



**THE GEORGE
WASHINGTON
UNIVERSITY**
WASHINGTON, DC

Responsible University Official:
Assistant Vice President for University
Compliance and Privacy
Responsible Office: Compliance and
Privacy Office
Origination Date: April 14, 2003
Last Amended Date: January 8, 2007

HEALTH INFORMATION PRIVACY POLICY

Policy Statement

University Components (such as clinics, counseling centers, and other programs or departments that provide health or health-related services) are obligated to protect the privacy of individually identifiable health information in accordance with applicable laws and university privacy policies. All faculty, staff and students who have access to individually identifiable health information in the course of their work-related duties, whether at the university or at an affiliated covered entity, likewise are responsible for knowing and following all university privacy policies, as well as the privacy policies of the respective affiliated covered entity. Failure to comply with this policy may result in disciplinary action.

Reason for Policy/Purpose

Although not a covered entity under the Health Insurance Portability and Accountability Act (HIPAA), the university is committed to implementing the best practices associated with privacy and security of health information for the protection of its students, faculty, staff, and those served by University Components. This policy outlines the responsibilities of all members of the university community for protecting individual health information.

Who Needs to Know This Policy

Faculty, staff and students

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Policy/Procedures

I. General Requirements

All faculty, staff and students of the university who carry out activities involving individually identifiable health information must become familiar with the concepts of HIPAA by completing the HIPAA training offered by the university.

Since GW does not engage in any of the electronic transactions that would trigger compliance with HIPAA, GW is not a covered entity and individually identifiable health information collected is not considered “protected health information” (PHI). *However*, to safeguard the privacy of individuals, GW requires its faculty, staff, and students to apply the “minimum necessary” standard as described in HIPAA. The minimum necessary standard stipulates that the amount of individually identifiable health information used, obtained, or disclosed to others is restricted to the minimum amount necessary to achieve the specific purpose of that use, request, or disclosure.

All faculty, staff and students who carry out activities at covered entities must become familiar with and comply with the policies and procedures of the covered entity. (As a reference convenience, Appendix A lists some of the covered entities where faculty, staff and students carry out activities. This list is not exhaustive since affiliations are established and terminated on an ongoing basis.) At a covered entity, the individually identifiable health information is considered PHI and each covered entity has institution-specific policies and procedures to safeguard PHI. Faculty, staff and students carrying out activities at a covered entity will not use, disclose or request PHI in a manner that violates the policies and procedures of the covered entity or state or federal laws.

II. Specific Uses of Individually Identifiable Health Information at The George Washington University.

Health Components of the university will follow the same rules or principles when sharing individually identifiable health information with other units of the university as are applicable when such information is disclosed to an outside entity.

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A. Employee Related Health Benefits and Services

The university may use and disclose limited individually identifiable health information when assisting employees with benefits administration. For more information, please refer to the university's [HIPAA Policy Regarding Health Insurance Plan and Flex fund Medical Reimbursement Plan](#) or contact the Director of Employee Benefits Administration at (202) 994-9620.

B. Fundraising Activities

Although the university is not a covered entity, it may perform fundraising activities with covered entities affiliated with the university. All such activities will be conducted in compliance with the policies and procedures of those covered entities. For more information, please refer to the university's [Health Information Privacy Procedures for Medical Center Development Activities](#) or contact the Associate Vice President for Advancement in the Medical Center Development and Alumni Relations Office at (202) 994-7511.

C. Marketing Activities

Although the university is not a covered entity, it may perform marketing activities with covered entities affiliated with the university. All such activities will be conducted in compliance with the policies and procedures of those covered entities. For more information, please contact the Assistant Vice President for Medical Center Communications and Marketing at (202) 994-3121.

D. Research

All research conducted under the auspices of GW and involving human subjects will be carried out in accordance with the privacy and confidentiality provisions of the Common Rule (see the *Code of Federal Regulations, Office for Protection from Research Risks, Department of Health and Human Services, Part 46: Protection of Human Subjects*). The GW Institutional Review Board (IRB) is responsible for assuring that plans for conduct of research include the necessary protections for privacy and confidentiality. For more information about the Common Rule and the IRB, please refer to the IRB website: <http://www.gwumc.edu/research/human/aboutus.html> or contact the Associate Vice President for Health Research, Compliance and Technology Transfer at (202) 994-2995.

E. Student Health Information

Student health information obtained or created as part of the student's academic career is normally covered under the privacy provisions of the "Family Educational Rights and Privacy Act" (FERPA). This policy in no way affects the applicability of FERPA regulations to student records, including student health records created as a result of health care services provided by university clinics/centers/programs, including Student Health

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Services, EMeRG and the University Counseling Center. For more information please refer to the University [Privacy of Student Records Policy](#) or contact the Dean of Students/Student Affairs specific to the student's school.

F. Confidentiality of Alcohol and Drug Abuse Patient Records, HIV-Related Information and Mental Health Records

District and/or federal law and regulations specifically protect the confidentiality of alcohol and drug abuse patient records, HIV related information, and mental health records. Generally, the university may not disclose such information held unless the individual consents in writing, disclosure is allowed by a court order, or is required by law.

G. University Health Centers/Clinics/Programs

Although they are not covered entities, all university centers/clinics/programs that provide health-related services or conduct health-related activities will not use or disclose individual health information to third parties without written authorization except for treatment purposes, in accordance with a court order, or as required by law. For more information, please contact the specific center/clinic/program.

