any requests to access and receive a copy of your PHI must be made in writing and directed to TUSCULUM COLLEGE's Privacy Officer. TUSCULUM COLLEGE is permitted to charge you a reasonable fee to cover the costs of providing the copies you have requested. You have the right to request an alternative format other than paper and TUSCULUM COLLEGE will make reasonable efforts to accommodate your request. If you are provided with an alternative format, TUSCULUM COLLEGE will charge you a reasonable fee to cover the costs of providing such information. TUSCULUM COLLEGE reserves the right to change the fees it charges for records and you will be provided with the fees currently in effect at the time you make a request.

- **Right to request an amendment of PHI.** You have the right to request TUSCULUM COLLEGE to amend your medical information. Your request must be in writing and directed to the Privacy Officer, explaining the nature of the amendment. If information is amended or corrected, TUSCULUM COLLEGE will make reasonable efforts to inform other affected parties, including those you may have specified, of the amendment. TUSCULUM COLLEGE may deny a request for amendment or correction for the following reasons:
  - If TUSCULUM COLLEGE did not create the information you have requested be amended.
  - If the information is not part of TUSCULUM COLLEGE's designated record set.
  - If the amendment would result in inaccurate or incomplete information.

If TUSCULUM COLLEGE denies your request for amendment, TUSCULUM COLLEGE will notify you in writing and you are entitled to respond in writing with a statement explaining your disagreement. TUSCULUM COLLEGE will append your statement of disagreement to the information you originally requested to be amended.

- **Right to make a complaint.** You have the right to make a complaint to TUSCULUM COLLEGE if you believe your privacy rights have been violated or if you do not agree with a decision regarding access to your medical information. Complaints must be made in writing to the Privacy Officer. You are also entitled to submit a written complaint to the U.S. Secretary of Health and Human Services. If you make a complaint, TUSCULUM COLLEGE will not retaliate against you.

### **Contacting TUSCULUM COLLEGE:**

**To provide TUSCULUM COLLEGE with written requests or to make complaints described in this Privacy Notice.** Direct your written requests or written complaints to: Privacy Officer at: TUSCULUM COLLEGE HUMAN RESOURCES, 60 Shiloh Road, McCormick Hall, Greeneville, TN 37743, Attention: PRIVACY OFFICER.

**To reach TUSCULUM COLLEGE's Privacy Officer for other matters.** For questions about TUSCULUM COLLEGE's privacy practices or this notice, you may reach the Privacy Officer at the address given above, or by calling the Human Resources Office at 423-636-7345. This notice is also posted on the Jobs at Tusculum website accessed at [www.tusculum.edu](http://www.tusculum.edu) .

Participating medical providers are independent contractors, not employees or agents of TUSCULUM COLLEGE. Medical providers maintain patient records and have an independent obligation to comply with the privacy requirements of HIPAA.

**EMPLOYEE CONFIDENTIALITY AGREEMENT  
TUSCULUM COLLEGE**

I, \_\_\_\_\_, have read and understand the Tusculum College policy regarding the privacy of individually identifiable health information (or protected health information or PHI), as mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). In addition, I acknowledge that I have received training in Tusculum College's policy concerning PHI use, disclosure, storage and destruction as required by HIPAA.

In consideration of my employment or compensation from Tusculum College, I hereby agree that I will not at any time---either during my employment or association with Tusculum College or after my employment or association ends---use, access or disclose PHI to any person or entity, internally or externally, except as is required and permitted in the course of my duties and responsibilities with Tusculum College, as set forth in Tusculum College's privacy policy or as permitted under HIPAA. I understand that this obligation extends to any PHI that I may acquire during the course of my employment or association with Tusculum College, whether in oral, written or electronic form and regardless of the manner in which access was obtained.

I understand and acknowledge my responsibility to apply Tusculum College's policy and associated procedures during the course of my employment or association. I also understand that unauthorized use or disclosure of PHI will result in disciplinary action, up to and including the termination of employment or association with Tusculum College and the imposition of civil penalties and criminal penalties under applicable federal and state law, as well as professional disciplinary action as appropriate.

I understand that this obligation will survive the termination of my employment or end of my association with Tusculum College, regardless of the reason for such termination.

Signed \_\_\_\_\_ Privacy Training Date \_\_\_\_\_