HIPAA Privacy Policies, Procedures, and Documentation

Policy

NYU Langone Health (“NYU Langone”) is committed to protecting the rights of our patients. In compliance with the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act (“HITECH”) and applicable federal and state laws and regulations, this policy sets forth NYU Langone’s practice of implementing, enforcing, updating, and documenting its compliance with the HIPAA Privacy Policies and Procedures.

- NYU Langone will implement policies and procedures that are reasonably designed to ensure compliance with the HIPAA standards, requirements, and implementation specifications.
- NYU Langone will monitor changes to HIPAA and will promptly revise its policies and procedures and, if required, its Notice of Privacy Practices.
- NYU Langone will maintain documentation required for HIPAA compliance for a minimum period of six (6) years from the date of the creation of the document or the date the document was last in effect, whichever is later. Documentation will be retained in written or electronic form in accordance with NYU Langone policies.

NYU Langone, as used in these policies, refers to all of the following entities and workforce members of those entities: NYU Langone Hospitals (“NYULH”), NYU School of Medicine, an administrative division of New York University (“NYUSOM”), Lutheran Augustana CECR (“Augustana”), Lutheran Certified Home Health Agency (“CHHA”), Sunset Park Health Council (d/b/a the Family Health Centers at NYU Langone) (“FHC”), Southwest Brooklyn Dental Practice (“SBDP”), and the NYU Langone Health System (“System”).

For HIPAA purposes, NYULH, NYUSOM, Augustana, and the CHHA, are designated as a single Affiliated Covered Entity (“ACE”). The ACE also participates in an Organized Health Care Arrangement (“OHCA”) with the FHC and the SBDP, as well as with the NYU Winthrop Medical Affiliates (i.e., the NYU Winthrop Faculty and Community Practices). With respect to the applicability of these policies to the FHC and SBDP, the appropriate FHC committee and board has approved. The NYU Langone Health System is a Business Associate of the covered entities in the OHCA.
Some entities may also have additional operational procedures that are site specific, in order to properly implement these privacy practices.

**Applicability**

These HIPAA Privacy Policies and Procedures apply to all members of the NYU Langone community, including employees, trustees, officers, faculty, medical staff, residents, fellows, students, volunteers, trainees, vendors, contractors, consultants, and agents of NYU Langone. Policies that address patients’ rights apply for any patient of NYU Langone (as defined herein) at any of its locations.

**Enforcement**

NYU Langone’s Privacy Officer has general responsibility for implementation of all Internal Audit, Compliance, and Enterprise Risk Management (“IACERM”) HIPAA Privacy Policies and Procedures.

Individuals who are found to be noncompliant with these HIPAA Privacy Policies and Procedures may be subject to disciplinary action up to and including termination of employment or medical staff privileges. Having knowledge of inappropriate conduct and choosing not to report is, in itself, a violation of this Policy.

These policies shall remain in effect unless terminated or superseded by a revised and/or updated policy issued by IACERM.

**Related Documents**

- All HIPAA Privacy Policies and Procedures
- Medical Center Information Technology Security Policies
- Medical Center Information Technology Workforce Members IT Policy
- NYU Langone Notice of Privacy Practices
- Privacy, Information Security, and Confidentiality Statement

**Legal Reference**

45 C.F.R. §164.530(i)
45 C.F.R. §164.530(j)

This version supersedes all previous NYU Langone (as defined in these Policies) entity HIPAA policies, including but not limited to NYU Langone Hospitals, New York University School of Medicine, and/or Lutheran Medical Center.