

Please Read Carefully:

This notice describes how your medical records or protected health information may be used and disclosed and how you can obtain access to this information.

Understanding Your Protected Health Information:

Each visit at Student Health Services is documented and becomes part of your medical record (also known as PHI.) This documentation may include symptoms, lab results, diagnoses, examinations, treatments, prescriptions and plan of care. This information serves as a:

1. Basis for planning your care and treatment.
2. Means of communication between health care professionals who contribute to your care.
3. Legal document describing the care you received.
4. Source for medical research.
5. Record of communicable diseases.
6. Means of immunization record.

Understanding what is in your medical record and how this information is used helps you to ensure that it is accurate; to better understand the circumstances under which others may access your health information; and to make more informed decisions when authorizing disclosure to others.

Your Rights:

Although your medical record is the physical property of UNCP's Student Health Services, the information belongs to you. The following is a list of your rights under policy of The University of North Carolina at Pembroke (UNCP).

1. You have a right to request a paper copy of this Notice of Privacy Practices.
2. You have a right to inspect copy and/or request an amendment of your medical record (excluding psychotherapy notes or, if prohibited by law, information compiled in anticipation of a legal proceeding).
3. You have a right to request a restriction on certain uses and disclosures of your information.

4. You may obtain a listing of disclosures we have made.
5. You may request various ways for us to communicate your protected health information.
6. No one, including your parents/family, faculty members, or outside health care providers, has access to your medical record without your written permission, except as listed below.
7. You have the right to file a complaint about our privacy practices if you feel your privacy rights have been violated. **The Privacy Officer for UNCP's Student Health Services may be reached at 910.521.6219. There will be no retaliation for filing a complaint.**

Our Responsibilities:

UNCP's Student Health Services will maintain the privacy and confidentiality of your medical record. We will not disclose your medical record without your authorization, except as described in this notice. It is our goal for our practices with regard to the privacy of your medical records to be consistent with federal regulations. In order to pursue that goal, UNCP Student Health Services undertakes the following responsibilities:

1. We will provide you with our Patient Agreement on your first visit.
2. We will abide by the terms of this notice.
3. The use of email to share, disclose or discuss your medical record is strictly prohibited.
4. Your medical record will not be faxed unless the identity of the person/provider receiving the information is known and has been approved as a secure line of communication.
5. We require an Authorization for Disclosure of Protected Information signed by you or a legal representative in order to release your medical record for reasons other than those listed below.
6. We will notify you if we are unable to agree to a requested restriction on the use and disclosure of your medical record.

7. We will accommodate reasonable requests to communicate your health information through alternative means.

UNCP Student Health Services reserves the right to change its practices regarding the privacy of your protected health information. If those practices are changed, a revised notice will be mailed to the address that you have given student health services.

We May Share Public Health Information About You Without Your Authorization In The Following Circumstances.

1. Treatment: We may use and share PHI about you with other providers so they may treat you.
2. Payment: A bill identifying your diagnosis, procedures, and supplies used may be sent to you or a third party payer for purposes of obtaining payment.
3. Health Care Operations: Members of our quality improvement team may evaluate your medical record to access the care that you received. This information will be used to improve our quality care.
4. Business Associates: In certain cases health care services may be contracted out to another health care provider or facility.
5. Communication with Family: In case of a medical emergency, the health care provider or the vice chancellor of student affairs or his/her designee (including specifically the associate vice chancellor for student affairs) may disclose to a family member, health information, which is vital to your continuation of care.
6. Required by Law: For certain judicial or other administrative proceedings disclosure may be required. For example, we may disclose PHI about you in response to a court order.
7. Public Health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury or

- disability.
8. Food Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product defects or post marketing surveillance information to enable product recalls, repairs or replacement.
 9. Law Enforcement: These law enforcement purposes may include (1) legally required processes, (2) limited information requests for identification/location purposes, (3) crime victims, (4) suspicious deaths that may have been part of a crime, (5) in the event that a crime occurs on the premises of the practice, and (6) medical emergency (not on the Practice's premises) and it is likely that a crime has occurred.
 10. Criminal Activity: We may share PHI to prevent or lessen a serious and immediate threat to the health or safety of a person or the public.
 11. Inmates: Should you be an inmate of a correctional institution, we may disclose to the institution or their agents health information necessary for your health and the health and safety of other individuals.
 12. Directory Information: Unless you let us know you object, we may make your name available for directory purposes.
 13. Research: We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.
 14. Marketing/continuity of care: We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.
 15. Health oversight agencies and public health authorities: If a member of our work force or a business associate believes in good faith that we have engaged in unlawful conduct or otherwise violated professional or clinical standards and are potentially endangering one or more patients,

workers, or the public, they may disclose your health information to health oversight agencies and/or public health authorities, such as the Department of Health.

16. The Federal Department of Health and Human Services (DHHS): We may disclose your health information to DHHS if necessary to determine our compliance with any applicable regulatory standards.

UNC Pembroke reserves the right to change our practices and to make the new provisions effective for all protected health information we maintain.

Should we change this notice, we will:

- Post the revised notice in our office.
- Make copies of the revised notice available upon request.
- Post the revised notice on our Website.

For more information:

If you have questions and would like additional information you may ask your health care provider, or you may contact UNC Pembroke's Student Health Services Director at (910) 521-6219.

UNCP
STUDENT HEALTH SERVICES
P.O. Box 1510
One University Drive
Pembroke, NC 28372-1510
Ph: 910-521-6219
Fax: 910-521-6549
Email: shs@uncp.edu
www.uncp.edu/shs

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STUDENT HEALTH SERVICES

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.

If you have any questions about this notice, please contact Student Health Services at 910.521.6219.