



NOTICE OF PRIVACY PRACTICES

INTRODUCTION: Notice of Privacy Practices (Notice) describes how Northwood Deaconess Health Center (NDHC) may use and disclose your protected health information (medical information) for treatment, payment, health care options, and for certain other purposes. This notice also describes how NDHC may obtain your medical information from others, your rights regarding health information NDHC obtains or maintains about you, how you may exercise these rights, and the obligation NDHC has to protect your information.

PROTECTED HEALTH INFORMATION (PHI): PHI means health information (including identifying information about you like your name and address) we have collected from you or received from other persons. It may include information about your past, present, or future physical or mental health or condition, healthcare provided to you, and payment for healthcare services

USES & DISCLOSURES OF PROTECTED HEALTH INFORMATION

HOW MEDICAL INFORMATION MAY BE USED AND DISCLOSED:

NDHC is permitted to use and disclose your medical information for care and treatment in order to provide healthcare services to you. Medical information may also be used for payment of your healthcare bills and to support the operation of medical and hospital practices. Examples of types of uses or disclosures include, but are not limited to:

Treatment: NDHC will use and disclose your medical information to doctors, nurses, technicians, medical students, and other personnel involved in your care in order to provide you with medical treatment and service. Your medical information will be used to coordinate and manage your healthcare and any related services. NDHC may provide medical information about you to people outside NDHC who may be involved in your medical care to assist with the diagnosis or treatment, or to an outside agency supporting your care.

Payment: NDHC will use your medical information as needed to obtain payment for your healthcare services from an insurance company or a third party. This may include providing information to your health plan or insurance company before it approves or pays for recommended healthcare services. NDHC may disclose medical information to other healthcare providers for their payment purposes.

Healthcare Operations: NDHC will use medical information about you as needed to support the business activities of your NDHC provider and NDHC which are necessary to operate the medical facilities and ensure all patients receive quality care. NDHC staff may call you by name in the waiting area. Medical information may be used to review our treatment and services and evaluate staff performance. NDHC may aggregate patients' medical information to determine additional services to offer or suspend or treatment effectiveness. NDHC may use or disclose medical information to

provided to you. NDHC is required to maintain the privacy of your medical information and to provide you with this notice of NDHC's legal duties and privacy practices with respect to your medical information. NDHC is also required to comply with the terms of its current Notice of Privacy Practices.

CHANGES TO NOTICE: The current Notice of Privacy Practices is posted at each site where NDHC provides care and NDHC's website, www.ndhc.net. NDHC reserves the right to change the terms of the Notice and to make the revised or changed Notice effective for all health information NDHC already has about you as well as any health information NDHC receives in the future. Any revised Notice will be posted as stated above. A copy of the current Notice is available by accessing www.ndhc.net. A paper copy is available at each site.

conduct training programs, for insurance underwriting, auditing, business management and planning, or other administrative functions. NDHC may use medical information when contacting a patient about an upcoming appointment, to provide information about treatment alternatives or other health related benefits or services, and for marketing or fundraising activities. To opt out of fundraising activities, contact NDHC's privacy officer.

OTHER PERMITTED USES & DISCLOSURES; OPPORTUNITY TO

OBJECT: NDHC may use and disclose your medical information in other instances, which you may agree or object to. Notify NDHC's privacy officer to opt out.

Facility/Resident Directories: Certain limited information will be included in facility/resident directories while admitted for care. This may include patient name and location/room number. In the case of an emergency or if patient is incapacitated, NDHC may use the above information in the facility directory but provide the patient an opportunity to object when it is practical to do so.

Others Involved in Patient Care: NDHC may disclose medical information related to healthcare to a family member, a relative, or close friend, or any other person identified by the patient. When the patient is unable to consent or object, NDHC may disclose information as necessary if it is determined to be in the patient's best interest. NDHC may also use or disclose medical information to notify or assist in notifying a family member or other person responsible for patient care about their general condition or death.

Be Made Aware of Participation in Health Information Exchanges: NDHC may disclose medical information, as permitted by law, to other health care providers or entities for treatment, payment, or health care operation purposes. A full list of these arrangements can be obtained by contacting the privacy officer.

Business Associates: Some services are provided through contracts with outside service providers and vendors. Patient medical information may be disclosed in the performance of the contracted job and for billing for services rendered. All contracted service providers are obligated to protect the privacy of health information and are not allowed to use or disclose any information other than as specified in NDHC's contract.

Disaster Relief: NDHC may disclose medical information to an entity assisting in a disaster relief effort so a family can be notified about a patient's condition and location.

USES & DISCLOSURES PERMITTED WITHOUT PERMISSION OR OBJECTION:

Required by Law: NDHC may use or disclose medical information when required by federal, state or local law and is limited to what is legally required. This may include disclosure regarding abuse of a person, neglect, or domestic violence

Public Health or Serious Health or Safety Threat: NDHC may use or disclose medical information for public health activities such as to public health or other government authority, or to persons who report to the FDA. Examples include reporting vital health statistics, communicable diseases, information about product recalls, or to prevent or reduce a serious threat to health or safety of a person or the public.

Health Oversight: NDHC may disclose your medical information to oversight agencies for activities authorized by law while conducting inspections, audits, and investigations as necessary to monitor the healthcare system, government programs, and civil rights laws.

Legal Proceedings: NDHC may disclose medical information in a judicial or administrative proceeding, in response to a court order, and in certain cases in response to a subpoena, discovery request, or other lawful process.

Law Enforcement: NDHC may disclose medical information to law enforcement in response to court orders or other legal processes; to identify or locate a suspect, fugitive, missing person, or witness;

concerning crime victims; about a suspicious death that may have resulted from a crime; about criminal conduct on NDHC property; and to report a crime in a medical emergency.

