

## NOTICE OF PRIVACY PRACTICES

- 1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) Handbook establishes the procedures for maintaining and distributing the VHA Notice of Privacy Practices.
- 2. SUMMARY OF MAJOR CHANGES:** This revised Handbook provides the link for the Information Bulletin (IB) 10 163, Notice of Privacy Practices (Appendix A), in compliance with the provisions of the Standards for Privacy of Individually-Identifiable Health Information (Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule), Title 45 Code of Federal Regulations (CFR) Parts 160 and 164.
- 3. RELATED ISSUES:** VHA Directive 1605.
- 4. RESPONSIBLE OFFICE:** The Office of Informatics and Analytics (10P2C1) is responsible for the contents of this Handbook. Questions may be referred to the Director, Information Access and Privacy Office at 704-245-2492.
- 5. RESCISSIONS:** VHA Handbook 1605.04, dated October 14, 2010, is rescinded.
- 6. RECERTIFICATION:** This VHA Handbook is scheduled for recertification on or before the last working day of October 2020.

David J. Shulkin, M.D.  
Under Secretary for Health

**DISTRIBUTION:** E-mailed to the VHA Publications Distribution List on 10/07/2015.

**CONTENTS**

**NOTICE OF PRIVACY PRACTICES**

<b>PARAGRAPH</b>	<b>PAGE</b>
1. Purpose .....	1
2. Background .....	1
3. Scope .....	1
4. Definitions .....	1
5. Responsibilities .....	3
6. Content of the Notice of Privacy Practices .....	5
7. Dissemination of the Notice of Privacy Practices .....	7
8. Providing the Notice of Privacy Practices to Veterans and Beneficiaries .....	8
9. Providing the Notice of Privacy Practices to Non-Veteran Patients .....	8
10. Revision of the Notice of Privacy Practices .....	10
11. References .....	11
<b>APPENDICES</b>	
A. Information Bulletin (IB) 10-163, Notice of Privacy Practices .....	A-1
B. VA Form 10-0483, Acknowledgment of Notice of Privacy Practices .....	B-1

## NOTICE OF PRIVACY PRACTICES

**1. PURPOSE:** This Veterans Health Administration (VHA) Handbook establishes procedures for maintaining and distributing VHA's Notice of Privacy Practices. It includes a revised Information Bulletin (IB) 10-163, Notice of Privacy Practices, which complies with the provisions of the Standards for Privacy of Individually-Identifiable Health Information (Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule), Title 45 Code of Federal Regulations (CFR) Parts 160 and 164.

**2. BACKGROUND:** Under the HIPAA Privacy Rule, VHA, as a covered entity, is required to provide a Notice of Privacy Practices to all Veterans, other beneficiaries who receive health care benefits from VHA, and non-Veteran patients who receive care at a VHA health care facility.

**3. SCOPE:** This Handbook describes the content, dissemination, and revision requirements of the Notice of Privacy Practices (IB 10-163), in compliance with the HIPAA Privacy Rule. The Notice of Privacy Practices: informs Veterans, beneficiaries, and non-Veteran patients about:

a. The ways in which VHA may use and disclose their health information with or without their authorization.

b. Their rights to access their health information and restrictions on certain uses and disclosures their health information.

c. VHA's legal duties to maintain the privacy of their health information.

## 4. DEFINITIONS:

a. **Beneficiary.** A beneficiary is a dependent or survivor of a Veteran who is receiving health care benefits through one of the following programs administered by the Department of Veterans Affairs (VA): the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA); the Spina Bifida Program; or the Program for Children of Women Vietnam Veterans.

b. **Disclosure.** Disclosure is the release, transfer, or provision of; access to; or divulging in any other manner of information outside VHA.

c. **Episode of Care.** An episode of care refers to all treatment rendered in a specified timeframe (i.e., admission, outpatient care visit) for a specific condition or disease.

d. **Health Care Operations.** Health care operations include any of the following activities of the covered entity, to the extent that the activities are related to covered functions:

(1) Conducting quality assessment and improvement activities.

(2) Population-based activities relating to improving health or reducing health care costs, protocol development, and case management, etc.

(3) Reviewing competence or qualifications of health care professionals, to include evaluating practitioner performance, health plan performance, conducting training programs, certification, licensing, or credentialing activities.

