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ADMINISTRATIVE POLICY MANUAL	Effective: 0408
SUBJECT: DEVELOPMENT (FUNDRAISING) ACTIVITIES	
POLICY NUMBER: HIP11	

Issued:

POLICY

For purposes of this policy, Pennsylvania Hospital includes all off campus licensed facilities, including but not limited to the Surgery Center of Pennsylvania Hospital.

It is the policy of Pennsylvania Hospital that protected health information (PHI) will be used and disclosed in a manner that respects a patient's right to privacy, and in accordance with HIPAA privacy regulations and applicable laws.

Committee Approval:
HIPAA

Administrative Policy
Review Committee:
April 2003
April 2004
April 2005
April 2006
April 2007
April 2008

PURPOSE

The purpose of this policy is to define appropriate use of PHI in development (fundraising) activities.

Attachment(s):

SCOPE

All employees and business associates of Pennsylvania Hospital are required to comply with the provisions of this policy in conducting development activities as defined below.

Related Policies:

IMPLEMENTATION

The Chief Development Officer at Pennsylvania Hospital is responsible for implementing this policy.

DEFINITIONS

Protected health information (PHI) is information that is created or received by UPHS and the School of Medicine; and relates to the past, present, or future physical or mental health or condition of a patient; the provision of health care to a patient; or the past, present, or future payment for the provision of health care to a patient; and that identifies the patient or for which there is a reasonable basis to believe the information can be used to identify the patient. PHI includes information of persons living or deceased. The following components of a patient's information also are considered PHI: a) names; b) street address, city, county, precinct, zip code; c) dates directly related to a patient, including birth date, admission date, discharge date, and date of death; d) telephone numbers, fax numbers, and electronic mail addresses; e) Social Security numbers; f) medical record numbers; g) health plan beneficiary numbers; h) account numbers; i) certificate/license numbers; j) vehicle identifiers and serial numbers, including license plate numbers; k) device identifiers and serial numbers; l) Web Universal Resource Locators (URLs); m) biometric identifiers, including finger and voice prints; n) full face photographic images and any comparable images; and o) any other unique identifying number, characteristic, or code.

Use means, with respect to individually identifiable health information, the sharing, employment, application, utilization, examination, or analysis of such information within UPHS and the School of Medicine.

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Disclosure means the release, transfer, provisions of access to, divulging in any other manner of information outside UPHS and the School of Medicine.

Development includes any appeal for money or other donations, sponsorship of events, etc. that is undertaken for the benefit of Pennsylvania Hospital.

Institutionally-related foundation is a foundation that qualifies as a nonprofit charitable foundation under section 501(c)(3) of the Internal Revenue Code, and that has in its charter statement of charitable purposes an explicit linkage to Pennsylvania Hospital.

PROCEDURE

1. Uses and disclosures

Pennsylvania Hospital may use, or disclose to a business associate or to an institutionally-related foundation, the following PHI for the purpose of raising funds for its own benefit, without an authorization from the patient:

- a) Demographic information about the patient, including name, address and other contact information, age, gender, and insurance status.
- b) Dates of health care provided to a patient.

Any information about the patient's illness or treatment, or department or physician providing health care may not be used.

2. Opt-Out Notice

All development materials sent to or in relation to any current or past patient of Pennsylvania Hospital must include within the material the following information:

You have the right to request that we not send you any future fundraising materials, and we will make reasonable efforts to honor such a request. If you wish to exercise this right, please send your name and address along with your request to Chief Development Officer, Pennsylvania Hospital, 800 Spruce Street, Philadelphia, PA 19107.

If a recipient of the development materials returns the opt-out notice, Pennsylvania Hospital should make its best effort not to send future development materials or communications to that person. Mailing lists purchased from third parties should be vetted against this opt-out list to assist in this process. When using business associates for fundraising purposes, they should be provided with Pennsylvania Hospital's opt-out list and asked to screen any mailing lists they use against the opt-out list.

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3. Authorization Requirements for Other Uses and Disclosures for Development

The patient whose information is being used or disclosed must expressly and specifically authorize any other use or disclosure not expressly authorized in this policy for development activities for Pennsylvania Hospital. An authorization form approved by Pennsylvania Hospital must be used.

/s/Kathleen Kinslow
Kathleen Kinslow, CRNA, EdD, MBA
Executive Director

05/05/08
Date

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