

NOTICE OF INFORMATION PRACTICES

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY.*

*(*Please note, we reserve the right to revise our practices with respect to PHI and to amend this notice. A revised or current notice of the Community Anticoagulation Therapy Clinic's privacy practices is available at the front desk.)*

Protected Health Information (PHI). While receiving care from our facility, information regarding your medical history, treatment, and payment for your health care may be originated and/or received by us. Information which can be used to identify you and which relates to your medical care or your payment for medical care is protected by state and federal law ("Protected Health Information").

Your Rights. Federal law grants you certain rights with respect to your Protected Health Information (PHI). Specifically, you have the right to:

- Receive notice of our policies and procedures used to protect your PHI;
- Request that certain uses and disclosures of your PHI be restricted; *provided, however,* if we may release the information without your consent or authorization, we have the right to refuse your request;
- Access to your PHI; *provided, however,* the request must be in writing and may be denied in certain limited situations;
- Request that your PHI be amended;
- Obtain an accounting of certain disclosures by us of your PHI for the past six years;
- Revoke any prior authorizations or consents for use or disclosure of PHI, except to the extent that action has already been taken; and
- Request communications of your PHI are done by alternative means or at alternative locations.

Our Responsibilities. Federal law also imposes certain obligations and duties upon us with respect to your PHO. Specifically, we are required to:

- Provide you with notice of our legal duties and our facility's policies regarding the use and disclosure of your PHI;
- Maintain the confidentiality of your PHI in accordance with state and federal law;
- Honor your requested restrictions regarding the use and disclosure of your PHI unless under the law we are authorized to release your PHI without your authorization or consent, in which case you will be notified within a reasonable period of time;

- Allow you to inspect and copy your PHI during our regular business hours;
- Act on your request to amend PHI within sixty (60) days and notify you of any delay which would require us to extend the deadline by the permitted thirty (30) day extension;
- Accommodate reasonable requests to communicate PHI by alternative means or methods; and
- Abide by the terms of this notice.

How Your Protected Health Information May be Used and Disclosed.

Generally, your PHI may be used and disclosed by us only with your express written authorization. However, there will be some exceptions to this general rule.

Treatment, Payment, or Health Care Operations.

Treatment Purposes. We may use or disclose your PHI for treatment purposes; *provided, however,* we must first obtain your consent to do so. During your care at our facility, it may be necessary for various personnel, including, but not limited to, physicians, nurses, lab technicians, or medical students, involved in your care to have access to your PHI in order to provide you with quality care. For example, your physician may need to know which medications you are currently taking before prescribing additional medications. It may be necessary for the physician to inform the nurses on staff of the medications you are taking so they can administer the medications and monitor any possible side effects.

Situations may also arise when it is necessary to disclose your PHI to individuals outside our facility who may also be involved in your care. For example, if you are a resident in a nursing facility, it may be necessary for your physician to disclose medications prescribed by him/her so that they can be appropriately administered by the nursing facility and side effects may be monitored.

Payment Purposes. Your PHI may also be used or disclosed with your consent for payment purposes. It is necessary for us to use or disclose PHI so that treatment and services provided by us may be billed and collected from you, your insurance company, or other third party payor. Bills requesting payment will usually include information which identifies you, your diagnosis, and any procedures or supplies used. It may also be necessary to release PHI to obtain prior approval or to assist in Medical Necessity review from your health insurance.

Health Care Operations. With your consent, your PHI may be used for facility operations, which are necessary to ensure our facility provides the highest quality of care. For example, your PHI may be used for learning or quality assurance purposes. We may also remove information which could identify you from your record so as to prevent others from learning who the specific patients are.

Although your consent is needed before we use or disclose PHI for treatment, payment or health care operations, if an emergency situation exists, and obtaining your consent is not practicable, we may use or disclose PHI to the extent necessary during the emergency.

Although you have the right to refuse to consent to the use or disclosure of PHI for treatment, payment or health care operations, or to revoke such a consent at any time, it would be impossible for our facility to render you the highest quality of care without the right to use or disclose your PHI in this manner. Therefore, in the absence of an emergency medical condition, we reserve the right to condition your care, on your consent to the use or disclosure of PHI for treatment, payment or health care operations.

Notification. Unless you have informed us otherwise, your PHI may be used or disclosed by us to notify or assist in notifying a family member or other person responsible for your care.

Communication with Family Members and Caregivers. With your permission, we will release PHI to a family member, relative or close personal friend who is involved in your care to the extent necessary for them to participate in your care.