(4) Underwriting, premium rating, and other activities relating to the creation, renewal, or replacement of a contract of health insurance or health benefits, and ceding, securing, or placing a contract for reinsurance of risk relating to claims for health care (including stop-loss insurance and excess of loss insurance), provided that the requirements of 45 CFR 164.514(g) are met, if applicable.

(5) Conducting medical reviews, legal services, and auditing functions.

(6) Business planning and development.

(7) Business management and general administrative activities, including management, customer service, and resolution of internal grievances.

e. **Health Information.** Health Information is any information, whether oral or recorded in any form or medium, created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse or health plan that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or payment for the provision of health care to an individual. This encompasses information pertaining to examination, medical history, diagnosis, and findings or treatment, including laboratory examinations, X-rays, microscopic slides, photographs, and prescriptions.

f. **Individual.** For the purpose of this Handbook, an individual is a Veteran, a beneficiary who receives health care benefits from VHA, or a non-Veteran patient who receives care at a VHA health care facility.

g. **Individually-Identifiable Health Information.** Individually Identifiable Health Information (IIHI) is a subset of health information, including demographic information collected from an individual, that: (1) is created or received by a health care provider, health plan, or health care clearinghouse (e.g., a HIPAA-covered entity, such as VHA); (2) relates to the past, present, or future physical or mental condition of an individual, or provision of or payment for health care to an individual; and (3) identifies the individual or where a reasonable basis exists to believe the information can be used to identify the individual. ***NOTE: IIHI does not have to be retrieved by name or other unique identifier to be covered by this Handbook.***

h. **Non-Veteran Patient.** A non-Veteran patient is an individual seeking medical care or treatment at a VHA health care facility who is not enrolled in VHA health care program, such as active duty Service members or anyone provided with medical care for humanitarian purposes (e.g., in a medical emergency).

i. **Payment.** Payment consists of activities undertaken by a health plan to obtain premiums, to determine its responsibility for coverage, or to provide reimbursement for the provision of health care. Payment includes activities undertaken by a health care provider to obtain reimbursement for the provision of health care.

j. **Personnel.** For the purpose of this Handbook, the term personnel includes VHA officers, employees, consultants, without compensation (WOC) workers, contractors, medical students and other trainees, and uncompensated services volunteer workers (excluding patient volunteers) providing a service at the direction of VHA staff.

k. **Protected Health Information.** The HIPAA Privacy Rule defines protected health information (PHI) as IIHI transmitted or maintained in any form or medium by a covered entity, such as VHA.

l. **Record.**

(1) A record is any item, collection, or grouping of information about an individual that is maintained by VHA, including, but not limited to: education; financial transactions; medical history; treatment; and criminal or employment history that contains the name, or an identifying number, symbol, or other identifying particular assigned to the individual, such as finger or voice print or a photograph.

(2) Records include information that is stored in paper records or in electronic format, on computers, minicomputers, personal computers, or word processors.

**NOTE:** *Tissue samples are not considered a record.*

m. **Treatment.** Treatment is the provision, coordination, or management of health care or related services, by one or more health care providers. This includes:

(1) The coordination of health care by a health care provider with a third party.

(2) Consultation between providers relating to a patient.

(3) The referral of a patient for health care from one health care provider to another.

n. **Use.** Use is the sharing, employment, application, utilization, examination, or analysis of information within VHA.

o. **VHA Health Care Facility.** For the purpose of this Handbook, a VHA health care facility is a facility organization within VHA that provides health care or treatment directly to an individual. VHA health care facility includes medical centers, community-based outpatient clinics (CBOCs), Readjustment Counseling Centers (i.e., Vet Centers), and Community Living Centers (CLC).

## 5. RESPONSIBILITIES:

a. **The Under Secretary for Health.** The Under Secretary for Health, or designee, is responsible for ensuring:

(1) Administration-wide privacy policies and procedures for the Notice of Privacy Practices are implemented.

(2) A Notice of Privacy Practices, compliant with the content requirements of the HIPAA Privacy Rule, is created and maintained by VHA (see paragraph 6).

b. **VHA Privacy Office.** The VHA Privacy Office is responsible for:

(1) Drafting the Notice of Privacy Practices (see Appendix A), and ensuring its compliance with content requirements as set forth in the HIPAA Privacy Rule.

