POLICY STATEMENT

It is the policy of Florida International University (FIU) to promote the interests and well-being of the patients of FIU’s Health Insurance Portability and Accountability Act (HIPAA) Hybrid Designated Health Care Components (Components/Units) and to promote better communication between the patient and the health care provider.

It is the intent of the Florida Legislature and FIU policy that FIU health care providers understand their responsibility to give their patients a general understanding of the procedures to be performed on them and to provide information pertaining to their health care so that they may make decisions in an informed manner after considering the information relating to their condition, the available treatment alternatives, and substantial risks and hazards inherent in the treatments. It is the intent of the Florida Legislature and FIU policy that patients have a general understanding of their responsibilities toward the FIU health care providers, the Workforce members, and Component/Unit facilities. It is the intent of the Florida Legislature and FIU policy that the provision of such information to a patient eliminate potential misunderstandings between patients, health care providers and Workforce members.

It is a public policy of the Florida Legislature and FIU policy that the interests of patients be recognized in a Patient's Bill of Rights and Responsibilities and that a health care facility or health care provider may not require a patient to waive his or her rights as a condition of treatment. Accordingly, the Components/Units that provide outpatient services and care to a patient, or admits and treats a patient, shall adopt and make available to the patient, in writing, a statement of the rights and responsibilities of patients, including the following:

SUMMARY OF THE FLORIDA PATIENT'S BILL OF RIGHTS AND RESPONSIBILITIES

Florida law requires that your health care provider or health care facility recognize your rights while you are receiving medical care and that you respect the health care provider's or health care facility's right to expect certain behavior on the part of patients. You may request a copy of the full text of this law from your health care provider or health care facility. A summary of your rights and responsibilities follows:
Patient Rights:

- A patient has the right to be treated with courtesy and respect, with appreciation of his or her individual dignity, and with protection of his or her need for privacy.
- A patient has the right to a prompt and reasonable response to questions and requests.
- A patient has the right to know who is providing medical services and who is responsible for his or her care.
- A patient has the right to know what patient support services are available, including whether an interpreter is available if he or she does not speak English.
- A patient has the right to know what rules and regulations apply to his or her conduct.
- A patient has the right to be given by the health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis.
- A patient has the right to refuse any treatment, except as otherwise provided by law.
- A patient has the right to be given, upon request, full information and necessary counseling on the availability of known financial resources for his or her care.
- A patient who is eligible for Medicare has the right to know, upon request and in advance of treatment, whether the health care provider or health care facility accepts the Medicare assignment rate.
- A patient has the right to receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.
- A patient has the right to receive a copy of a reasonably clear and understandable, itemized bill and, upon request, to have the charges explained.
- A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.
- A patient has the right to treatment for any emergency medical condition that will deteriorate from failure to provide treatment.
- A patient has the right to know if medical treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such experimental research.
- A patient has the right to express grievances regarding any violation of his or her rights, as stated in Florida law, through the grievance procedure of the
health care provider or health care facility which served him or her and to the appropriate state licensing agency.

Patient Responsibilities:

- A patient is responsible for providing to the health care provider, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her health.
- A patient is responsible for reporting unexpected changes in his or her condition to the health care provider.
- A patient is responsible for reporting to the health care provider whether he or she comprehends a contemplated course of action and what is expected of him or her.
- A patient is responsible for following the treatment plan recommended by the health care provider.
- A patient is responsible for keeping appointments and, when he or she is unable to do so for any reason, for notifying the health care provider or health care facility.
- A patient is responsible for his or her actions if he or she refuses treatment or does not follow the health care provider’s instructions.
- A patient is responsible for assuring that the financial obligations of his or her health care are fulfilled as promptly as possible.
- A patient is responsible for following health care facility rules and regulations affecting patient care and conduct.

It is FIU’s policy to comply fully with the Florida Patient’s Bill of Rights and Responsibilities, HIPAA, and Florida state statutes. To that end, all FIU Component/Unit Workforce members shall receive mandatory patient rights and responsibility training, HIPAA Privacy and Security Rule training, as well as Florida state statute training in support of FIU’s commitment to the proper use, disclosure, and safeguarding of PHI/ePHI and patient rights and responsibilities.

