

For help with a privacy related concern or to report a complaint or possible violation of the Patient Privacy program, Please contact your supervisor, another member of local management, your local facility privacy officer, the corporate privacy officer, or the corporate ethics line at : **1-877-508-LIFE (5433)**.

- P – Protect patient health information (PHI) as if it were your own information.
- R – Respect patient requests regarding how their information should be used and disclosed.
- I – Inform patients of how you will use and disclose their individually identifiable information.
- V – Verify the identity of all persons that may request access to protected health information.
- A – Assess access to the minimum necessary amount of information needed to do your job.
- C – Comply with the standards for patient Privacy explained in the patient Privacy Program Brochure.
- Y – You, are responsible for how you use and disclose patient information- Remember, we care about our patient’s and their right to privacy.

HIPAA – Patient Privacy Program

I acknowledge that I have received training for LifePoint Hospital's Patient Privacy Program. I understand that it represents mandatory policies of the organization and my facility, and I agree to abide by it.

Signature

Position

Printed Name

Social Security Number

Date

Facility

Acknowledgement