(2) Communicating to VHA employees VHA's legal requirements to:

(a) Ensure the privacy of PHI.

(b) Provide notice of VHA's legal obligations and privacy practices with respect to their PHI.

(c) Communicate VHA's responsibility to follow the terms of the Notice of Privacy Practices that is currently in effect.

c. **Medical Facility Director.** The Medical Facility Director is responsible for ensuring:

(1) Notice of Privacy Practices, as outlined in this Handbook, is provided to Veterans, other beneficiaries who receive health care benefits from VHA, and non-Veteran patients who receive care at a VHA health care facility.

(2) VHA personnel use PHI contained in Veteran records, or non-Veteran patient records, maintained by VHA only for purposes covered by the Notice of Privacy Practices.

(3) VHA personnel disclose PHI contained in Veteran records, or non-Veteran patient records, maintained by VHA only for purposes covered by the Notice of Privacy Practices.

(4) VHA personnel disclose PHI contained in records maintained by VHA about Veterans, beneficiaries, or non-Veteran patients only for purposes covered by the Notice of Privacy Practices when appropriate legal authority exists.

(5) Veterans, beneficiaries, or non-Veteran patients are informed of their rights to exercise any of the privacy rights as outlined in the Notice of Privacy Practices related to their PHI maintained in VHA records.

d. **Facility Privacy Officer.** The facility Privacy Officer is responsible for:

(1) Communicating the process for obtaining an acknowledgement form to the administrative clerks, Employee Health staff and to the principal investigators for research studies.

(2) Performing quarterly reviews of acknowledgement forms in encrypted emails from the administrative clerks and performing quarterly reviews of acknowledgement forms from the principal investigators of research studies to validate that the signed acknowledgement forms of non-Veterans. Ensuring that the forms for employees are kept in the Employee Health Office, and ensuring that the other forms for Research studies are kept in the Research Office or are scanned into the non-Veteran's Computerized Patient Record System (CPRS) record. **NOTE:** *If an acknowledgement form was not received an appropriate progress note should have been entered into the non-Veteran's health record or in the Employee Medical File.*

e. **Administrative Clerks, Employee Health Employees , Members Of Research Study Team, and Health Information Management Scanning Staff.** Administrative clerks, members of research study team, and Health Information Management scanning clerks are responsible for:

(1) Obtaining an acknowledgement form from non-Veteran patients or research subjects, and documenting its receipt, in accordance with the process in Paragraph 9.

(2) Employee Health employees must keep a binder with the acknowledgement forms in the Employee Health Office; they are not required to send an encrypted email to the Privacy Officer. The forms must be made available for the Privacy Officer to do a quarterly review.

**6. CONTENT OF THE NOTICE OF PRIVACY PRACTICES:** The Notice of Privacy Practices must meet the content requirements of the HIPAA Privacy Rule, as described in the following paragraphs.

a. **General Requirements.** This notice must contain:

(1) A paragraph, either as a header or otherwise prominently displayed, stating: "THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY."

(2) A statement that VHA is required by law to maintain the privacy of PHI and to provide individuals with notice of VHA's legal obligations and privacy practices with respect to PHI.

(3) A statement that VHA is required to abide by the terms of its Notice of Privacy Practices.

(4) The title and telephone number of a person or office to contact for further information.

(5) The date when the current version of the Notice of Privacy Practices is first in effect. This date may not be earlier than the date on which the Notice of Privacy Practices is printed or otherwise published.

**b. Use and Disclosure of Health Information.**

(1) The Notice of Privacy Practices must state that VHA is permitted to use and disclose an individual's health information for the purposes of treatment, payment, and health care operations without the individual's authorization. Examples must be included in each of the descriptions.

(2) The Notice of Privacy Practices must describe all the other purposes for which VHA is permitted or required to use or disclose an individual's PHI without the individual's authorization. Descriptions must contain sufficient detail so that the individual reading the Notice of Privacy Practices understands the permitted uses and disclosures of the information.

(3) If a use or disclosure described in the Notice of Privacy Practices is prohibited or limited by other applicable law, the description of such use or disclosure must reflect the more stringent law.

(4) The Notice of Privacy Practices must contain a statement that all other uses and disclosures of PHI are to be made only with the individual's written authorization, and that the individual may revoke such authorization.