Marketing and Fundraising Activities. We may use your PHI for the purpose of contacting you regarding health-related benefits and services we feel may be of interest to you. In addition, you may also be contacted as part of a fund-raising effort. If you do not wish to be contacted for marketing or fundraising activities, you may contact the Marketing Department to have your name removed from marketing or fundraising lists.

Research Purposes. In some instances, your PHI may be used or disclosed for research purposes. All research projects which use PHI are subject to a special approval process which will, among other things, evaluate the precautions used to protect patient medical information. In many cases, information which identifies you as the patient will be removed.

Special Circumstances. Situations may arise which warrant us to use or disclose PHI without your consent or authorization. The law specifically allows us to use or disclose PHI without your consent or authorization in the following special circumstances:

Public Health Activities. We are allowed to use or disclose your PHI for public health activities and purposes. Examples of public health activities which would warrant the use or disclosure of your Protected Health Information include:

- Preventing or controlling disease, injury or disability;
- Reporting births or deaths;
- Reporting the abuse or neglect of a child or dependent adult;
- Reporting reactions to medications or problems with products; or
- Notifying individuals exposed to a disease who may be at risk for contracting or spreading the disease.

Health Oversight Activities. Your PHI may be used or disclosed to a health oversight agency for activities authorized by law. Examples of health oversight activities include audits, investigations, inspections or judicial/administrative proceedings which

you are not the subject of. In most cases, the oversight activity will be for the purpose of overseeing the care rendered by our facility or our facility's compliance with certain laws and regulations.

Judicial and Administrative Proceedings. If you are involved in a lawsuit or other administrative proceeding, we may release your PHI in response to a court or administrative order requesting the release. In some instances, we may also release PHI pursuant to a subpoena or discovery request but only if efforts have been made by the requestor to provide you with notice of the request and you have failed to object or the objection was resolved in favor of disclosure, or in the alternative, the requestor has obtained a protective order protecting the requested information.

Victims of Abuse of Neglect. Other than child and dependent adult abuse which is covered under public health activities, we may use or disclose your Protected Information to a protective services or social services agency or other similar government authority, if we reasonably believe you have been the victim of abuse, neglect or domestic violence as long as you agree to such disclosure and we feel it is necessary to prevent serious harm to you or other individuals. If you are incapacitated and unable to agree to such a disclosure, we may release your Protected Information for this purpose but only if failure to release it would materially and adversely effect a law enforcement activity and the information will not be used, in any way, against you.

Law Enforcement. We may also release your Protected Information to a law enforcement official for the following purposes:

- Pursuant to a court order, warrant, subpoena/summons, or administrative request;
- Identifying or locating a suspect, fugitive, material witness or missing person;
- Regarding a crime victim, but only if the victim consents or the victim is unable to consent due to incapacity and the information is needed to determine if a crime has occurred, non-disclosure would significantly hinder the investigation, and disclosure is in the victim's best interest.
- Regarding a decedent, to alert law enforcement that the individual's death was caused by suspected criminal conduct; or
- By emergency care personnel if the information is necessary to alert law enforcement of a crime, the location of a crime, or characteristics of the perpetrator.

Specialized Government Functions. Your PHI may be used or disclosed for a variety of government functions subject to some limitations. These government functions include:

- Military and veterans activities;
- National security and intelligence activities;
- Protective service of the President and others;
- Medical suitability determinations for Department of State officials;

- Correctional institutions and law enforcement custodial situations; or
- Provision of public benefits.

Organ Donation. Your PHI may be used or disclosed by us to entities engaged in the procurement, banking or transplantation of organs, eyes or tissues for the purpose of facilitating such donation and transplantation.

Workers' Compensation. We are allowed to disclose your PHI as authorized and to the extent necessary to comply with laws relating to workers' compensation or other programs providing benefits for work-related injuries or illness without regard to fault.

Important Contact Information. This notice has been provided to you as a summary of how we will use your Protected Health Information and your rights with respect to your Protected Health Information. If you have any questions or for more information regarding your Protected Health Information, please contact reception at the front desk.

If you believe your privacy rights have been violated, you may file a complaint with our office by contacting the QI Department at 319-399-2096. You may also file a complaint with the Secretary of Health and Human Services. There will be no retaliation for the filing of a complaint.

Effective Date. This notice becomes effective on January 1, 2006. Please note, we reserve the right to revise this notice at any time. A revised or a current notice of the CAT Clinic's privacy practices is available at the front desk.