Workforce members who fail to adhere to this policy and procedure may be subject to civil and criminal penalties as provided by law, and/or administrative and disciplinary action, including, but not limited to termination of employment or expulsion. Violations will be handled through FIU disciplinary policies applicable to employees and students. FIU may also refer suspected violations of applicable law to appropriate law enforcement agencies. (See FIU Policy and Procedure #1660.085 (Sanctions))

Each HIPAA Component must notify the Director of Compliance and Privacy for Health Affairs, Office of Compliance and Integrity, the name and title of their designated HIPAA.
Privacy Coordinator. (FIU Policy and Procedure #1660.070 (Designation of HIPAA Privacy Officer and Component Privacy and Security Coordinators))

FIU reserves the right to amend, change or terminate this policy and procedure at any time, either prospectively or retroactively, without notice. This policy and procedure will also change should it become necessary and appropriate to comply with changes in federal and Florida state statutes, including the standards, requirements, and implementation specifications of HIPAA and Florida state statutes. This policy and procedure are designed to be implemented in conjunction with a set of comprehensive privacy policies and procedures, and any ambiguities between this policy and procedure and the other policies and procedures should be harmonized consistent with the requirements of HIPAA, federal law, and Florida state statutes.

SCOPE
The policy applies to FIU’s HIPAA Health Care Components that are contained within FIU’s HIPAA Hybrid Designations (FIU Policy and procedure #1610.005), the health care providers and Workforce members and the patients as defined in this policy.

REASON FOR POLICY
To delineate the relative rights and responsibilities of the patients, Health Care Components/Units, health care providers, and Workforce members as defined in this policy.