III. Violations

Suspected violations of privacy rights should be reported to the University Compliance and Privacy Office at (202) 994-3386 or comply@gwu.edu, or through the *Regulatory Compliance Help and Referral Line* at (888) 508-5275, 24 hours a day 7 days a week, toll free.

A complaint also may be filed directly with the Secretary of the U.S. Department of Health and Human Services in Washington D.C. All complaints must be made in writing and sent to 200 Independence Avenue SE, Washington, DC, 20201, or an individual may call 877-696-6775.

Website Addresses for This Policy

[GW University Policies](#)

Contacts

Subject	Contact	Email	Phone
General Questions	Compliance & Privacy Office	comply@gwu.edu	(202) 994-3386

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Employee-Related Benefits and Services	Employee Benefit Administration	benefits@gwu.edu	(202) 994-9620
Fundraising Activities	Associate Vice President for Development in the Medical Center		(202) 994-7511
Marketing Activities	Assistant Vice President for Medical Center Communications and Marketing	mccminfo@gwumc.edu	(202) 994-3121
Research	Associate Vice President for Health Research, Compliance and Technology Transfer		(202) 994-2995
Student Health Information	Registrar or Dean of Students/Student Affairs Specific to the Student's School	regweb@gwu.edu	(202) 994-4900

Definitions

Common Rule	The Code of Federal Regulations, Office for Protection from Research Risks, Department of Health and Human Services, Part 46 – Protection of Human Subjects.
Covered Entity	A health plan or health care provider that electronically submits certain administrative and financial transactions. <i>Note: GW is not a covered entity under the HIPAA regulations.</i>
Health Care	Care, services, supplies or treatment related to the health of an individual including but not limited to: (1) Preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative care, and counseling, service, assessment, or procedure with respect to the physical or mental condition, or functional status, of an individual or that affects the structure or function of the body; and (2) Sale or dispensing of a drug, device, equipment, or other item in accordance with a prescription.
Individually	A subset of health information that identifies the individual or can

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Identifiable Health Information reasonably be used to identify the individual.

Protected Health Information (PHI) Individually identifiable information *in the custody of a covered entity* relating to the past, present or future physical or mental health or condition of an individual, provision of health care to an individual, or the past, present or future payment for health care provided to an individual.

Student For the purposes of this policy, the term student encompasses undergraduate and graduate students, residents and fellows.

Treatment, Payment and Health Care Operations

- **Treatment** means the provision, coordination, or management of health care and related services, consultation between providers relating to an individual, or referral of an individual to another provider for health care.
- **Payment** means activities undertaken to obtain or provide reimbursement for health care, including determinations of eligibility or coverage, billing, collection activities, medical necessity determinations and utilization review.
- **Health Care Operations** includes functions such as quality assessment and improvement activities, reviewing competence or qualifications of health care professionals, conducting or arranging for medical review, legal services and auditing functions, business planning and development, and general business and administrative activities.

University Component A university clinic, program, center, or department that provides health or health-related services. Examples of University Health Components include, but are not limited to: EMeRG; Student Health Services; Disability Support Services; counseling centers and clinics; research clinics; and athletics clinics.

Related Information

[Data Classification Security Policy](#)

[HIPAA Policy Regarding Health Insurance Plan and Flex fund Medical Reimbursement Plan](#)

[Health Information Privacy Procedures for Medical Center Development Activities](#)

[Information Security Policy](#)

[Mobile Device Security Policy](#)

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[Privacy of Student Records Policy](#)

Institutional Review Board, <http://www.gwumc.edu/research/human/aboutus.html>

Common Rule: Code of Federal Regulations, Office for Protection from Research Risks,
Department of Health and Human Services, Part 46: Protection of Human Subjects

[U.S. Department of Health and Human Services](#)

Appendices

Appendix A Affiliated Covered Entities

Who Approved This Policy

Robert A. Chernak, Senior Vice President for Student and Academic Support Services

Laurel G. Price Jones, Vice President for Advancement

Louis H. Katz, Executive Vice President and Treasurer

Donald R. Lehman, Executive Vice President for Academic Affairs

Beth Nolan, Senior Vice President and General Counsel

John F. Williams, Provost and Vice President for Health Affairs

History/Revision Dates

Origination Date: April 14, 2003

Last Amended Date: January 8, 2007

Next Review Date: August 31, 2013

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APPENDIX A:

Affiliated Covered Entities Providing Health Care

The George Washington University Hospital

Privacy Officer: Trent Crable, Chief Operating Officer
(202)-715-4016

The George Washington University Medical Faculty Associates

Privacy Officer: Mark Tatelbaum, General Counsel
(202) 741-3375

Children's National Medical Center

Privacy Officer: Ray Sczudlo, Vice President and Chief Legal Officer
(202) 884-4502

Community Connections

Holy Cross Hospital

INOVA Fairfax Hospital

Johns Hopkins University Hospital

Northern Virginia Mental Health

Prince George's Hospital Center

Providence Hospital

Sibley Memorial Hospital

Veterans Affairs Medical Center – Martinsburg, VA

Veterans Affairs Medical Center – Washington, DC

Virginia Hospital Center – Arlington, VA

Washington Hospital Center

Woodburn Mental Health and Mount Vernon Center

Woodley House Behavioral Health Care Clinic

Select Private Physician Offices