



NOTICE OF HOSPICE 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.

OUR RESPONSIBILITIES

Grand County Hospice takes the privacy of your health information seriously. Grand County Hospice is required by law to maintain that privacy and to provide you with this Notice of Privacy Practices. This Notice is provided to tell you about our duties and practices with respect to your information. Grand County Hospice and its Business Associates are required to abide by the terms of this Notice.

HOW GRAND COUNTY HOSPICE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

The following categories describe different ways that Grand County Hospice may use and disclose your health information, including pictures of you or a part of your body (e.g. a wound).

Treatment: Grand County Hospice may use and disclose your health information to coordinate care within the hospice and with others involved in your care, such as your attending physician, members of the Grand County Hospice interdisciplinary team and other health care professionals who have agreed to assist Grand County Hospice in coordinating your care. For example, Grand County Hospice may take pictures of your wound in order to monitor healing or may disclose your health information to a physician involved in your care who needs information about your symptoms to prescribe appropriate medications.

Payment: Grand County Hospice may use and disclose your health information to receive payment for the care you receive from Grand County Hospice. For example, Grand County Hospice may be required by your health insurer to provide information regarding your health care status, your need for care and the care that Grand County Hospice intends to provide to you so that the insurer will reimburse you or the hospice.

Health Care Operations: Grand County Hospice may use and disclose health information for its own operations in order to facilitate the functioning of the Hospice and as necessary to provide quality care to all of the hospice's patients. Health care operations may include,

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but not be limited to, such activities as:

- Quality assessment and improvement activities;
- Activities designed to improve health or reduce health care costs;
- 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;
- Accreditation, certification, licensing or credentialing activities;
- Review and auditing, including compliance reviews, medical reviews, legal services and compliance programs; and,
- Business management and general administrative activities of the hospice.

As Required by Law: Grand County Hospice will disclose your health information when it is required to do so by any Federal, State or local law.

Public Health Risks: Grand County Hospice may disclose your health information for public activities and purposes in order 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.
- Report adverse events or 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 employer's workforce in certain limited situations, as authorized by law.

Abuse, Neglect Or Domestic Violence: Grand County Hospice is allowed to notify government authorities if the hospice believes a patient is the victim of abuse, neglect or domestic violence. Grand County Hospice will make this disclosure only when specifically required or authorized by law or when the patient agrees to the disclosure.

Health Oversight Activities: Grand County Hospice may disclose your health information

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to a health oversight agency for activities including audits, civil administrative or criminal investigations, inspections, licensure or disciplinary action. Grand County Hospice, 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.

Judicial And Administrative Proceedings: Grand County Hospice 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 the hospice makes reasonable efforts to either notify you about the request or to obtain an order protecting your health information.

Law Enforcement. As permitted or required by State law, Grand County Hospice may disclose your health information to a law enforcement official for certain 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 circumstances, when you are the victim of a crime;
- To a law enforcement official if Grand County Hospice has a suspicion that your death was the result of criminal conduct including criminal conduct at the hospice; or,
- In an emergency in order to report a crime.

Coroners And Medical Examiners: Grand County Hospice 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.

Funeral Directors: Grand County Hospice 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, Grand County Hospice may disclose your health information prior to and in reasonable anticipation of your death.

Organ, Eye Or Tissue Donation: Grand County Hospice 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.

Serious Threat To Health Or Safety: Grand County Hospice may, consistent with

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applicable law and ethical standards of conduct, disclose your health information if the hospice, 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.

Worker's Compensation: Grand County Hospice may release your health information for worker's compensation or similar programs.

Research Purposes: Grand County Hospice may, under certain circumstances, use and disclose your health information for research purposes. Before Grand County Hospice discloses any of your health information for research purposes, the project will be subject to an extensive approval process. This process includes evaluating a proposed research project and its use of health information and trying to balance the research needs with your need for privacy. Before Grand County Hospice uses or discloses health information for research, the project will have been approved through this research approval process. Additionally, when it is necessary for research purposes and so long as the health information does not leave the hospice, Grand County Hospice may disclose your health information to researchers preparing to conduct a research project, for example, to help the researchers look for individuals with specific health needs. Lastly, if certain criteria are met, Grand County Hospice may disclose your health information to researchers after your death when it is necessary for research purposes.

Limited Data Set: Grand County Hospice may use or disclose a limited data set of your health information, that is, a subset of your health information for which all identifying information has been removed, for purposes of research, public health, or health care operations. Prior to our release, any recipient of that limited data set must agree to appropriately safeguard your health information.

Specified Government Functions: In certain circumstances, the Federal regulations authorize a hospice 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.

OTHER USES AND DISCLOSURES TO WHICH YOU MAY AGREE OR OBJECT

Facility Directory. Grand County Hospice may disclose certain information about you in a hospice directory while you are in the hospice inpatient unit, including your name, general health status, your religious affiliation and your location. The hospice may disclose this information to people who ask for you by name. Please inform us if you want to restrict or prohibit some or all of the information provided in the directory.

