

**Effective Date of this Notice: 4/14/04**

**Bryn Mawr College**

**NOTICE OF PRIVACY PRACTICES**

As Required by the Privacy Regulations Created as a Result of the Health Insurance  
Portability and Accountability Act of 1996 (HIPAA)

**THIS NOTICE DESCRIBES HOW HEALTH INFORMATION  
ABOUT YOU (AS AN EMPLOYEE OF THE COLLEGE) MAY  
BE USED AND DISCLOSED, AND HOW YOU CAN GET  
ACCESS TO YOUR INDIVIDUALLY IDENTIFIABLE  
HEALTH INFORMATION.**

**PLEASE REVIEW THIS NOTICE  
CAREFULLY.**

**A. OUR COMMITMENT TO YOUR PRIVACY**

Bryn Mawr College (the College) is dedicated to maintaining the privacy of your protected health information (PHI). In conducting our business, we will create records regarding you and services we provide to you. We are required by law to maintain the confidentiality of health information that identifies you. We are also required by law to provide you with this notice of our legal duties and the privacy

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**B. IF YOU HAVE QUESTIONS ABOUT THIS NOTICE, PLEASE CONTACT:**

**Bryn Mawr College Department of Human Resources  
610-526-5261**

**C. WE MAY USE AND DISCLOSE**

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- 2. Lawsuits and Similar Proceedings.** The College may use and disclose your PHI in response to a court or administrative order, if you are involved in a lawsuit or similar proceeding. We also may disclose your PHI in response to a discovery request, subpoena, or other lawful process by another party involved in the dispute, but only if we have made an effort to inform you of the request or to obtain an order protecting the information the party has requested.
- 3. National Security.** The College may disclose your PHI to federal officials for intelligence and national security activities authorized by law.
- 4. Workers' Compensation.** The College may release your PHI for workers' compensation and similar programs.

#### **E. YOUR RIGHTS REGARDING YOUR PHI**

You have the following rights regarding the PHI that we maintain about you:

- 1. Confidential Communications.** You have the right to request that the College communicate with you about your health and related issues in a particular manner or a certain location. The College will try to accommodate reasonable requests. You do not need to give a reason for your request.
- 2.**

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- 4. Amendment.** You may ask us to amend your health information if you believe it is incorrect or incomplete, and you may request an amendment for as long as the information is kept by or for the College. To request an amendment, your request must be made in writing and submitted to the Director of Human Resources, Bryn Mawr College. You must provide us with a reason that supports your request for amendment. The College will deny your request if you fail to submit your request (and the reason for your request) in writing. Also, we may deny your request if you ask us to amend information that is in our opinion: (a) accurate and complete; (b) not part of the PHI kept by or for the College; (c) not part of the PHI which you would be



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**RECEIPT OF NOTICE OF PRIVACY PRACTICES  
WRITTEN ACKNOWLEDGEMENT FORM**

I, \_\_\_\_\_, have received a copy of Bryn Mawr College's  
Employee Name  
Notice of Privacy Practices.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Employee