

Notice of Privacy Practices

for Protected Health Information

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.

USE AND DISCLOSURE OF HEALTH INFORMATION

Hospice of Lenawee may use your health information for purposes of providing you treatment, obtaining payment for your care and conducting health care operations. Your health information will only be used or disclosed after Hospice of Lenawee has obtained your written or verbal consent. Hospice of Lenawee has established policies to guard against unnecessary disclosure of your health information.

The following is a summary of the circumstances under which and purposes for which your health information may be used and disclosed:

To Provide Treatment: Hospice of Lenawee may use your health information to coordinate care within Hospice of Lenawee and with others involved in your care, such as your physician, members of the Hospice of Lenawee interdisciplinary team and other health care professionals who have agreed to assist Hospice of Lenawee in coordinating your care. For example, physicians involved in your care will need information about your symptoms in order to prescribe appropriate medications. Hospice of Lenawee also may disclose your health care information to individuals outside of Hospice of Lenawee involved in your care including family members, clergy whom you have designated, pharmacists, suppliers of medical equipment or other health care professionals that Hospice of Lenawee uses to coordinate your care.

To Obtain Payment: Hospice of Lenawee may include your health information in invoices to collect payment from third parties for the care you receive from Hospice of Lenawee. For example, Hospice of Lenawee may be required by your health insurer to provide information regarding your health care status so that the insurer will reimburse you or Hospice of Lenawee. Hospice of Lenawee also may need to obtain prior approval from your insurer and may need to explain to the insurer your need for hospice care and the services that will be provided to you.

To Conduct Health Care Operations: Hospice of Lenawee may use and disclose health information for its own operations in order to facilitate the function of Hospice of Lenawee and as necessary to provide quality care to all of Hospice of Lenawee patients. Health care operations include such activities as:

- Quality assessment and improvement activities
- Activities designed to improve health care or reduce health care costs
- Protocol development, case management and care coordination
- Contacting health care providers and patients with information about treatment alternatives and other related functions that do not include treatment

- Professional review and performance evaluation
- Training programs including those in which students, trainees or practitioners in health care learn under supervision
- Training of non-health care professionals
- Accreditation, certification, licensing, or credentialing activities
- Review and auditing, including compliance reviews, medical reviews, legal services, and compliance programs
- Business planning and development including cost management and planning related analysis and formulary development
- Business management and general administrative activities of Hospice of Lenawee
- Fundraising and certain marketing activities for the benefit of Hospice of Lenawee For example, Hospice of Lenawee may use your health information to evaluate its staff performance, combine your health information with other Hospice patients in evaluating how to more effectively serve all Hospice patients, disclose your health information to Hospice staff and contracted personnel for training purposes, use your health information to contact you as a reminder regarding a visit to **you**, or contact **you** or your family as part of general fundraising and community information mailings (unless you tell us you do not want to be contacted).

For Fundraising Activities: Hospice of Lenawee may use information about you including your name, address, phone number and the dates you received care at Hospice of Lenawee in order to contact you **or** your family to raise money for Hospice of Lenawee. If you do not want Hospice of Lenawee to contact you or your family, notify the Director of Development and indicate that you do not wish to be contacted. *The following is a summary of the circumstances under which Federal privacy rules allow Hospice of Lenawee to use or disclose your health information without your consent or authorization.*

When Legally Required: Hospice of Lenawee will disclose your health information when it is required to do so by any Federal, State, or local law.

When There Are Risks to Public Health: Hospice of Lenawee may disclose your health information **for** public activities and purposes in order to:

- Prevent, control, **or** report disease, injury **or** disability, report vital events such as death and to conduct public health surveillance, investigations and interventions.
- Report adverse events, product defects, **to track products or enable** product recalls, repairs and replacements and to conduct post-marketing surveillance and compliance with requirements of the Food and Drug Administration.
- Notify a person who has been exposed to a communicable disease or who may be at **risk of** contracting or spreading a disease.
- Notify an employer about an individual who is a member of the workforce as legally required.

To Report Abuse, Neglect or Domestic Violence: Hospice of Lenawee is allowed to notify government authorities if Hospice of Lenawee believes a patient is the victim of abuse, neglect

or domestic violence. Hospice of Lenawee will make this disclosure only when specifically required or authorized by law or when the patient agrees to the disclosure.

To Conduct Health Oversight Activities: Hospice of Lenawee may disclose your health information to a health oversight agency for activities including audits, civil administrative or criminal investigations, inspections, licensure or disciplinary action. Hospice of Lenawee, however, may not disclose your health information if you are the subject of an investigation and your health information is not directly related to your receipt of health care or public benefits.

In Connection With Judicial and Administrative Proceedings: Hospice of Lenawee may disclose your health information in the course of any judicial or administrative proceeding in response to an order of a court or administrative tribunal as expressly authorized by such order or in response to a subpoena, discovery request or other lawful process, but only when Hospice of Lenawee makes reasonable **efforts** to either notify you about the request or to obtain an order protecting your health information.

For Law Enforcement Purposes: Hospice of Lenawee may disclose your health information to a law enforcement official for law enforcement purposes as follows:

- As required by law for reporting of certain types of wounds or other physical injuries pursuant to the court order, warrant, subpoena **or** summons **or similar** process
- For the purpose of identifying or locating a suspect, fugitive, material witness **or** missing person
- Under certain limited circumstance, when you are the victim of a crime
- To a law enforcement official if Hospice of Lenawee has a suspicion that your death was the result of criminal conduct including criminal conduct at Hospice of Lenawee
- In an emergency in order to report a crime

To Coroners and Medical Examiners: Hospice of Lenawee may disclose your health information to coroners and medical examiners for purposes of determining your cause of death or for other duties, as authorized by law.

