

The Wabash General Hospital

Privacy Notice

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY THIS BECAME EFFECTIVE SEPTEMBER 23, 2013

UNDERSTANDING YOUR HEALTH RECORD/INFORMATION

Each time you visit a hospital, physician, or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination, test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment.
- Means of communication among the many health professionals who contribute to your care.
- Legal document describing the care you received.
- Means by which you or a third-party payer can verify that services billed were actually provided.
- Tool in educating health professionals.
- Source of data for medical research.
- Source of information for public health officials charged with improving the health of the nation.
- Source of data for facility planning and marketing.

The Wabash General Hospital

Privacy Notice

- Tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understanding what is in your record and how your health information is used helps you to:

- Ensure its accuracy.
- Better understand who, what, when, where, and why others may access your health information.
- Make more informed decisions when authorizing disclosure to others.

YOUR HEALTH INFORMATION RIGHTS

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information provided by 45 CFR 164.522. We must comply with your requested restriction if you request restriction of a disclosure to your health plan for purposes of carrying out payment or healthcare operations, and the information subject to the restriction relates solely to a healthcare item or service for which we have been paid

The Wabash General Hospital

Privacy Notice

out of pocket in full. Otherwise, we are not required to agree to your requested restriction.

- Obtain a paper copy of the notice of information practices upon request.
- Inspect and copy your health record as provided for in 45 CFR 164.524. To inspect and copy your health records, you must submit your request in writing to the Health Information Management Department. If you request a copy of the information, we may charge a fee for the cost of copying, mailing or other supplies associated with your request. If we maintain your health information in an electronic health record, you have the right to obtain a copy in an electronic format, and to direct us to transmit a copy in an electronic format directly to another entity or person of your choice. We may charge a fee for our labor cost in responding to your request for records in electronic format. In certain circumstances we may deny your request to access your health information, and you may request that we reconsider our denial. Depending on the reason for the denial, another licensed health care professional chosen by us may review your request and the denial.

The Wabash General Hospital

Privacy Notice

- Amend your health record as provided in 45 CFR 164.528. You have the right to request an amendment for as long as the information is kept by or for the hospital. To request an amendment, your request must be made in writing and submitted to the Health Information Management Department. In addition, you must provide a reason that supports your request. We may deny your request if you ask us to amend information that was not created by us, that is not kept by us, that is not part of the information that you would be permitted to inspect and copy, or that is not accurate and complete.
- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528. The accounting will not include disclosures made in carrying out your treatment, payment or healthcare operations activities; disclosures made with your written authorization; and other disclosures excluded by law. To request an accounting of disclosures, you must submit your request in writing to the Health Information Management Department; our request must state a time period that may not be longer than six years prior to the date of the request.

The Wabash General Hospital

Privacy Notice

- Request communications of your health information by alternative means or at alternative locations.
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.
- Be notified if we or one of our business associates become aware of a breach of your unsecured health information.

OUR RESPONSIBILITIES

This organization is required to:

- Maintain the privacy of your health information.
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- Abide by the terms of this notice.
- Notify you if we are unable to agree to a requested restriction.
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

The Wabash General Hospital

Privacy Notice

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will present a revised notice upon your next visit to our facility and the updated version will be posted on the web-site.

FOR MORE INFORMATION OR TO REPORT A PROBLEM

If you have a question and would like additional information, you may contact the HIPAA Privacy Officer at (618)262-8621 ext. 6295.

If you believe your privacy rights have been violated, you can file a complaint with the HIPAA Privacy Officer. The complaint needs to be no longer than one page and this needs to be sent to the HIPAA Privacy Officer Wabash General Hospital 1418 College Drive Mt. Carmel, Illinois 62863. You may also file a complaint with the Secretary of Health and Human Services. There will be no retaliation for filing a complaint.

EXAMPLES OF DISCLOSURES FOR TREATMENT, PAYMENT AND HEALTH OPERATIONS

The Wabash General Hospital

Privacy Notice

We will use your health information for treatment.

