



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.

We at Belmond Medical Center are required by law to maintain the privacy of individually identifiable patient health information (this information is "protected health information" and is referred to herein as "PHI"). We are also required to provide patients with a Notice of Privacy Practices regarding PHI. We are required to place this notice in a prominent place within our facility. We may change the terms of this notification and/or our privacy policy in the future. Any changes made will apply to your past, current, or future PHI. In the event that important changes are made to our policies, we will revise this notice and post it to the Home Page on Belmond Medical Center's Website located at www.belmondmedicalcenter.com under "Notice of Privacy Practice". You may also request a copy of our current notice at any time from the Belmond Medical Center HIPAA Privacy Official, 403 1st Street SE, Belmond, Iowa 50421.

We will only use or disclose your PHI as permitted or required by applicable federal and/or state laws. This Notice applies to your PHI in our possession including the medical records generated by us. Belmond Medical Center understands that your health information is very personal; therefore, we are committed to safeguarding your privacy.

Please read this Notice of Privacy Practices thoroughly as it describes how Belmond Medical Center will use and disclose your PHI. Please note that not every disclosure or use listed under a category is listed.

This Notice applies to the delivery of health care by Belmond Medical Center and its medical staff. This Notice also applies to the utilization review and quality assessment activities.

I. Permitted Use or Disclosure

- A. **Treatment:** Belmond Medical Center will use and disclose your PHI in the provision and coordination of health care to carry out treatment functions.
- ◆ Belmond Medical Center will disclose all or any portion of your patient medical record information to your attending physician, consulting physician(s), nurses, technicians, medical students, and other health care providers who have a legitimate need for such information in your care and continued treatment.
 - ◆ Different departments will share medical information about you in order to coordinate specific services, such as lab work, x-rays, and prescriptions.
 - ◆ Belmond Medical Center also will disclose your medical information to people or entities outside Belmond Medical Center who will be involved in your medical care after you leave Belmond Medical Center, such as family members, clergy, home care, and others who will provide services that are part of your care.
 - ◆ Belmond Medical Center will share certain information such as your name, address, employment, insurance carrier, emergency contact information and appointment scheduling information in an effort to coordinate your treatment with us and with other health care providers (i.e. radiologists, specialists, pathologists).
 - ◆ Belmond Medical Center will use and disclose your PHI to inform you of, or recommend possible treatment options or alternatives that will be of interest to you.
 - ◆ Belmond Medical Center will use and disclose PHI to contact you as a reminder that you have an appointment for treatment or medical care at Belmond Medical Center.
 - ◆ If you are an inmate of a correctional institution or under the custody of a law enforcement officer,

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Belmond Medical Center will disclose your PHI to the correctional institution or law enforcement official.

- B. Payment:** Belmond Medical Center will disclose PHI about you for the purposes of determining coverage, eligibility, funding, billing, claims management, medical data processing, stop loss / reinsurance and reimbursement.
- ◆ The medical information will be disclosed to an insurance company, third party payer, third party administrator, health plan or other health care provider (or their duly authorized representatives) involved in the payment of your medical bill and will include copies or excerpts of your medical records which are necessary for payment of your account. It will also include sharing the necessary information to obtain pre-approval for payment for treatment from your health plan.
 - ◆ Belmond Medical Center will disclose PHI to collection agencies and other subcontractors engaged in obtaining payment for care.
- C. Health Care Operations:** Belmond Medical Center will use and disclose your PHI during routine health care operations including quality assurance, utilization review, medical review, internal auditing, accreditation, certification, licensing or credentialing activities of Belmond Medical Center, and for educational purposes. We may also disclose information to physicians, technicians, nurses, medical, and nursing other health professional students, and other personnel as part of our educational mission.
- ◆ For instance, Belmond Medical Center may need to share your demographic information, diagnosis, treatment plan and health status for population based activities relating to improving health or reducing health care costs, protocol development, case management and care coordination, and contacting health care providers with information about treatment alternatives, in order for us to operate our business in an efficient, safe and legal manner.
 - ◆ Belmond Medical Center reports births, deaths, and various diseases to the governmental agencies responsible for collecting this information.
- D. Other Uses and Disclosures:** As part of treatment, payment and health care operations, we may also use your PHI for the following purposes:
- ◆ **Fundraising Activities:** Belmond Medical Center will use and may also disclose some of your PHI to a related foundation for certain fund raising activities. For example, Belmond Medical Center will use your demographic information (e.g., name, address and other contact information, age, gender, and insurance status) and the dates Belmond Medical Center provided service to you. Belmond Medical Center may disclose limited PHI to a company contracted to conduct fundraising for Belmond Medical Center. This company will use your PHI only for the purposes of fundraising for Belmond Medical Center. **You do have the right to opt out of this by contacting the Belmond Medical Center's Privacy Official.**
 - ◆ **Medical Research:** Belmond Medical Center may disclose your PHI to help conduct research without your written consent. Such research may help to determine the effectiveness of a treatment plan or possibly find a cure for an illness. Belmond Medical Center requires that all research studies are subject to a specific approval process by a Privacy Board or Institutional Review Board. This process evaluates the proposed research study to ensure that effective measures are in place to balance research needs with the need for the privacy of your health information. **You do have the right to opt out of this by contacting the Belmond Medical Center's Privacy Official.**

There may be an occasion that you might be asked to participate in a study and if you agree, the researcher will be required to obtain your permission to use your PHI for that study.