(5) If VHA intends to engage in any of the following activities, a description of the use and disclosure is required in the Notice of Privacy Practices:

(a) Contacting the individual to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to the individual;

(b) Contacting an individual to raise funds for VHA; or

(c) Disclosing PHI to the sponsor of the plan when the individual is a member of a group health plan, a Health Maintenance Organization (HMO), or a health insurance issuer for payment purposes.

**c. Individual's Rights.** The Notice of Privacy Practices must contain a statement of the individual's rights with respect to PHI and a brief description of how the individual may exercise these rights. The following rights must be described in the Notice of Privacy Practices:

(1) The right to review and receive a copy of the individual's own PHI.

(2) The right to receive confidential communications of PHI.

(3) The right to request an amendment to the individual's own PHI.

(4) The right to receive an accounting of disclosures of the individual's own PHI.



(5) The right to request restrictions on certain uses and disclosures of the individual's own PHI, including a statement that VHA is not required to agree to a requested restriction.

(6) The right of the individual to receive a printed copy of the Notice of Privacy Practices upon request, even if the individual has agreed to receive the Notice of Privacy Practices electronically.

d. **Changes to the Notice of Privacy Practices.** The Notice of Privacy Practices must contain a statement that VHA reserves the right to change the terms of the Notice of Privacy Practices and to make the new Notice of Privacy Practices provisions effective for all PHI VA maintains. A description of how the revised Notice of Privacy Practices is to be disseminated and communicated to the individual must also be outlined in the Notice of Privacy Practices.

e. **Complaints.** The Notice of Privacy Practices must contain a statement that the individual may file a complaint with the facility Privacy Officer, VHA Privacy Office, the Secretary of the Department of Health and Human Services, or the VA Office of Inspector General if the individual feels the individual's privacy rights have been violated. The statement must include a brief description on how the individual may file a complaint and with whom, and that the individual will not be retaliated against for filing a complaint.

f. **Optional Elements.** The following are optional elements that may be included in the Notice of Privacy Practices:

(1) If VHA elects to limit the uses or disclosures that it is permitted to make under the HIPAA Privacy Rule (45 CFR Parts 160 and 164), VHA may describe its more limited uses or disclosures in the Notice of Privacy Practices provided that VHA may not include in its Notice of Privacy Practices a limitation affecting its right to make a use or disclosure that is required by law.

(2) To apply a change to a more limited use and disclosure of PHI, VHA must state in the Notice of Privacy Practices that VHA reserves the right to change its privacy practices.

g. **Language and Style of the Notice of Privacy Practices.** Language and style of the Notice of Privacy Practices must be organized so that the reader can easily understand it, and it must contain short sentences that use an active voice such as "you."

h. **Retention.** In accordance with 45 CFR 164.520( e) VHA must document compliance with the requirements of the Notice of Privacy Practices as required by 164.530(j), by retaining copies of the Notice of Privacy Practices issued by VHA for a minimum of 6 years, or until a new Notice of Privacy Practices has been written. Upon the new effective date, the previous Notice of Privacy Practices may be destroyed by appropriate means.

## 7. DISSEMINATION OF THE NOTICE OF PRIVACY PRACTICES, GENERAL:

a. The Notice of Privacy Practices is available on VA's Web site at: [http://www.va.gov/vhapublications/ViewPublication.asp?pub\\_ID=3048](http://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=3048). Facility personnel can provide a printed copy of the Notice of Privacy Practices or a 'large print' copy of the Notice of Privacy Practices in response to an individual's request. The large print version can be found on the VHA Privacy Officer web site. <http://vaww.vhaco.va.gov/privacy/Laws.htm>.

b. VHA health care facilities are required to post the current Notice of Privacy Practices in a prominent location where it is reasonable to expect that individuals seeking service will be able to read the Notice of Privacy Practices (e.g., Release of Information (ROI) Office, Eligibility Office, Employee Health Office).

c. The Notice of Privacy Practices can be provided to an individual by e-mail if the individual requests it; however, if the e-mail transmission fails, a paper copy of the Notice of Privacy Practices must be provided instead. Therefore, it is recommended that most Notice of Privacy Practices be provided to the individual through the Web site or by a printed copy.

d. The Notice of Privacy Practices must be made available by the VHA health care facility upon request of a Veteran or other non-Veteran patient. All written requests for a copy of the Notice of Privacy Practices should be referred to the facility Privacy Officer, or Health Information Management Service (HIMS). VHA personnel must provide a copy of the Notice of Privacy Practices upon verbal request from the individual. Copies of the Notice of Privacy Practices are available to all VHA health care facilities in one, or both, of the following ways:

(1) VHA must provide a copy of the Notice of Privacy Practices to all of the facilities, thereafter it is the responsibility of the facility to keep copies available for distribution in response to an individual's request.