For example: Information obtained by a nurse, physician, or other member of your healthcare team will be recorded in our record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her expectation of the members of your healthcare team. Members of your healthcare team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment. We will also provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you once you're discharged from this hospital.

We will use your health information for payment.

For example: A bill may be sent to your or a third-party payer. The information accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.

We will use your health information for regular health operations.

The Wabash General Hospital

Privacy Notice

For example: Members of medical staff, the risk or performance improvement coordinator, or members of the performance improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of healthcare and service we provide.

Business Associates: There are some services provided in our organization through contracts with business associates. Examples include physician services in the emergency department and radiology, and certain laboratory test. When these services are contracted, we may disclose your health information to our business associates so they can perform the job we've asked them to do and bill you and your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Directory: Unless you notify us that you object, we will use your name, location in the facility, general condition, and religious affiliation for directory purposes. This information

The Wabash General Hospital

Privacy Notice

may be provided to members of the clergy, and except for religious affiliations, to other people who ask for you by name.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, our location and general condition.

Communications with family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend, or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

Research: We may disclose information to researchers when their research has been approved by and institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Coroners, Medical Examiners, Funeral Directors: We may disclose your health information to coroners or medical examiners for the purpose of identifying a deceased person or

The Wabash General Hospital

Privacy Notice

determining the cause of death, and to funeral directors as necessary to carry out their duties.

Organ Procurement Organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or translations of organs for the purpose of tissue donation and transplant.

Fund raising: We may contact you as part of fund-raising effort. If you do not want us to contact you as part of a fund-raising effort, you may opt out by notifying us in writing at Wabash General Hospital, Attn: Director of Foundation and Marketing, 1418 College Drive, Mt. Carmel, Illinois 62863.

Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, products and product defects, or post marketing surveillance information to enable product recalls, repairs or replacements.

Workers compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply

The Wabash General Hospital

Privacy Notice

with laws relating to workers compensation or other similar programs established by law.

Public Health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury or disability.

Correctional institutions: Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.

Required by Law: We may disclose your health information for law enforcement purposes and as required by state or federal law. For example, the law may require us to report instances of abuse, neglect or domestic violence; to report certain injuries such as gunshot wounds; or to disclose health information to assist law enforcement in locating a suspect, fugitive, material witness or missing person. In additions, we must provide your health information to comply with an order in a legal or administrative proceeding. Finally, we may be required to provide your health information in response to a subpoena, discovery request or other lawful process, but only if efforts

The Wabash General Hospital

Privacy Notice

have been made, by us or the requesting party, to contact you about the request or to obtain an order to protect the requested health information.

Health Oversight Activities: We may disclose your health information to a health oversight agency for oversight activities authorized by law, including audits; civil, administrative, or criminal investigations; inspections; licensure or disciplinary actions; civil, administrative, or criminal proceedings or actions; or other activities necessary for appropriate oversight of the health care system, government benefit programs or compliance with civil rights laws.

Serious Threat to Health or Safety: We may disclose your health information if we believe it is necessary to avoid a serious threat to the health and safety of you or the public.

Specialized Government Activities: If you are active military or a veteran, we may disclose your health information as required by military command authorities or for benefit eligibility determinations. We may also be required to disclose your health information to authorized federal officials for the

The Wabash General Hospital

Privacy Notice

conduct of intelligence, national security activities, or protective services for the President or other national leaders.

Disaster Relief: Unless you object, we may disclose your health information to a governmental agency or private entity (such as FEMA or Red Cross) assisting with disaster relief efforts.

DISCLOSURES REQUIRING WRITTEN AUTHORIZATION

- *Not Otherwise Permitted:* In any other situation not described in this Notice, we may not disclose your health information without your written authorization.
- *Psychotherapy Notes:* We must receive your written authorization to disclose psychotherapy notes, except for certain treatment, payment or health care operations activities.
- *Marketing and Sale of PHI:* We must receive your written authorization for any disclosure which is a sale of health information.