

## NOTICE OF PRIVACY PRACTICES

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 Yuma may use your health information for the purpose of providing you treatment, obtaining payment for your care, and conducting health care operations. Your health information may be used or disclosed only after Hospice of Yuma has obtained your written consent. Hospice of Yuma has established a policy to guard against unnecessary disclosure of your health information.

**THE FOLLOWING IS A SUMMARY OF THE CIRCUMSTANCES UNDER WHICH AND PURPOSE FOR WHICH YOUR HEALTH INFORMATION MAY BE USED AND DISCLOSED AFTER YOU HAVE PROVIDED YOUR WRITTEN CONSENT:**

**To Provide Treatment.** Hospice of Yuma may use your health information to coordinate care within Hospice of Yuma and with others involved in your care, such as your attending physician, members of Hospice of Yuma interdisciplinary team and other health care professionals who have agreed to assist Hospice of Yuma in coordinating care. For example, physicians involved in your care will need information about your symptoms to prescribe appropriate medications. Hospice of Yuma also may disclose your health care information to individuals outside of Hospice of Yuma 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 Yuma uses to coordinate your care.

**To Obtain Payment.** Hospice of Yuma may include your health information in invoices to collect payment from third parties for the care you receive from Hospice of Yuma. For example, Hospice of Yuma may be required by your health insurer to provide information regarding your health care status so that the insurer will reimburse Hospice of Yuma. Hospice of Yuma 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 Yuma may use and disclose health care information for its own operations to facilitate the function of Hospice of Yuma and as necessary to provide quality care to all of Hospice of Yuma's patients. Health care operations include such activities as:

- Quality assessment and improvement activities.
- Activities designed to improve health 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 healthcare 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 analyses and formulary development.
- Business management and general administrative activities of Hospice of Yuma.
- Fundraising for the benefit of Hospice of Yuma and certain marketing activities.

For example Hospice of Yuma 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 Yuma may use information about you including your name, address, phone number and the dates you received care to contact you or your family with fund-raising requests for Hospice. If you wish to have your name removed from future fund-raising request lists, please or call our **Fund Development Department** at **(928) 343-2222**, email us at [jwilliams@hospiceofyuma.com](mailto:jwilliams@hospiceofyuma.com), or you may write to us at **Hospice of Yuma, Attn: Fund Development Dept., 1824 S. 8<sup>th</sup> Avenue, Yuma, AZ 85364-5517**. If you contact us with this request, all reasonable efforts will be taken to ensure that you will not receive any fund-raising communications from us in the future.

**FEDERAL PRIVACY RULES ALLOW HOSPICE OF YUMA TO USE OR DISCLOSE YOUR HEALTH INFORMATION WITHOUT YOUR CONSENT OR AUTHORIZATION FOR A NUMBER OF REASONS:**

**When Legally Required.** Hospice of Yuma 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 Yuma may disclose your health information for public activities and purposes to:

- Prevent or control disease, injury or disability, report disease, injury, vital events such as birth or death and the conduct of public health surveillance, investigations, and interventions.
- To 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.
- To notify a person who has been exposed to a communicable disease or who may be at risk of contracting or spreading a disease.
- To an employer about an individual who is a member of the workforce as legally required.

**To Report Abuse, Neglect or Domestic Violence.** Hospice of Yuma is allowed to notify government authorities if Hospice of Yuma believes a patient is the victim of abuse, neglect or domestic violence. Hospice of Yuma 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 Yuma may disclose your health information to a health oversight agency for activities including audits, civil administrative proceedings or criminal investigations, inspections, licensure, or disciplinary action. Hospice of Yuma, 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 Yuma may disclose your health information during 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 court order, discovery request or other lawful process, but only when Hospice of Yuma 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 Yuma 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.
- To identify or locate a suspect, fugitive, material witness or missing person.
- Under certain limited circumstances, when you are the victim of a crime.
- If Hospice of Yuma has a suspicion that your death was the result of criminal conduct, including criminal conduct at Hospice of Yuma.
- In an emergency to report a crime.

**To Coroners and Medical Examiners.** Hospice of Yuma 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 Yuma 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 Yuma may disclose your health information prior to and in reasonable anticipation of your death.

**For Organ, Eye or Tissue Donation.** If you choose to participate in organ, eye, and/or tissue donation, Hospice of Yuma 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 such donation and transplantation.

**In the Event of A Serious Threat To Health Or Safety.** Hospice of Yuma may, consistent with applicable law and ethical standards of conduct, disclose your health information if Hospice of Yuma, 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, Federal regulations authorize Hospice of Yuma 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 Yuma may release your health information for worker's compensation or similar programs.