- ◆ **Information and Health Promotion Activities:** Belmond Medical Center will use and disclose some of your PHI for certain health promotion activities. For example, your name and address will be used to send you newsletters or general communications. Belmond Medical Center will also

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send you information based on your own health concerns. Belmond Medical Center may send you this information if it has determined that a product or service may help you. The communication will explain how the product or service relates to your well being and can improve your health. **You do have the right to opt out of this by contacting the Belmond Medical Center's Privacy Official.**

- E. More Stringent State and Federal Laws:** The State law of Iowa is more stringent than HIPAA in several areas. State law is more stringent when the individual is entitled to greater access to records than under HIPAA and when under state law the records are more protected from disclosure than under HIPAA. Certain federal laws also are more stringent than HIPAA. Belmond Medical Center will continue to abide by these more stringent state and federal laws. The federal laws include applicable Internet privacy laws, such as the Children's Online Privacy Protection Act and the federal laws and regulations governing the confidentiality of health information regarding substance abuse treatment.

In Iowa, the state offers greater protections, which are addressed in the following statutes governing specific entities or medical conditions: birth defects, communicable diseases, infectious diseases, poisoning, drug and alcohol abuse, HIV testing and mental health conditions. All of Iowa's state laws regarding its consent requirement continue to apply.

II. Permitted Use or Disclosure with an Opportunity for You to Agree or Object

- A. Family/Friends:** Belmond Medical Center will disclose PHI about you to a friend or family member who is involved in your medical care. Belmond Medical Center will also give information to someone who helps you pay for your care. In addition, Belmond Medical Center will disclose PHI about you to an agency assisting in a disaster relief effort so that your family can be notified about your condition, status and location. You have a right to request that your PHI not be shared with some or all of your family or friends.
- B. BELMOND MEDICAL CENTER Directory:** Belmond Medical Center will include certain limited information about you in our patient directory while you are a hospital patient at Belmond Medical Center. This information will include your name, location in Belmond Medical Center, your general condition (e.g., fair, stable, critical, etc.) and your religious affiliation. This is so your family and friends can visit you in Belmond Medical Center and know how you are doing. The directory information, except for your religious affiliation, will also be disclosed to people who ask for you by name. **You have the right to request that your name not be included in our patient directory. If you request to opt out of the Facility Directory, we cannot inform visitors of your presence, location, or general condition.**
- C. Spiritual Care:** Directory information including your religious affiliation will be given to a member of the clergy, such as a priest or rabbi, even if they don't ask for you by name. Your name, location and general condition will be disclosed to members of the religious community. It is our policy to notify/not to notify your local religious organization, by disclosing your name that you are in Belmond Medical Center and your condition. A spiritual care provider may be called in to consult regarding your care. Spiritual care providers are members of the health care team at Belmond Medical Center. You have a right to request that your name not be given to any member of the clergy.
- D. Promotional Communications:** Belmond Medical Center does not share or sell your PHI to companies that market health care products or services directly to consumers for use by those companies to contact you, such as drug companies. Belmond Medical Center does maintain a database of individuals for promotional communications, disease management, health promotion, and fundraising purposes. This database includes individuals to whom Belmond Medical Center may have

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sent health improvement materials and news about Belmond Medical Center previously and also individuals who have donated to Belmond Medical Center or who have expressed an interest in donating to Belmond Medical Center or other health-related activities. You may be included in this database. Belmond Medical Center sends information to the individuals in this database about the programs and services of Belmond Medical Center. **If you wish to be deleted from this database, you may notify Belmond Medical Center's Marketing Department.**

- E. **Media Conditions Reports:** Belmond Medical Center may release information for an update to the media if the media requests information about you using your full name and after we have given you an opportunity to agree or object. The following information may then be disclosed: your condition described in general terms that do not communicate specific medical information, such as "good", "fair", "serious", or "critical".

III. Use or Disclosure Requiring Your Authorization

- A. **Marketing:** Belmond Medical Center is not permitted to provide your PHI to any other person or company for marketing to you of any products or services other than Belmond Medical Center's products or services unless you have signed an authorization.
- B. **Research:** Belmond Medical Center will use or disclose your PHI as part of research that includes providing you with treatment. For example, if you are part of a research study that includes treatment, Belmond Medical Center may require that you sign an authorization to allow the researchers to use or disclose your PHI for this research.
- C. **Other Uses:** Any uses or disclosures that are not for treatment, payment or operations and that are not permitted or required for public policy purposes or by law will be made only with your written authorization. Written authorizations will inform you to whom we are disclosing your PHI and why. You do have the right to revoke an authorization at any time.

