

# INDIAN RIVER MEDICAL CENTER NOTICE OF PRIVACY PRACTICES\*

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. THIS NOTICE APPLIES TO INDIAN RIVER MEDICAL CENTER, ITS EMPLOYED AND NON-EMPLOYED STAFF, VOLUNTEERS AND TRAINEES, AS WELL AS THE PHYSICIANS AND OTHER HEALTHCARE PRACTITIONERS WHO PROVIDE SERVICES AT THE INDIAN RIVER CAMPUS. PLEASE REVIEW IT CAREFULLY.

## 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 and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, may serve as a:

- Basis for planning your care and treatment;
- Means of communication among the 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;
- A tool in educating health professionals;
- A source of data for medical research;
- A source of information for public health officials charged with improving the health of the nation;
- A source of data for facility planning and marketing; and,
- A tool with which we can assess and 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; and,
- Make more informed decisions when authorizing disclosure of your health information 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 contained in your record belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522;
- Obtain an additional copy of this notice of our information practices upon request;
- Inspect and copy your health record as provided for in 45 CFR 164.524.

- Amend your health record as provided in 45 CFR 164.528;
- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528;
- Request communications of your health information by alternative means or at alternative locations; and,
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

## **Our Responsibilities**

Indian River, including its employed and non-employed staff, volunteers, trainees, nonstaff physicians and other persons who provide healthcare at Indian River campus, are required to:

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

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 mail a revised notice to the address you have supplied us.

We will not use or disclose your health information without your authorization, except as permitted, as described in this notice.

## **For More Information or to Report a Problem**

If you have questions regarding our privacy practices and would like additional information, you may contact the Privacy Officer at **772.567.4311, ext. 1124**.

If you believe your privacy rights have been violated, you can file a complaint with the Privacy Officer or with the Secretary of the Federal Department of Health and Human Services at [www.hhs.gov/ocr/hipaa/](http://www.hhs.gov/ocr/hipaa/). There will be no retaliation against you for filing a complaint.

## **Examples of Disclosure for Treatment, Payment and Health Operations**

By law, we are allowed to use and disclose your medical information for most purposes related to your medical treatment (“treatment”), the payment for your medical treatment (“payment”), and our healthcare operations or the operations of other activities to which we disclose your medical information (“operations”).

*We can 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 your 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 expectations 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 may 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 are discharged from this hospital.

*We can use your health information for payment.* For example: A bill may be sent to you or to a third party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnoses, procedures and supplies used.

*We can use your health information for regular health operations.* For example: Members of the medical staff, the risk or quality improvement manager, or members of the quality 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 the healthcare and service we provide.

## **Other Uses or Disclosures**

*Business Associates:* There are some services provided in our organization through contracts with our business associates. Examples include physician services in the Emergency Department and Radiology, certain laboratory tests, and a copy service we use when making copies of your health record. When these services are contracted, we may disclose your health information to our business associates so that they can perform the job we have asked them to do and bill you or your third party payer for services rendered. So that your health information is protected, however, we require the business associates to appropriately safeguard your information.

*Directory:* Unless you notify us that you object, we can use your name, location in the facility, general condition, and religious affiliation for directory purposes. This information may be provided to members of the clergy and, except for religious affiliation, 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, your location, and general condition.

*Communication with Family:* Health professionals, using their professional judgment, may disclose to a family member, other relative, close personal friend or any other person you identify, your health information that is 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 an Institutional Review Board that has reviewed the research proposal and has established protocols to ensure the privacy of your health information.

*Funeral Directors:* We may disclose health information to funeral directors/medical examiner consistent with applicable law to assist them in carrying out their duties.

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

*Marketing:* We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

*Fund Raising:* We may contact you as part of a fund-raising effort.

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

*Workers Compensation:* We may disclose health information to the extent authorized by and to the extent necessary to comply 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 other legal authorities charged with preventing or controlling disease, injury or disability.

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

*Law Enforcement:* We may disclose health information for law enforcement purposes as required by law, or in response to a valid subpoena.

Federal law permits your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that one of our workforce members or one of our business associates believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more of our patients, workers or the public.

*Other Permitted Disclosures:* We may disclose your health information as required or permitted by the privacy regulations promulgated pursuant to the Health Insurance Portability and Accountability Act, as amended and interpreted from time to time.