



**NOTICE OF PRIVACY PRACTICES**  
**EFFECTIVE: APRIL 14, 2003**  
**REVISED: NOVEMBER 19, 2024**

THIS NOTICE DESCRIBES HOW YOUR MEDICAL INFORMATION MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.  
PLEASE REVIEW IT CAREFULLY.

**ABOUT THIS NOTICE:**

Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) is dedicated to maintaining the privacy of your Protected Health Information (PHI). TTUHSC El Paso provides health care services and items through its Schools of Medicine and School of Nursing. TTUHSC El Paso provides services at its main community hospitals, ambulatory care clinics, ambulatory surgical centers, pharmacies, research units and several community service outreach centers in the El Paso area. TTUHSC El Paso is required by law to maintain the privacy of your PHI and provide you with notice of its legal duties and privacy practices. This notice of privacy practices describes how TTUHSC El Paso may use or disclose your PHI. PHI includes any information that relates to (1) your past, present, or future physical or mental health or condition; (2) providing health care to you; and (3) the past, present, or future payment for your health care. The terms of this notice shall apply to TTUHSC El Paso's privacy practices until it is changed by TTUHSC El Paso.

**YOUR PRIVACY RIGHTS:**

*When it comes to your health information, you have certain rights.* This section explains your rights and some of our responsibilities to help you.

- **Get an electronic or paper copy of your medical record.** You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this. We will provide a copy or a summary of your health information, within 15 days of your request. We may charge a reasonable, cost-based fee.
- **Ask us to correct your medical record.** You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 days.
- **Request confidential communication.** You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests.
- **Ask us to limit what we use and share.** You can ask us **not** to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.
- **Get a list of those with whom we've shared information.** You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why. We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We will provide accounting once a year for free, but will charge a reasonable, cost-based fee if you ask for another one within 12 months.
- **Get a copy of this privacy notice.** You can ask for a paper copy of this notice at any time, even if you have agreed to receive this notice electronically. We will provide you with a paper copy promptly.

- **Choose someone to act for you.** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- **File a complaint if you feel your rights are violated.** You may file a complaint in one of the following ways:
  - Contact the TTUHSC El Paso privacy official at the address indicated below
  - Use our confidential website at [www.Ethicspoint.com](http://www.Ethicspoint.com)
  - Contact The Office for Civil Rights:  
 United States Department of Health and Human  
 Services 1301 Young Street, Suite 1169, Dallas, Texas  
 75202 [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/)  
 We will not retaliate or take action against you for filing a complaint.

## **YOUR CHOICES:**

*For certain health information, you can tell us your choices about what we share.* If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

- **In these cases, you have both the right and choice to tell us to:**
  - Share information with your family, close friends, or others involved in your care.
  - Share information in a disaster relief situation.
  - Include your information in a hospital directory.
  - If you are not able to tell us your preference, for example if you are unconscious, we may share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.
- **In these cases we never share your information unless you give us written permission:**
  - Marketing purposes
  - Sale of your information
  - Most sharing of psychotherapy notes

## **TTUHSC EL PASO USES AND DISCLOSURES:**

*How do we typically use or share your health information?* The following uses do **NOT** require your authorization, except where required by Texas Law. Your medical information may be shared in either printed or electronic format, or both.

- **Treat you.** We can use your health information and share it with other professionals who are treating you. For example, a doctor treating you for an injury asks another doctor about your overall health condition.
- **Run our organization.** We can use and share your health information to run our practice, improve your care, and contact you when necessary. For example, we use health information about you to manage your treatment and services.
- **Bill for your services.** We can use and share your health information to bill and get payment from health plans or other entities. For example, we give information about you to your health insurance plan so it will pay for your services.
- **In the case of fundraising.** We may use your PHI to contact you for fundraising efforts. We must include in any fundraising material you receive a description of how you may opt out of receiving future fundraising communications.
- **How else can we use or share your health information?** We are allowed or required to share your information in other ways-usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html)

- **Help with public health and safety issues.**
  - We can share health information about you for certain situations such as:
    - Preventing disease
    - Helping with product recalls
    - Reporting adverse reactions to medications
    - Reporting suspected abuse, neglect, or domestic violence
    - Preventing or reducing a serious threat to anyone's health or safety
- **Conducting Research.** We can use or share your information for health research.
- **Comply with the law.** We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.
- **Respond to organ and tissue donation requests.** We can share health information about you with organ procurement organizations.
- **Work with a medical examiner or funeral director.** We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
- **Address workers' compensation, law enforcement, and other government request.**
  - We can use or share health information about you:
    - For workers' compensation claims
    - For law enforcement purposes or with a law enforcement official
    - With health oversight agencies for activities authorized by law
    - For special government functions such as military, national security, and presidential protective services
- **Respond to lawsuits and legal actions.** We can use or share health information about you in response to a court or administrative order, or in response to a subpoena.

