Texas A & M University-Kingsville
Communication Sciences & Disorders Clinic
Privacy Policy
The Standards for Privacy of Individually Identifiable Health Information (“Privacy Rule”) established a set of national standards for the protection of certain health information. The U.S. Department of Health and Human Services (“HHS”) issued the Privacy Rule to implement the requirement of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). The Privacy Rule standards address the use and disclosure of individuals’ health information – called “covered entities,” as well as standards individuals’ privacy rights to understand and control how their health information is used. Within HHS, the Office for Civil Rights (“OCR”) had responsibility for implementing and enforcing the Privacy Rule with respect to voluntary compliance activities and civil money penalties.

A major goal of the Privacy Rule is to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public’s health and wellbeing. The Rule strikes a balance that permits important uses of information, while protecting the privacy of people who seek care and healing. Given that the health care marketplace is diverse, the Rule is designed to be flexible and comprehensive to cover the variety of uses and disclosures that need to be addressed.

U.S. Department of Health and Human Services: www.hhs.gov

This notice describes how medical information about our patients/clients may be used and disclosed and how they can obtain access to this information. Please review it carefully. Clients who have questions or require additional information should ask the CSDO Office Manager. Clients who have complaints can submit them in writing. The Clinic Director will review the complaint. Clients who have complaints that require immediate attention should ask for the Clinic Director or the Program Director. Clients whose complaints have not been resolved to their satisfaction can address complaints to the Secretary of the United States Department of Health and Human Services. The CSDO Clinic will not retaliate against any individual for filing a complaint.

Terms:
Any medical information, which could in any way identify an individual client, is considered Protected Health Information (PHI). PHI will be used and disclosed only as needed for the Speech and Hearing Clinic to perform continuity of care regarding Treatment, Payment and Health Care Operations (TPO). Any other disclosure will require the written authorization of the client. In general, use or disclosure of PHI for purposes other than treatment, or a disclosure requested by the client, is limited to the Minimum Necessary to accomplish the intended purpose.

Access:
The following people will have access to PHI:
• The client.
• Any person to whom the client has authorized in writing the release of information.
• CSDO Clinic staff who are involved in providing care to the client will have access as indicated below:
  • Audiologists, speech/language pathologists, speech/language supervisors, faculty and student clinicians (graduate and undergraduate).
  • Secretarial staff needs access to the entire medical record in order to file all components of the chart.
• Secretaries who assist clients with insurance problems may need access to the entire record in order to determine dates of service, etc.
• Custodial staff do not have access to PHI
• The client’s health insurance company, for payment purposes.
• Public Health Services and regulatory officials, when required by law.
• Courts, when the request is accompanied by a duly executed subpoena and reviewed by BGSU legal counsel.
• Parents or legal guardians of a minor.
• Referring physicians and/or therapists and physicians, and/or therapists involved in continuity of care.

Minimum Necessary:
Requests for disclosure of PHI for all purposes will be reviewed by the Privacy Contact (CSDO Clinic secretaries) to assure that they meet the minimum necessary requirement. The Privacy Contact may consult the Privacy Officer (Program Director) for assistance in making this determination.

Patient/Client Rights:
• Clients have a right to see and obtain a copy of their PHI.
• Clients have a right to request limitations to the routine use of PHI for TPO.
• Clients have a right to request changes in their PHI.
• Clients have the right to see a list of all people to whom PHI has been disclosed. In order to meet this requirement, the CSDO Clinic must keep a disclosure log. The log must record all disclosures, both written and verbal.

Security:
Privacy measures are designed to protect the confidentiality of all PHI:
• All faculty, staff, and student clinicians will receive instruction about and be familiar with the CSDO Clinic Privacy Policy.
• Faculty, staff and student clinicians will exert due diligence to avoid being overheard when discussing PHI.
• All records will be kept secured. When the CSDO Clinic is open, exposed patient records are not left unattended in unlocked offices. When the CSDO Clinic is closed, all files are placed in locked cabinets inside a locked room.

Administration:
• The CSDO Clinic Office Manager/secretaries serve as the Privacy Contact.
• The Program Director serves as the Privacy Officer: Dr. Thomas Fields – (361)593-2193
• A designee of the University Information Technology Services (ITS) department serves as the Security Officer.

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