

# GUSTAVUS ADOLPHUS COLLEGE STUDENT HEALTH SERVICE NOTICE OF PRIVACY PRACTICES

This notice describes how medical and/or mental health information about you may be used and disclosed and how you can access this information. (Please review the following carefully).

### **Understanding Your Health Information**

Each time you visit the Student Health Service, a record of your visit is made. This record contains information about your symptoms, examination, test results, medications, your allergies, and the plan for your care. This information we refer to as your health or medical record and it is an essential part of the health care 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.

## Gustavus Adolphus College's Policy

All student health care information is considered confidential. The policy of Gustavus Adolphus College Health Service is to maintain each student's health care information as confidential and to only make available a student's health care record and information upon a valid, authorized request.

## Uses and Disclosures of Health Information

## **Treatment:**

Health Service staff involved in your care will enter information about your visit into your medical record. If you were referred to us by another provider, the Health Service may send copies of your medical record to the provider who referred you so your provider will have updated treatment information about your care.

Health Service will provide another healthcare provider, who is treating you, with copies of various reports from your medical record that should assist them in treating you.

Health Service may also use health information about you to correspond with you, to schedule appointments, to follow up with diagnostic test results, or to provide you with information about other treatment and care that could benefit your health

## **Training/Education:**

Health Service may also disclose information to doctors, nurses, technicians, or nursing/professional students for review and learning purposes. We may remove information that identifies you from this medical information so others may use it to study health care and health care delivery without learning who the specific patient is.

#### Payment:

Health Service may use and disclose medical information about you so that the treatment and services you receive may be billed to and payment may be collected from you, an insurance company, or a third party. The information may identify you as well as your diagnosis, procedures, health care providers, and supplies used.

# **Health Care Operations:**

Health Service staff may look at your health information to complete a quality review to assess the care and results in your case and others like yours.

Health Service may use and disclose medical information to business associates we have contracted with to perform the agreed upon service and billing.

#### Communication with Others:

Health professionals, using their judgment, may disclose to a family member, or other relative, close personal friend, or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care. We only do this with your authorization and this authorization may be revoked by you at any time.

## Research:

Under certain circumstances, we may use and disclose medical information about you for research purposes. All research projects, however, are subject to a special approval process.

# <u>Law Enforcement/Legal Proceedings:</u>

Health Service may disclose health information for law enforcement purposes as required by law or in response to a court order or search warrant.

## **Patient Rights**

#### You Have The Right To:

- Request a restriction on certain uses and disclosures of your information; however, we are not required to agree to
  your request. If we do agree, we will comply with your request unless the information is needed to provide you
  emergency treatment.
- Obtain a paper copy of the notice of information practices upon request.
- Inspect and obtain a copy of your health record.
- Request an Amendment to your health records.
- Obtain an accounting of disclosures of your health information.
- Request communication of your health information in a certain way or at a certain location. For example, you can ask that we use an alternative address for billing purposes.
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.
- To exercise any of your rights by obtaining the required forms from the Privacy Officer and submitting your request in writing.

#### Our Duties Are To:

- Maintain the privacy of your health information.
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect about you through this notice.
- Abide by the terms of this notice.
- Notify you if we are unable to agree to a requested restriction.
- Accommodate reasonable requests you have to communicate health information by alternative means or at alternative locations.

## **Changes To This Notice:**

- The College reserves the right to change its privacy practices.
- If the notice changes, current and future information about you will be revised to the new standards.
- A notice or posting will be available to you each time you receive health care.

## How To Make A Complaint

If your privacy rights have been violated, you may file a complaint with the College by contacting the College Privacy Officer at the number provided below. You will not be penalized for filing a complaint.

# Privacy Officer:

Charlie Potts
Dean of Students
Gustavus Adolphus College
800 West College Avenue
St. Peter, MN 56082
507-933-7526