(2) Facilities may re-stock their copies of Notice of Privacy Practices, by contacting the appropriate Publications Control Officer (PCO). **NOTE:** *The PCO information can be accessed by the PCO portal:*

<https://vaww.vha.vaco.portal.va.gov/sites/VHACOS/10B4/PCO/SitePages/Home.aspx>

## 8. PROVIDING THE NOTICE OF PRIVACY PRACTICES TO VETERANS AND BENEFICIARIES:

a. VHA must provide a copy of its Notice of Privacy Practices to all Veterans enrolled in VHA health care, and to all Veterans who receive care or treatment from VHA but who are not required to enroll.

(1) A Notice of Privacy Practices must be included with other enrollment information sent to newly enrolled Veterans by the Health Eligibility Center (HEC).

(2) A Notice of Privacy Practices must be provided to any Veteran who requests medical treatment or care at the time they apply for enrollment in person at a VHA health care facility.

b. VHA must provide a copy of the Notice of Privacy Practices to any beneficiary of a VHA program that provides health care benefits to individuals other than Veterans (e.g., CHAMPVA, Spina Bifida, Children of Women Vietnam Veterans). The Health Administration Center (HAC) must ensure that beneficiaries of those programs receive a Notice of Privacy Practices upon enrollment.

c. VHA must notify currently enrolled Veterans and beneficiaries of the availability of the Notice of Privacy Practices and directions on how to obtain a copy no less than once every 3 years.

d. No less than once every 3 years, VHA must prominently post its Notice of Privacy Practices on its public website. This includes posting it on the website(s) for any programs that provide health care benefits to individuals other than Veterans.

## **9. PROVIDING THE NOTICE OF PRIVACY PRACTICES TO NON-VETERAN PATIENTS:**

a. VHA must provide a copy of the Notice of Privacy Practices to all non-Veteran patients (e.g., active duty personnel, employees seen in Employee Health or those seeking care in humanitarian circumstances) receiving care or treatment at a VHA health care medical facility or non-Veteran research subjects enrolled in an approved VHA research study.

(1) VHA health care facilities must provide the Notice of Privacy Practices at the episode of care when the non-Veteran patient checks in for their treatment or care (with or without an appointment), attends their first research visit associated with an episode of care, is seen in Employee Health or when the non-Veteran patient is admitted to the VHA health care facility. If the non-Veteran patient is seen in the Emergency Room Department, the Notice of Privacy Practices needs to be provided prior to the completion of the episode of care. If not, a note is to be written in the CPRS or if the patient is an employee, in the employee medical file documenting the reason the Notice of Privacy Practices was not given.

(2) Pharmacy medication pick-up, laboratory appointments and Tuberculosis screening, are not considered episodes of care; therefore, a Notice of Privacy Practices is not required to be provided to the non-Veteran patient or non-Veteran research subject during these appointments. Employee Health visits will require the Notice of Privacy Practices be given each time the employee is seen for treatment such as flu shots, treatment for work-related illness or injury, etc.

b. The non-Veteran patient must acknowledge receipt of the Notice of Privacy Practices.

(1) VHA must make a good faith effort to obtain a written acknowledgment (use VA Form 10-0483, Acknowledgement of the Notice of Privacy Practices) of receipt of the Notice of Privacy Practices as described in paragraph d(1) below. This acknowledgment is required to be obtained at the first episode of care within a 24 hour period.