DEFINITIONS

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access</td>
<td>Means the ability or the means necessary to read, write, modify, or communicate data/information or otherwise use any system resource.</td>
</tr>
<tr>
<td>Availability</td>
<td>Means the property that data or information is accessible and useable upon demand by an authorized person.</td>
</tr>
<tr>
<td>Patient</td>
<td>The person who is the subject of PHI.</td>
</tr>
<tr>
<td>Code of Federal Regulations</td>
<td>Also known as CFR is the codification of the general and permanent rules published in the Federal Register by the executive departments and agencies of the Federal Government.</td>
</tr>
<tr>
<td>Component</td>
<td>Means a component or combination of components of a hybrid entity designated by the hybrid entity (Florida International University). Those programs designated by FIU that must comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, hereinafter referred to as &quot;Components&quot;. Components of FIU are required to comply with</td>
</tr>
<tr>
<td><strong>Confidentiality</strong></td>
<td>Means data or information is not made available or disclosed to unauthorized persons or processes.</td>
</tr>
<tr>
<td><strong>Disclosure</strong></td>
<td>Means the release, transfer, provision of access to, or divulging in any other manner of protected health information outside of the entity holding the information.</td>
</tr>
<tr>
<td><strong>Electronic Protected Heath Information (ePHI)</strong></td>
<td>PHI in electronic form. See also: PHI.</td>
</tr>
<tr>
<td><strong>Florida Statutes</strong></td>
<td>Also known as F.S. is a permanent collection of state laws organized by subject area into a code made up of titles, chapters, parts, and sections.</td>
</tr>
</tbody>
</table>
| **Health care** | Means the care, services, or supplies related to the health of a patient/client, including:  
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 a patient/client 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. |
| **Health care Component** | See “Component” |
| **Health care Provider** | Means a physician licensed under Florida Statute chapter 458, an osteopathic physician licensed under Florida Statute chapter 459, or a podiatric physician licensed under Florida Statute chapter 461. |
| **Health Information** | Means any information, whether oral or recorded in any form or medium, that is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and relates to the past, present, or future physical or mental health or condition of an patient/client; the provision of health care to an patient/client; or the past, present, or future payment for the provision of health care to an patient. |
| **HIPAA** | Means the Health Insurance Portability and Accountability Act of 1996. |
| **Hybrid Covered Entity** | Means a single legal entity that performs both covered and non-covered functions. The entity has a defined health care component that engages in HIPAA electronic transactions. |
| **Privacy Liaison/Coordinator** | Means an FIU Workforce member, appointed by the director, manager, or supervisor of a HIPAA Designated Component to conduct and/or coordinate with necessary and appropriate Workforce members all HIPAA Privacy Rule activities and actions within the Component, including but not limited to tracking HIPAA training activities; coordinating HIPAA Privacy Rule implementation; participating in HIPAA Privacy and Security Rule violation investigations, as necessary and appropriate, communicating with the Director of Compliance and Privacy for Health Affairs, the HIPAA Security Officer, and the Office of General Counsel, as necessary and appropriate, regarding HIPAA Privacy and Security Rule activities and concerns; conducting and reporting monitoring activities; participate in assessments; and responding to, tracking and documenting HIPAA Privacy Rule activities. Maintain ongoing communication with the Director of Compliance and Privacy for Health Affairs and the HIPAA Security Officer. |
| **Protected Health Information (PHI)** | Means any individually identifiable health information collected or created in the course of the provision of health care services by a covered entity, in any form (written, verbal or electronic). PHI relates to the past, present, or future physical or mental health or condition of an individual or the past, present, or future payment for the provision of health care to an individual. Protected Health Information however specifically excludes:  
1. Education records covered by the Family Educational Rights and Privacy Act, as amended, 20 U.S.C. § 1232g ("FERPA");  
2. Records described at 20 U.S.C. § 1232g(a)(4)(B)(iv); and  
3. Employment records held by a covered entity in its role as an employer. |
| **Privacy Rule** | The regulations at 45 CFR 160 and 164, which detail the requirements for complying with the standards for privacy under the administrative simplification provisions of HIPAA. |
| **Responsible provider** | Means a health care provider who is primarily responsible for patient care in a health care facility or provider's office. |
| **Treatment** | Means the provision, coordination, or management of health care and related services among health care providers or by a health care provider with a third party, or consultative services among providers regarding a patient. |
| **Use** | With respect to patient/client identifiable health information, the sharing, employment, application, utilization, examination, or
analysis of such information within an entity that maintains such information.

| Workforce members | Means employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity (FIU HIPAA Component) or business associate, is under the direct control of such covered entity or business associate, whether or not they are paid by the covered entity or business associate. |

### ROLES AND RESPONSIBILITIES

1. **Compliance Oversight:** The Office of University Compliance and Integrity (University Compliance)
   - Evaluates all federal and state health care privacy laws, regulations, rules, and ordinances (Rules) to ensure compliance with the Rules.
   - Develops and maintains in coordination with the Office of General Counsel and the HIPAA Hybrid Designated Component/Unit Privacy Coordinators all required University-wide Privacy Rule policies and procedures.
   - Partners with the Division of Information Technology HIPAA Security Officer to ensure compliance with all federal and state health care privacy and security laws, regulations rules, and ordinances.
   - Develops and maintains HIPAA health care Privacy Rule training modules and ensures appropriate Workforce members complete the required training.
   - Performs audits and assessments of the Components/Units to ensure their compliance with the Privacy Rules and associated FIU Policies and Procedures.

2. **HIPAA Components:**
   - Each FIU HIPAA Hybrid Designated Component/Unit must designate a Privacy Coordinator responsible for overseeing and ensuring the Component’s/Unit’s implementation and compliance with the HIPAA Privacy Rule, FIU’s associated HIPAA Privacy Policies and Procedures, and any applicable state laws and/or regulations governing the confidentiality, integrity and availability of PHI and electronic PHI (ePHI), including, but not limited to ensuring the health care providers, Workforce members, and patients are complying with the Patient’s Bill of Rights and Responsibilities.