To Funeral Directors: Hospice of Lenawee may disclose your health information to funeral directors consistent with applicable law and if necessary, to carry out their duties with respect to your funeral arrangements. If necessary, to carry out their duties, Hospice of Lenawee may disclose your health information prior to and in reasonable anticipation of your death.

For Organ, Eye or Tissue Donation: Hospice of Lenawee may use or disclose your health information to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs, eyes or tissue for the purpose of facilitating the donation and transplantation.

For Research Purposes: Hospice of Lenawee may, under very select circumstances, use your health information for research. Before Hospice of Lenawee discloses any of your health information for such research purposes, the project will be subject to an extensive approval process. Hospice of Lenawee will ask your permission if any researcher will be granted

access to your identifiable health information.

In the Event of a Serious Threat or Safety: Hospice of Lenawee may, consistent with applicable law and ethical standards of conduct, disclose your health information if Hospice of Lenawee, in good faith, believes that such disclosure is necessary to prevent or lessen a serious and imminent threat to your health or safety or to the health and safety of the public.

For Specified Government Functions: In certain circumstances, the Federal regulations authorize Hospice of Lenawee to use or disclose your health information to facilitate specified government functions relating to military and veterans, national security and intelligence activities, protective services for the President and others, medical suitability determinations and inmates and law enforcement custody. **For Worker's Compensation:** Hospice of Lenawee may release your health information for worker's compensation or similar programs.

AUTHORIZATION TO USE OR DISCLOSE HEALTH INFORMATION

Other than as stated above, Hospice of Lenawee will not disclose your health information other than with your written authorization. If you or your representative authorizes Hospice of Lenawee to use or disclose your health information, you may revoke that authorization in writing at any time.

YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION

You have the following rights regarding your health information that Hospice of Lenawee maintains:

- **Right to request restrictions.** You may request restrictions on certain uses and disclosures of your health information. You have the right to request a limit on Hospice of Lenawee's disclosure of your health information to someone who is involved in your care or the payment of your care. However, Hospice of Lenawee is not required to agree to your request. If you wish to make a request for restrictions, please contact the Director of Patient Care.
- **Right to receive confidential communications.** You have the right to request that Hospice of Lenawee communicate with you in a certain way. For example, you may ask that Hospice of Lenawee only conduct communications pertaining to your health information with you privately with no other family members present. If you wish to receive confidential communications, please contact the Director of Patient Care. Hospice of Lenawee will not request that you provide any reasons for your request and will attempt to honor your reasonable requests for confidential communications.
- **Right to inspect and copy your health information.** You have the right to inspect and copy your health information, including billing records. A request to inspect and copy records containing **your** health information may be made to the Director of Patient Care. If you request a copy of your health information, Hospice of Lenawee may charge a reasonable fee for copying and assembling **costs** associated with your request.
- **Right to amend health care information.** If you or your representative believes that your health information records are incorrect or incomplete, you may request that Hospice of Lenawee amend the records. That request may be made as long as the

information is maintained by Hospice of Lenawee. A request for an amendment of records must be made in writing to the Director of Patient Care. Hospice of Lenawee may deny the request if it is not in writing or does not include a reason for the amendment. The request also may be denied if your health information records were not created by Hospice of Lenawee, if the records you are requesting are not part of Hospice of Lenawee's records, if the health information you wish to amend is not part of the health information you or your representative are permitted to inspect and copy, or if, in the opinion of Hospice of Lenawee, the records containing your health information are accurate and complete.

- **Right to an accounting.** You or your representative have the right to request an accounting of disclosures of **your** health information made by Hospice of Lenawee for any reason other than for treatment, payment or health operation. The request for an accounting must be made in writing to the Director of Patient Care. The request should specify the time period for the accounting starting on or after April 14, 2003. Accounting requests may not be made for periods of time in excess of six (6) years. Hospice of Lenawee would provide the first accounting you request during any 12-month period without charge. Subsequent accounting requests may be subject to a reasonable **cost-based** fee.
- **Right to a paper copy of this notice.** You or your representative has a right to a separate paper copy of this Notice at any time even if you or your representative has received this Notice previously. To obtain a separate paper copy, please contact the Director of Patient Care. A copy of the current version of the Notice of Privacy Practices may also be obtained at Hospice of Lenawee's web site at www.hospiceoflenawee.org.

DUTIES OF HOSPICE OF LENAWEE

Hospice of Lenawee is required by law to maintain the privacy of your health information and to provide to you and your representative this Notice of its duties and privacy practices. Hospice of Lenawee is required to abide by the terms of this Notice as may be amended from time to time. Hospice of Lenawee reserves the right to change the terms of its Notice and to make the new Notice provisions effective for all health information that it maintains. If Hospice of Lenawee changes its Notice, Hospice of Lenawee will provide a copy of the revised Notice to you or your appointed representative. You or your personal representative has the right to express complaints to Hospice of Lenawee and to the Secretary of DHHS if **you or** your representative believes that your privacy rights have been violated. Any complaint to Hospice of Lenawee should be made in writing to the Staff Educator. Hospice of Lenawee encourages **you** to express any concerns you may have regarding the privacy of your information. You will not be retaliated against in any way for filing a complaint.

CONTACT PERSON

Hospice of Lenawee has designated the Staff Educator as its contact person for all issues regarding patient privacy and your rights under the Federal privacy standards. **IF YOU HAVE ANY QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT US.**

EFFECTIVE DATE: This Notice is effective April 14, 2003; Revised August 2020