(2) In situations where the non-Veteran has a personal representative, the Notice of Privacy Practices may be given to, and the written acknowledgment obtained from, the personal representative.

c. The process for obtaining an acknowledgement for the receipt of the Notice of Privacy Practices is as follows:

(1) Acknowledgement of receipt of the Notice of Privacy Practices is accomplished when a non-Veteran patient is admitted or checked-in for an appointment or attends their first research visit associated with an episode of care. In an emergency treatment situation, the Notice of Privacy Practices is given and the acknowledgement of receipt obtained as soon as reasonably practical after the emergency treatment situation has ended. **NOTE:** *Paragraph 8b does not apply to Veterans as they have already received their copy of the Notice of Privacy Practices in the mail according to paragraph 8a.*

(2) The non-Veteran patient, or non-Veteran research subject, is given the Notice of Privacy Practice (see Appendix A).

(3) The administrative clerk for the area where they work, a member of the research team for the research study, or an Employee Health staff member, is responsible for having the acknowledgement page signed and dated by the non-Veteran patient or non-Veteran research subject (See Appendix B).

(4) After the non-Veteran has signed the acknowledgement, the administrative clerk for the area where they work, or a member of the research study team, must send an encrypted email to the facility Privacy Officer with the full name of the non-Veteran and the non-Veteran's last four of the social security number.

(5) Because Employee Health may see several employees on a particular day, an Employee Health staff member is not required to send an encrypted email to the Privacy Officer, but must keep the completed forms available in a binder for quarterly reviews.

(6) The administrative clerk for the area where they work, or a member of the research study team, must send the signed acknowledgment page to the scanning department in HIM. An HIM staff member will scan the acknowledgment page into the non-Veteran's CPRS record as "Notice of Privacy Practices Acknowledgment" under the administrative tab.

(7) In a research situation, a member of the research team must maintain a copy of the acknowledgement in the subject's research record.

(8) In an Employee Health situation, an Employee Health staff member must maintain a copy of the acknowledgment form in a binder which is kept in the Employee Health office.

d. The process for writing a CPRS note when there is not an acknowledgement form for the receipt of the Notice of Privacy Practices is as follows:

(1) If an acknowledgement of the Notice of Privacy Practices is not received from the non-Veteran patient, an administrative note must be entered into CPRS or if an employee, the employee medical record indicating the good faith efforts made to obtain the written acknowledgement and the reason(s) why the acknowledgment was not received.

(2) The administrative note to be placed in CPRS needs to be written by the administrative clerk responsible for registering the non-Veteran patient, or by a member of the research team who also obtains the non-Veteran research subject's informed consent or if an employee, in employee health .

## 10. REVISION OF THE NOTICE OF PRIVACY PRACTICES:

a. The Notice of Privacy Practices must be promptly revised and re-distributed whenever there is a material change to:

- (1) VHA's use or disclosure of PHI.
- (2) The individual's privacy rights.
- (3) VHA's legal duties with regards to protecting the privacy of health information.
- (4) Other privacy practices stated in the Notice of Privacy Practices.

**NOTE:** *Except when required by law, a material change to any term of the Notice of Privacy Practices may not be implemented prior to the effective date of the Notice of Privacy Practices in which such material change is reflected.*

b. Within 60 days of a material revision, the Notice of Privacy Practices must be distributed to all Veterans and their beneficiaries who are enrolled for VHA services, through the United States Postal Service, or other VA-approved process. The Notice of Privacy Practices must be made available upon request of an individual and must be posted where it is reasonable to expect individuals seeking service from a VHA health care facility are able to read the Notice of Privacy Practices.

## 11. REFERENCES:

- a. VHA Directive 1605, VHA Privacy Program.
- b. VHA Handbook 1605.1, Privacy and Release of Information.
- c. HIPAA Privacy Rule, Title 45 CFR parts 160 and 164.

APPENDIX A

**INFORMATION BULLETIN (IB) 10-163, NOTICE OF PRIVACY PRACTICES**

The Information Bulletin (IB) 10-163, Notice of Privacy Practices can be found at the following website: [http://www.va.gov/vhapublications/ViewPublication.asp?pub\\_ID=3048](http://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=3048)

**NOTE:** *This is an internal VA Website not available to the public.*

VA FORM 10-0483,

**ACKNOWLEDGEMENT OF THE NOTICE OF PRIVACY PRACTICES**

A copy of Department of Veterans Affairs (VA) Form 10-0483, Acknowledgement of the Notice of Privacy Practices, form can be found on the VA Forms web site at:

<http://vaww.va.gov/vaforms/medical/pdf/vha-10-0483-fill.pdf>. **NOTE:** *This is an internal VA Website not available to the public.*