### RELATED RESOURCES

**References**

- 45 CFR §164.502
- 45 CFR §164.530
• Florida Statute §95.11
• Florida Statute §381.026 (Florida Patient’s Bill of Rights and Responsibilities)
• Florida Statute §456.41
• Florida Statute §456.057
• Florida Statute §766.103

Related Policies

• FIU Policy # 1610.005 (Designation of HIPAA Health Care Components for FIU Community)
• FIU Policy and Procedure #1640.015 (Providing Notice of Privacy Practices))
• FIU Procedure #1660.001 (Representatives)
• FIU Policy and Procedure #1660.005 (Right of Patients to Request Confidential Communications Regarding the Use and Disclosure of Their Protected Health Information)
• FIU Policy and Procedure #1660.045 (Right of Patients to Request Restrictions Regarding the Use and Disclosure of Their Protected Health Information)
• FIU Policy and Procedure #1660.050 (Patient Access to Protected Health Information)
• FIU Policy and Procedure #1660.055 (Amendment of Protected Health Information)
• FIU Policy and Procedure #1660.060 (Accounting of Disclosures of Protected Health Information)
• FIU Policy and Procedure #1660.065 (Complaints Under the HIPAA Privacy Rule, Mitigation, Refraining From Intimidating or Retaliatory Acts, and Waiver)
• FIU Policy and Procedure #1660.070 (Designation of HIPAA Privacy Officer and Component Privacy and Security Coordinators)
• FIU Policy and Procedure #1660.080 (Policies and Procedures, Changes to Policies and Procedures, and Documentation)
• FIU Policy and Procedure #1660.085 (Sanctions)

CONTACTS

For further information concerning this policy, please contact the FIU Office of Compliance & Integrity at (305) 348-2216, or the appropriate Component/Unit Privacy Coordinator.

HISTORY

Initial Effective Date: November 7, 2023
Review Dates (Review performed, no updates): N/A
Revision Dates: November 7, 2023
I. Florida Patient’s Bill of Rights and Responsibilities

Each Component/Unit must designate a Privacy Liaison/Coordinator responsible for overseeing and ensuring the Component’s/Unit’s implementation and compliance with the HIPAA Privacy Rule, FIU’s associated HIPAA Privacy Policies and Procedures, and any applicable Florida state statutes, laws and/or regulations governing the confidentiality, integrity and availability of PHI and electronic PHI (ePHI), including, but not limited to ensuring Workforce members and the Component/Unit comply with the Florida Patient’s Bill of Rights and Responsibilities. The Privacy Liaisons/Coordinators may delegate and share duties and responsibilities as necessary and appropriate but retain oversight responsibility.

The Components/Units and the health care providers shall observe the following patient rights as identified in the Florida Patient’s Bill of Rights and Responsibilities, the HIPAA Privacy Rule, and Florida state statutes:

A. The Component/Unit Privacy Liaison/Coordinator, or designee must post a copy of the Patient’s Bill of Rights and Responsibilities in the common areas of the Component/Unit where individuals are likely to gather and paper copies of the same shall be made available to individuals upon request.

B. The Patient’s Bill of Rights and Responsibilities shall include the rights and responsibilities as identified in the “Summary of the Florida Patient Bill of Rights and Responsibilities” as written on the Policy Statement immediately preceding this Procedure.

C. Individual Dignity

1. The individual dignity of a patient must be respected at all times and upon all occasions.

   a. Every patient who is provided healthcare services retains certain rights to privacy, which must be respected without regard to the patient's economic status or source of payment for his or her care.
b. The patient's rights to privacy must be respected to the extent consistent with providing adequate medical care to the patient and with the efficient administration of the Component/Unit or health care provider's office. However, this subparagraph does not preclude necessary and discreet discussion of a patient's case or examination by appropriate medical personnel.

2. A patient has the right to a prompt and reasonable response to a question or request.
   a. The Component/Unit Workforce members shall respond in a reasonable manner to the request of a patient's health care provider for medical services to the patient.
   b. The Component/Unit Workforce members shall also respond in a reasonable manner to the patient's request for other services customarily rendered by the Component/Unit to the extent such services do not require the approval of the patient's health care provider or are not inconsistent with the patient's treatment.
   c. A patient has the right to retain and use personal clothing or possessions as space within the facility permits, unless for him or her to do so would infringe upon the right of another patient or is medically or programmatically contraindicated for documented medical, safety, or programmatic reasons.

