Health Services Notice of Privacy Practices

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General Description

Policy Summary:

This notice describes how protected health information about you may be used and disclosed and how you can get access to this information.

Purpose:

Our practice is dedicated to maintaining the privacy of your protected health information, PHI. In conducting our business, we will create records regarding you and the treatment we provide to you. We are required by law to maintain the confidentiality of health information that identifies you. By Federal and State law, we must follow the terms of the notice of privacy practices that we have in effect at this time.

These laws are complicated, but we must provide you with the following important information:

- How we may use and disclose your PHI
- Your rights regarding PHI about you
- Our obligations concerning the use and disclosure of your PHI

Scope:

This policy applies to students.

Policy Content

Uses and Disclosures

Treatment. Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members. PHI may be provided to the University Athletic Trainer if

you are participating in intercollegiate athletics. We may use and disclose PHI when you need a prescription, lab work, an x-ray or other health care services. We may use and disclose PHI about you when referring you to another health care provider.

Payment. Your health information may be used and disclosed if you seek payment from your health plan or from other sources of coverage such as an automobile insurer. For example, your health plan may request and receive information on dates of service, the services provided, and the medical condition being treated. Trinity University does not submit claims directly to your insurance company. PHI may be used when billing your student account for treatment received in Health Services.

Health Care Operations. Your health information may be used as necessary to support the day-to-day activities and management of Trinity University Health Services. For example, information on the services you received may be used to support budgeting and financial reporting, and activities to evaluate and promote quality. PHI may be used to ensure that you are in compliance with the university's requirements for immunizations, TB testing, health record, and insurance requirements.

Comply with the Law. Your health information may be disclosed if state or federal law require it, without your permission, to support government audits and inspections and to comply with government mandated reporting. We may also disclose PHI in response to a court or administrative order, or in response to a subpoena.

Public Health Reporting. Your health information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to local and/or state public health departments.

Serious Threats to Health or Safety. We may disclose your protected health information when necessary to reduce or prevent a serious threat to your health and safety or the health and safety of another individual or the public.

Workers Compensation. We may release your health information for worker's compensation and similar programs.

Electronic Communication and PHI
General Considerations

1. Health Services staff may contact patients by phone or email to request a follow up or send a reminder.
2. Telephone messages will contain limited personal health information. The message may be a reminder of an appointment, a request for follow up or brief instruction from the nurse or physician.

3. Email communication will be considered and treated with the same degree of privacy and confidentially as written medical records.
4. Your email address will not be used for external marketing purposes without your permission. You may receive a group emailing from Health Services, however, the recipients email addresses will be hidden.

Healthcare Team Responsibilities

1. Staff will only use trinity.edu addresses for students unless Health Services receives a written request that we use an alternate email address. Email within the Trinity.edu domain is encrypted. PHI sent to an alternative email address at the patient's request will be encrypted using an encryption program.
2. Health Services staff may route email messages to other members of the staff for information purposes or for expediting a response.
3. Designated staff may receive and read your email.
4. Every attempt will be made to respond to your email message within two business days (Monday-Friday, non- holidays). If you do not receive a response from Health Services within two business days please contact us by phone at (210) 999-8111.
5. Copies of emails sent and received from and to you could be incorporated into your medical record. You are advised to retain all electronic correspondence for your own files.

Patient Responsibilities

1.Email messages should not be used for emergencies or time-sensitive situations. In the event of a medical emergency on campus you should immediately call TUPD at (210) 999-7000 and off-campus call 911. For emergent or time-sensitive situations, contact Health Services by phone.
2.Appointments will not be made by email.
3. Email messages should be concise. Please arrange for a physician appointment or walk-in to see the nurse if the issue is too complex or sensitive to discuss via email.
4. Phone messages may be left on your cell phone during class or other times when you may not wish to be interrupted. You should turn your phone off or silence the ringer during these times.

Other uses & disclosures require your authorization.
Disclosures of your health information or its use for any purpose other than those listed above require your specific written authorization. If you change your mind after authorizing a use or disclosure of your information, you must submit a written revocation of the authorization. However, your decision to revoke the authorization will not affect or undo any use or disclosure of information that occurred before you notified us of your decision.

Individual Rights
You have certain rights under the state and federal privacy standards. These include:

1. The right to request restrictions on the use and disclosure of your protected health information.
2. The right to receive confidential communications concerning your medical condition and treatment.
3. The right to inspect and receive a copy your protected health information.
4. The right to amend or submit corrections to your protected health information.
5. The right to receive an accounting of how and to whom your protected health information has been disclosed.
6. The right and choice to tell us to share information with others involved in your care. If you are not able to tell us your preference, for example, if you are unconscious, we may go ahead and share your information if we believe it is in your best interest.
7. The right to receive a printed copy of this notice upon request.

Our Responsibilities

1. We are required by law to maintain the privacy and security of your protected health information.
2. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
3. We must follow the duties and privacy practices described in this notice and give you a copy of it if requested.
4. We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Right to Revise Privacy Practices
As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in federal and state laws and regulations. The revised policies and practices will be applied to all protected health information that we maintain.

Requests to Inspect Protected Health Information
As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting a member of the Health Services staff.

Complaints
If you would like to submit a comment or complaint about our privacy practices, you can do so by sending a letter outlining your concerns to:

TRINITY UNIVERSITY HEALTH SERVICES
Attn: Privacy Officer
ONE TRINITY PLACE #80
SAN ANTONIO, TEXAS 78212-7200
If you believe that your privacy rights have been violated, you should call the matter to our attention by sending a letter describing the cause of your concern to the same address. You will not be penalized or otherwise retaliated against for filing a complaint. Contact Person: Coordinator of Health Services, 210-999-8111.

Terms & Definitions

Terms and Definitions:

Term:	Definition:
Protected Health Information	- All "individually identifiable health information" held or transmitted, in any form or media, whether electronic, paper, or oral. "Individually identifiable health information" is information, including demographic data, that relates to: • the individual's past, present or future physical or mental health or condition, • the provision of health care to the individual, or • the past, present, or future payment for the provision of health care to the individual, - and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Student ID Number). - Protected Health Information is maintained separately from the Education Record.
Disclosure of Protected Health Information	The act of transmitting Protected Health Information to an individual or organization outside of Health Services.
Health Services	The office of the Elizabeth Rhea Health Services, located on the ground level of Myrtle McFarlin Residence Hall.
Health Plan	An agreement that provides or pays for medical care for individuals or groups. It can be an insurance policy, a service benefit contract, or other

Term:	Definition:
	arrangements where healthcare services are covered or expenses are reimbursed.
Public Health Agencies	A government body that works to improve the health of a population by preventing illness and injury. San Antonio Metropolitan Health District is Trinity's local public health authority.
Worker's Compensation	A state-mandated insurance program that provides insurance benefits to employees who are injured or become ill due to their job.
Telephone communication	Communication via phone call or text message. Text message is only permitted if a student has opted in to receive text messages by completing an electronic form available on the Patient portal, a secure online website that provides patients with access to their personal health information and allows them to communicate with their healthcare providers.

Revision Management

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Vice President Approval:

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