### **AUTHORIZATION TO USE OR DISCLOSE HEALTH INFORMATION**

Other than is stated above, Hospice of Yuma will not disclose your health information other than with your written authorization. If you or your representative authorizes Hospice of Yuma 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 Yuma maintains:

- **Right to Request Restrictions.** You have the right to request restrictions on certain uses and disclosures of your health information. You have the right to request a limit on the Hospice's disclosure of your health information to someone who is involved in your care or the payment of your care. Hospice of Yuma is not required to agree to your request, unless your request is for a restriction on a disclosure to a health plan for purposes of payment or health care operations (and is not for purposes of treatment) and the medical information you are requesting to be restricted from disclosure pertains solely to a health care item or service for which you have paid out of pocket in full. If you wish to make a request for restrictions, please contact **The Privacy Officer**.
- **Right to Receive Confidential Communications.** You have the right to request that Hospice of Yuma communicate with you in a certain way. For example, you may ask that Hospice of Yuma 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 any member of your hospice team. Hospice of Yuma will not ask you to provide any explanation for your request and will attempt to honor any 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 Privacy Officer**. If you request a copy of your health information, Hospice of Yuma 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 Yuma amend the records. That request may be made as long as the information is maintained by Hospice of Yuma. A request for an amendment of records

must be made in writing to **The Privacy Officer**. Hospice of Yuma may deny the request if:

- ⇒ Your request is not in writing or does not include a reason for the amendment.
  - ⇒ Your health information records were not created by Hospice of Yuma.
  - ⇒ if the records you are requesting are not part of Hospice of Yuma'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 Yuma, 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 Yuma for any reason other than for treatment, payment or health operations. The request for an accounting must be made in writing to **The Privacy Officer**. The request should specify the time period for the accounting. Requests for an accounting of disclosures made under the provisions of HIPAA pertain to Protected Health Information gathered by Hospice of Yuma on and after April 14, 2003. Requests for an accounting of disclosures may only be made for the 7-year period immediately prior to the date of the request for an accounting. Hospice of Yuma would provide the first accounting you request during any 12-month period without charge. Subsequent accounting requests within the same 12-month period may be subject to a reasonable cost-based fee.
  - **Right to a Paper Copy of this Notice.** You or your representatives have a right to a separate paper copy of this Notice at any time even if you or your representatives have received this Notice previously. To obtain a separate paper copy, please contact **The Privacy Officer**.

*[Hospice of Yuma patient or a representative may also obtain a copy of the current version of Hospice of Yuma's Notice of Privacy Practices at its website, [www.hospiceofyuma.com](http://www.hospiceofyuma.com)]*

- **Right To be Notified of Unauthorized Disclosure of Your PHI (Breach Notification)**  
Hospice of Yuma is required to notify you upon a breach of any unsecured PHI. The notice must be made without unreasonable delay, but no later than 60 days from when we discover the breach. The notice will include, to the extent reasonably possible: (a) a brief description of the breach, including the date of breach and discovery; (b) a description of the types of unsecured PHI disclosed or misappropriated during the breach; (c) the steps you can take to protect your identity; (d) a brief description of our actions to investigate the breach, mitigate harmful effects and prevent future breaches; and (e) contact procedures for affected individuals to obtain additional information. Hospice of Yuma must notify you in writing by first class mail (unless you have opted for electronic communications with us). However, if we have insufficient contact with you, a reasonable alternative notice method (posting on website, broadcast media, etc.) may be used.

## **DUTIES OF HOSPICE OF YUMA**

Hospice of Yuma is required by law to maintain the privacy of your health information and to provide you and your representative this Notice of its duties and privacy practices. The Hospice of Yuma is required to abide by terms of this Notice as may be amended from time to

time. Hospice of Yuma 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 Yuma changes its Notice, Hospice of Yuma will provide a copy of the revised Notice to you or your appointed representative. You or your personal representative have the right to express complaints to Hospice of Yuma and to the Secretary of Health and Human Services if you or your representative believe that your privacy rights have been violated. Any complaints to Hospice of Yuma should be made in writing to **The Privacy Officer**. Hospice of Yuma 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 Yuma's contact person for all issues regarding patient privacy and your rights under the Federal privacy standards is **The Privacy Officer, 1824 S. 8<sup>th</sup> Avenue, Yuma, Arizona 85364-5517, (928) 343-2222.**

**EFFECTIVE DATE**

This notice is effective September 20, 2013.

**If you have any questions regarding this notice, please contact the Privacy Officer at (928) 343-2222.**