D. Information About Health Care, the Health Care Providers and Workforce Members

1. A patient has the right to know the name, function, and qualifications of each health care provider and Workforce member who is providing medical services to the patient.
   a. A patient may request such information from his or her responsible health care provider or Component/Unit Administrative Officer in which he or she is receiving medical services.

2. A patient has the right to know what patient support services are available in the Component/Unit.

3. A patient has the right to be given by his or her health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis, unless it is medically inadvisable or impossible to give this information to the patient, in which case the information must be given to the patient's guardian, or a person designated as the patient's representative. A patient has the right to refuse this information. (See FIU Policy and Procedure #1660.001 (Representatives))
4. A patient has the right to refuse any treatment based on information required by this paragraph, except as otherwise provided by law. The responsible health care provider shall document any such refusal.

5. A patient has the right to know what Component/Unit rules and regulations apply to his or her conduct.

6. A patient has the right to express grievances to a health care provider, a Component/Unit Administrative Officer, the Director of Compliance and Privacy for Health Affairs, the Office of Compliance and Integrity, or the appropriate state licensing agency regarding alleged violations of patients' rights.

   a. A patient has the right to know the health care provider's or Component's/Unit's procedures for expressing a grievance. (Also see FIU Policy and Procedure #1660.065 (Complaints Under the HIPAA Privacy Rule, Mitigation, Refraining From Intimidating or Retaliatory Acts, and Waiver))

7. A patient who does not speak English, or has limited English proficiency, has the right to be provided an interpreter when receiving medical services.

E. Financial Information and Disclosure

1. A patient has the right to be given, upon request, by the responsible health care provider, his or her designee, or a representative of the Component/Unit full information and necessary counseling on the availability of known financial resources for the patient's health care.

2. The health care providers or a designated Component/Unit Workforce member shall, upon request, disclose to each patient who is eligible for Medicare, in advance of treatment, whether the health care provider or the Component/Unit in which the patient is receiving medical services accepts assignment under Medicare reimbursement as payment in full for medical services and treatment rendered by the health care provider(s) and Component/Unit Workforce member(s).

3. The health care providers or a Component/Unit Workforce members shall, upon request, furnish a patient, prior to provision of medical services, a reasonable estimate of charges for such services.

   a. Such reasonable estimate shall not preclude the health care provider or Component/Unit from exceeding the estimate or making additional charges based on changes in the patient's condition or treatment needs.

4. Patients have the right to receive a copy of an itemized bill upon request.
a. Patients have a right to be given an explanation of charges upon request.

F. Access to Health Care

1. Patients have the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.

2. Patients have the right to treatment for any emergency medical condition that will deteriorate from failure to provide such treatment.

3. Patients have the right to access any mode of treatment that is, in his or her own judgment and the judgment of his or her health care practitioner, in the best interests of the patient, including complementary or alternative health care treatments, in accordance with the provisions of Florida Statute §456.41.

G. Experimental Research

1. In addition to the provisions of Florida Statute §766.103 and §456.057, patients have the right to know if medical treatment is for purposes of experimental research and to consent prior to participation in such experimental research.

   a. For any patient, regardless of ability to pay or source of payment for his or her care, participation must be a voluntary matter; and a patient has the right to refuse to participate. The patient's consent or refusal must be documented in the patient's medical record.

H. Patient Responsibilities

1. In receiving healthcare, patients have the right to know their rights and responsibilities. Each patient of a health care provider shall respect the health care provider's and Component/Unit Workforce members right to expect behavior on the part of patients which, considering the nature of their illness, is reasonable and responsible.

