HIPAA COMPLIANCE

HIPAAstands for the Health Insurance Portability Act of 1996. It provides guidelines for safeguarding the use and disclosure of individually identifiable health information, and places certain requirements on covered entities that use or disclose protected health information (PHI)

NOTICE OF PRIVACY PRACTICES

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.

Each time you visit the Tuskegee University Student Health Center, record of your visit is made. This record contains information about your symptoms, examinations, test results, medications you take, your allergies and the plan for your care. This information we refer to asour health or medical record an essential part of the healthcare we provide for you. Your health record contains personal health information and there are state and federal laws to protect the privacy of your health information.

WE MAY USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION (PHI) IN THE FOLLOWING WAYS:

The following sections describe, in general terms, the different ways that we may use and disclose your PHI. Examples are provided to help you understand the various types of uses and discloss they do not cover all possible situations.

1. Treatment

you. For example, we may use or disclose your PHI to a physician or other health care provideorider to treat you or to assist others in your treatment. Other examples include uses and disclosures for laboratory tests, prescriptions, and referrals to other health care providers for additional health care services.

2. Payment. We may use and discloss your PHI in order to bill and collect payment for the services and items you may receive and to determine your eligibility to participate in our services. We also may use and disclose

We may disclose your Student Helth Services records without your written consent:

(a) To comply with a judicial order or lawful subpoena;

(b) Disclosure to the court in connection with a legal proceeding involving the University and you or your parents; and

(c) Disclosure in connection with a health or safety emergency if knowledge of the information is necessary to protect the health and safety of you or other persons;

IMPLEMENTATION, QUESTIONS AND COMPLAINTS

A. IMPLEMENTATION. This Notice provides a general overview of our privacy practices. This Notice and our