Inmates: NDHC may disclose medical information about an inmate to a correctional institution or law enforcement office as authorized by law.

Coroner and Organ Donation: NDHC may disclose medical information for purposes allowed by law for identification or determination of cause of death; to funeral directors in execution of their duties including providing information in reasonable anticipation of death; for organ, eye or tissue donation purposes.

Research: NDHC may disclose medical information to researchers whose research has been approved by an institutional review board or privacy board and is determined to meet certain requirements for protection of this information.

Military Activity and National Security: Under certain conditions NDHC may disclose medical information of individuals in the Armed Forces, veterans, or foreign military personnel, for purposes including, but not limited to, determination of benefit, military mission, or national security and intelligence activities.

Workers' Compensation: NDHC may disclose medical information to comply with Workforce Safety requirements, laws, and other similar programs established by law.

USES & DISCLOSURES MADE ONLY WITH WRITTEN AUTHORIZATION:

- Uses and disclosures of medical information for marketing purposes
- Disclosures that constitute the sale of medical information

Other uses and disclosures of medical information not covered by this notice or applicable laws will only be made with written authorization. A written authorization may be revoked at any time, in writing, to NDHC's privacy officer. Revocations will apply only to uses after date of revocation.

PATIENT RIGHTS AND HOW TO EXERCISE THEM

Right to Inspect and Copy: Patients have the right to inspect and copy medical information that may be used to make care decisions or payment for care included in NDHC's designated record set. This includes medical and billing records, other than psychotherapy notes. Requests to inspect and copy information should be made, in writing, to the HIM Department. NDHC has up to 30 days from the request date to provide requested information. NDHC may charge a reasonable fee for costs associated to comply with the request. A request may be denied in certain limited circumstances. A patient has the right to have a denial reviewed by a licensed healthcare professional who was not directly involved in the denial. NDHC will comply with the outcome of the review.

Right To Electronic Copy: An electronic copy of medical information maintained in electronic format may be requested and transmitted upon request. NDHC will make every effort to provide access to medical information in the format requested if it is readily producible in such a format. NDHC may charge a reasonable, cost-based fee for the labor associated with transmitting the electronic medical record.

Right to Paper Copy: A paper copy can be requested at any time, even with agreement to accept an electronic copy.

42 C.F.R. Section 2.22 Part 2: Although NDHC is not a substance use disorder treatment program under federal law (SUD Program), NDHC may receive medical information from a SUD program. SUD records received from programs subject to 42 CFR Part 2, or

testimony relaying the content of such records, shall not be used or disclosed in civil, criminal, administrative, or legislative proceedings against the individual unless based on written consent or a court order after notice and an opportunity to be heard is provided to the individual or holder of the record as provided in 42 CFR Part 2. A court order authorizing use or disclosure must be accompanied by a subpoena or other legal requirement compelling disclosure before the requested record is used or disclosed. Permitted uses and disclosures are limited by laws more restrictive than HIPAA, such as Part 2. If information is disclosed pursuant to HIPAA, the records could potentially be redisclosed and will no longer be protected under HIPAA. If NDHC seeks to use Part 2 record for fundraising purposes, a clear and conspicuous opportunity to opt out of receiving fundraising communications must be presented.

Final Rule – Reproductive Health: NDHC will not use records to report to state authorities a lawful abortion or to assist in a criminal investigation for receiving reproductive health care. NDHC may require signed confirmation that a request from records about a pregnancy, fertility treatment, or contraceptive use is not related to an investigation to sue or penalize you. Individuals PHI disclosed under this rule may be subject to further redisclosure.

Right to Request Confidential Communications by Alternative Means, Location: NDHC will accommodate reasonable requests to communicate with a patient about medical matters in a certain way or at a certain location. Written requests for alternate communications should be made to NDHC's privacy officer.

Right to Request a Restriction: Patients may request a restriction or limitation on medical information NDHC uses or discloses for treatment, payment, or healthcare operations; on medical information disclosed to someone involved in care or the payment for care; or for notification purposes, such as to a family member or friend. NDHC is not required to consent to a restriction request and will comply unless the information is needed to provide emergency treatment. Written restriction requests should be made to NDHC's

privacy officer and include information to limit, if limitation includes use, disclosure, or both, and name(s) to whom restriction is to be applied.

Out of Pocket Payments: When a request is made to not bill a health plan and payment is made out-of-pocket in full, or in part for a specific item or service, a patient may request that medical information for that item or service not be disclosed to a health plan for purposes of payment or health care operations.

Notice of Breach: A patient has the right to be notified upon a breach of any unsecured protected health information.

Right to Amend: A request to amend medical information believed to be incorrect or incomplete may be made for any designated record set for as long as the information is maintained by NDHC. A written request to the privacy officer must include a reason to support the request. In certain cases, NDHC may deny a request.

Right to an Accounting: A request for an accounting or list of certain disclosures NDHC has made within six years of medical information may be requested. Exclusions are: use or disclosure for treatment, payment, for directories, to persons involved in care, national security/intelligence, those with written authorization, or for certain disclosures to correctional institutions and/or law enforcement.

COMPLAINTS

A complaint may be filed if a patient believes privacy rights have been violated. A written complaint to NDHC's privacy officer must be received. Complaints may also be filed with the Secretary of the Department of Health and Human Services, 200 Independence Ave SW, Washington DC 20201. NDHC will not retaliate against any filer.

CONTACT NDHC PRIVACY OFFICER

Telephone: 701-587-6917 | **Email:** privacy@ndhc.net

Mail: PO Box 190, Northwood ND 58267

This Notice of Privacy Practices applies to all NDHC facilities in North Dakota as well as healthcare providers who are not NDHC employees, but who are affiliated with NDHC.