2. Each patient shall observe the responsibilities described in the following summary:

   a. A patient is responsible for providing to the health care provider, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her health.

   b. A patient is responsible for reporting unexpected changes in his or her condition to the health care provider.
c. A patient is responsible for reporting to the health care provider whether he or she comprehends a contemplated course of action and what is expected of him or her.

d. A patient is responsible for following the treatment plan recommended by the health care provider.

e. A patient is responsible for keeping appointments and, when he or she is unable to do so for any reason, for notifying the health care provider or health care facility.

f. A patient is responsible for his or her actions if he or she refuses treatment or does not follow the health care provider's instructions.

g. A patient is responsible for assuring that the financial obligations of his or her health care are fulfilled as promptly as possible.

h. A patient is responsible for following health care facility rules and regulations affecting patient care and conduct.

II. Health Insurance and Portability and Privacy Act (HIPAA) and Florida State Statute Rights

A. Right to Obtain the Notice of Privacy Practices (See FIU Policy and Procedure #1640.015 (Providing Notice of Privacy Practices))

The Notice is available in paper and electronic format and the Notice must be provided at the first encounter. The patient and all other individuals have the right to request a copy of the Notice. Paper copies are available at every physical health care Component/Unit. For electronic access to the Notice, the Notice is posted on FIU’s Office of Compliance and Integrity website, and the websites maintained by the Components/Units identified as part of FIU Health Insurance Portability and Accountability Act (HIPAA) Hybrid Designation.

B. Right to Inspect and Obtain a Copy of Their Protected Health Information (See FIU Policy and Procedure #1660.050 (Patient Access to Protected Health Information))

With limited exception, patients and their legally authorized Representatives have the right to inspect and obtain a copy of the patient’s protected health information that is part of the patient’s designated record set for as long as the information is maintained by the Component/Unit.

C. Right to Request Restrictions on Uses and Disclosures of Their Protected Health Information (See FIU Policy and Procedure #1660.045 (Right of Patients to Request Restrictions Regarding the Use and Disclosure of Their Protected Health Information))
Patients have the right to request restrictions regarding the uses and disclosures of their protected health information for certain purposes, including treatment, payment, and health care operations (TPO). The law also grants patients the right to request restrictions for other disclosures, such as those made to family members. Any requested restrictions approved by the Component/Unit are limited to the information under the control of the Component/Unit.

D. **Right to Request Amendment of Their Health Information** (See FIU Policy and Procedure #1660.055 (Amendment of Protected Health Information))

Subject to certain limitations, patients have the right to request amendment of the protected health information in their designated record set in paper or electronic format, for as long as the protected health information is maintained by the Component/Unit. The Component/Unit must consider all requests for amendment but are not required to agree to the request for amendment.

E. **Right to Received Confidential Communications** (See FIU Policy and Procedure #1660.005 (Right of Patients to Request Confidential Communications Regarding the Use and Disclosure of Their Protected Health Information))

HIPAA grants patients the right to request an alternative means or location for receiving communications of their protected health information (e.g., by telephone only) or at certain locations (e.g., work address only). The Component/Unit will accommodate all reasonable requests upon receipt and review of such request.

F. **Right to Receive an Accounting of the Disclosures of Their Health Information** (See FIU Policy and Procedure #1660.060 (Accounting of Disclosures of Protected Health Information))

Subject to certain limitations, HIPAA, and Florida state statute grants patients the right to receive an accounting of disclosures that the Component/Unit made of the patient’s protected health information. More specifically, Florida state statute provides that a record must be maintained of all disclosures of information contained in the medical records to a third-party.

G. **Right to File a Complaint** (See FIU Policy and Procedure #1660.065 (Complaints Under the HIPAA Privacy Rule, Mitigation, Refraining From Intimidating or Retaliatory Acts, and Waiver))

HIPAA and Florida state statutes grant patients the right to file a complaint about FIU and the Components/Units compliance with its privacy and/or security policies and procedures or when patients feel their privacy rights have been violated.

III. **Record Retention**
A. If a communication, action, activity, or designation is required to be documented in writing, the document or record owner will maintain such writings, or an electronic copy, for seven (7) years from the date of its creation or the last effective date, whichever is later.