Persons Involved in Your Care: When appropriate, Grand County Hospice may share your health information with a family member, other relative or any other person you identify if that person is involved in your care and the information is relevant to your care or the payment of your care. Grand County Hospice may also notify your family about your

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location or general condition or disclose such information to an entity assisting in a disaster relief effort.

You may ask us at any time not to disclose your health information to any person(s) involved in your care. Grand County Hospice will agree to your request unless circumstances constitute an emergency or if you are a minor.

Fundraising Activities. Grand County Hospice may use information about you, including your name, address, telephone number, the dates you received care, and contact information for your family members who are involved in your care, for fundraising activities. If you do not want the hospice to contact you, please notify us by calling 435-719-3772, or by email at jessicaw@mrhmoab.org.

AUTHORIZATIONS TO USE OR DISCLOSE YOUR HEALTH INFORMATION

Other than the permitted uses and disclosures described above, Grand County Hospice will not use or disclose your health information without an authorization signed by you or your personal representative. If you or your representative sign a written authorization allowing us to use or disclose your health information, you may cancel the authorization (in writing) at any time. If you cancel your authorization, we will follow your instructions except to the extent that we had previously relied upon your authorization and have already taken action.

The following uses and disclosures of your health information will only be made with your signed authorization:

- Uses and disclosures for marketing purposes;
- Uses and disclosures that constitute a sale of health information;
- Most uses and disclosures of psychotherapy notes; and,
- Any other uses and disclosures not described in this Notice.

YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION

You have the following rights regarding your health information that Grand County Hospice 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 our disclosure of your health information to someone who is involved in your care or the payment of your care. Grand County Hospice is not required to agree to your request, unless your request is for a restriction on a disclosure to a health plan

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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 Director at Grand County Hospice by calling 435-719-3772.

- **Right to receive confidential communications:** You have the right to request that we communicate with you in a certain way. For example, you may ask that the Grand County Hospice only conduct communications pertaining to your health information with you privately and with no other family members present. Grand County Hospice cannot guarantee the security of email messages if you should request communication via email. If you wish to receive confidential communications, please contact the Director at 435-719-3772. Grand County Hospice 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 at 435-719-3772. If you request a copy of your health information, Grand County Hospice may charge a reasonable fee for copying and assembling costs associated with your request.

You have the right to request that Grand County Hospice provides you, an entity or a designated individual with an electronic copy of your electronic health record containing your health information. Grand County Hospice may require you to pay the labor costs incurred by Grand County Hospice in response to your request.

- **Right to amend health care information:** You or your representative has the right to request that Grand County Hospice amend your records, if you believe that your health information is incorrect or incomplete. That request may be made as long as the information is maintained by Grand County Hospice. A request for an amendment of records must be made in writing to the Director at Grand County Hospice, 450 West Williams Way, Moab, Utah 84532. Grand County Hospice may deny the request if it is not in writing or does not include a reason for the amendment. The request may also be denied if your health information records were not created by Grand County Hospice, if the records you are requesting are not part of Grand County Hospice'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 Grand County Hospice, the records containing your health information are accurate and complete.
- **Right to an accounting:** You or your representative has the right to request an accounting of disclosures of your health information made by Grand County Hospice for certain reasons, including reasons related to public purposes authorized by law and certain research. The request for an accounting must be made in writing to the Director at Grand County Hospice, 450 West Williams Way, Moab, Utah 84532.

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The request should specify the time period for the accounting and may not be made for periods of time in excess of six (6) years. Grand County Hospice will 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 at 435-719-3772. You or your representative may also obtain a copy of the current version of Grand County Hospice's Notice of Privacy Practices on its website, <http://mrhmoab.org/grand-county-hospice/>.
- **Right to receive notification of a breach.** You or your representative have the right to receive notification of a breach of your unsecured health information. If you have questions regarding what constitutes a breach or your rights with respect to breach notification please contact the Director at Grand County Hospice by calling 435-719-3772.

CHANGES TO THIS NOTICE

Grand County Hospice reserves the right to change this Notice and to make the revised Notice effective for health information we already have about you, as well as any health information we receive in the future. The Notice is also available to you upon request.

COMPLAINTS

You or your personal representative has the right to express complaints to Grand County Hospice and to the Secretary of the U.S. Department of Health and Human Services if you or your representative believes that your privacy rights have been violated. Any complaints to Grand County Hospice should be made in writing to the Director at Grand County Hospice, 450 West Williams Way, Moab, Utah 84532. Grand County Hospice 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.

QUESTIONS REGARDING THIS NOTICE

Grand County Hospice has designated the Director as its contact person for all issues regarding patient privacy and your rights under the Federal privacy standards. You may contact the Director at Grand County Hospice, 450 West Williams Way, Moab, Utah 84532 or by phone at 435-719-3772.

EFFECTIVE DATE

This Notice is effective June 8, 2017.