**Reproductive health care information.** TTUHSC El Paso must obtain a valid attestation before it uses or discloses PHI potentially related to your reproductive health care about you, such as health oversight activities, judicial and administrative proceedings, law enforcement purposes, or disclosures to coroners or medical examiners. The attestation is used to verify that the requested use or disclosure of protected health information complies with the protection of reproductive health care information and is not for a prohibited purpose. (45 CFR §164.512(d)), (45 CFR §164.512(e)) ;(45 CFR §164.512(f)) (45 CFR §164.512(g)(1))

Reproductive Health Care means health care that affects the health of an individual in all matters relating to the reproductive system and to its functions and processes, including contraceptive medications, peri and post-menopausal treatments, and over the counter or prescribed medications and devices. Although we may use this information for your treatment, payment or healthcare operations as described, we are prohibited from using or disclosing your Reproductive Health Care information for any of the following purposes or activities:

- To conduct a criminal, civil, or administrative investigation into any person for the mere act of seeking, obtaining, providing, or facilitating reproductive health care, where such health care is lawful under the circumstances in which it is provided.
- To impose criminal, civil, or administrative liability on any person for the mere act of seeking, obtaining, providing, or facilitating reproductive health care, where such health care is lawful under the circumstances in which it is provided.
- The identification of any person for the purpose of conducting such investigation or imposing such liability. For example, in response to a police officer's medical record request who is conducting an investigation into a patient who may have sought healthcare services for pregnancy termination (if lawful in our state), we may not provide the patient's identity or the patient's Reproductive Health Care information, including whether a procedure related to the lawful termination of a pregnancy was performed.

We are also prohibited from using or disclosing Reproductive Health Care information without an attestation (as detailed below) related to the following:

- Health oversight activities
- Judicial and administrative proceedings
- Law enforcement purposes
- Coroners and medical examiners services

Requesters of Reproductive Health Care information for these matters are required to sign an Attestation that the use or disclosure is not for a prohibited purpose. For example, if a state medical examiner issued a subpoena for a deceased patient's medical records and the patient had received Reproductive Health Care, we could not provide this information without a signed Attestation from the medical examiner.

Please note that if you provide written consent to release your Reproductive Health Care information, the person that receives the information may not be subject to HIPAA requirements and may disclose the information to others.

As Required By Law and Health Oversight Activities: We will disclose medical information about you when required to do so by federal, state, or local law. We may disclose medical information, except for Reproductive Health Care information, to a health oversight agency for activities authorized by law. These oversight activities include audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the healthcare system, government programs, and compliance with civil rights laws.

Lawsuits and Disputes: We may disclose your medical information if a court order, warrant, summons or other lawful instructions of a court or public body require us to for a legal or administrative proceeding. If Reproductive Health Care or SUD information is part of the court order, we will comply with HIPAA procedures to evaluate whether we are required to disclose.

Law Enforcement: We may release medical information, except for Reproductive Health Care to stop a serious threat if asked to do so by a law enforcement official

- In response to a court order, judicial subpoena, warrant, summons or similar process;
- To identify or locate a suspect, fugitive, material witness, or missing person;
- About the victim of a crime, if under certain limited circumstances, we are unable to obtain the person's agreement;
- About a death we believe may be a result of criminal conduct;
- About criminal conduct at the health system; and
- In emergency circumstances to report a crime; the location of the crime or victims; or the identity, description or location of the person who committed the crime.

Coroners, Medical Examiners and Funeral Directors: We may release medical information to a coroner or medical examiner, except an attestation will be required if Reproductive Health Care information is requested.

TTUHSC El Paso will use health information exchange systems to electronically transmit, receive and/or access your medical information which may include, but is not limited to, treatments, prescriptions, labs, medical and prescription history, and other health care information unless you opt out.

**TTUHSC EL PASO RESPONSIBILITIES:**

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html)

**CHANGE IN NOTICE OF PRIVACY PRACTICES:**

TTUHSC El Paso reserves the right to change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our website.

**QUESTIONS:**

If you have any questions about this notice or would like additional information, please contact the privacy official at the address and telephone number listed below or you may visit our website at <http://elpaso.ttuhsce.edu/hipaa>.

**PRIVACY OFFICIAL CONTACT INFORMATION**

TTUHSC EL PASO PRIVACY OFFICER 130 Rick Francis St. EL PASO, TX 79905 (915) 215-4454
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[www.Ethicspoint.com](http://www.Ethicspoint.com)

TTUHSC El Paso Provides For Program Accessibility To Members Of The Public. Those Who Need Materials In Braille, Large Print, Tape Format, Or Who Need An Interpreter Or Telecommunications Device For The Deaf Are Asked To Contact The Clinic Manager.