IV. Use or Disclosure Permitted by Public Policy or Law without your Authorization

- A. **Law Enforcement Purposes:** Belmond Medical Center may disclose PHI for law enforcement purposes as required by law. For example, we report in cases of abuse, domestic violence, neglect, gunshot victims, or other suspected criminal conduct.
- B. **Required by Law:** Belmond Medical Center also will disclose your PHI when ordered to do so in administrative or judicial and proceedings.

Belmond Medical Center will report drug diversion and information related to fraudulent prescription activity to law enforcement and regulatory agencies. Belmond Medical Center may release PHI to authorized federal officials when required by law in circumstances surrounding national security and/or intelligence activities. PHI may be disclosed for specialized government functions including, military and veteran's activities. Belmond Medical Center may disclose PHI at the request of your employer concerning a work-related injury.

- C. **Coroners, Medical Examiners, Funeral Directors:** Belmond Medical Center will disclose your PHI to a coroner or medical examiner when necessary to identify a deceased person or to determine a cause of death. In addition, Belmond Medical Center will also disclose PHI to funeral directors as necessary, to carry out their duties.
- D. **Organ Procurement:** Belmond Medical Center may disclose PHI to notify organ procurement organizations or entities to aid them in organ, eye, or tissue donation and transplants.

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E. **Health or Safety:** Belmond Medical Center will use and disclose PHI to avert a serious threat to health and safety of a person or the public. Belmond Medical Center will use and disclose PHI to Public Health Agencies for immunizations, communicable diseases, etc. Belmond Medical Center will use and disclose PHI for activities related to the quality, safety or effectiveness of FDA regulated products or activities, including collecting and reporting adverse events, tracking and facilitating product recalls, etc. and post marketing surveillance. Any patient receiving a medical device subject to FDA tracking requirements may refuse to disclose, or refuse permission to disclose, their name, address, telephone number and social security number, or other identifying information for the purpose of tracking, unless the FDA requires that the patient cannot refuse disclosure.

V. **Your Health Information Rights**

Although we at Belmond Medical Center must maintain all records concerning your hospitalization and treatment by Belmond Medical Center, you have the following rights concerning your PHI:

A. **Right to Inspect and Copy:** You have the right to access your PHI and to inspect and copy your PHI as long as we maintain it except for: psychotherapy notes, information that will be used in a civil, criminal or administrative action or proceeding, and where prohibited or protected by law. Belmond Medical Center will deny your request for access to your PHI without giving you an opportunity to review that decision if:

- ◆ You are not authorized to inspect the information; or it is otherwise prohibited or protected by law;
- ◆ You are an inmate at a correctional institution and obtaining a copy of the information would risk the health, safety, security, custody or rehabilitation of you or other inmates;
- ◆ The disclosure of the information would threaten the safety of any officer, employee or other person at the correctional institution or who is responsible for transporting you;
- ◆ You are involved in a clinical research project and Belmond Medical Center created or obtained the PHI during that research. Your access to the information will be temporarily suspended for as long as the research is in progress;
- ◆ Belmond Medical Center obtained the information that you seek access to from someone other than the health care provider under a promise of confidentiality and your access request is likely to reveal the source of the information; or
- ◆ Under other limited circumstances. In these instances, however, Belmond Medical Center will allow the review of its decision by a health care professional that Belmond Medical Center has chosen. This person will not have been involved in the original decision to deny your request.

You agree to pay a reasonable copying charge. You must make your requests to access and copy your PHI in writing to Belmond Medical Center. Belmond Medical Center will respond to your request within 30 days of its receipt. If Belmond Medical Center cannot, Belmond Medical Center will notify you in writing to explain the delay and the date by which we will act on your request. In any event, Belmond Medical Center will act on your request within 60 days of its receipt.

B. **Right to Amend:** You have the right to amend your PHI for as long as Belmond Medical Center maintains it. However, Belmond Medical Center will deny your request for amendment if:

- ◆ Belmond Medical Center did not create the information;
- ◆ The information is not part of the designated record set;
- ◆ The information would not be available for your inspection (due to its condition or nature); or
- ◆ The information is accurate and complete.

If Belmond Medical Center denies your request for changes in your PHI, Belmond Medical Center

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will notify you in writing with the reason for the denial. Belmond Medical Center will also inform you of your right to submit a written statement disagreeing with the denial. You may ask that Belmond Medical Center include your request for amendment and the denial any time that Belmond Medical Center discloses the information that you wanted changed. Belmond Medical Center may prepare a rebuttal to your statement of disagreement and will provide you with a copy of that rebuttal.

You must make your request for amendment of your PHI in writing to Belmond Medical Center, including your reason to support the requested amendment. Belmond Medical Center will respond to your request within 60 days of its receipt. If Belmond Medical Center cannot, BMC will notify you in writing to explain the delay and the date by which BMC will act on your request. In any event, Belmond Medical Center will act on your request within 90 days of its receipt.

C. Right to an Accounting: You have a right to receive an accounting of the disclosures of your PHI that Belmond Medical Center made, except for the following disclosures:

- ◆ To carry out treatment, payment or health care operations;
- ◆ To the individual themselves;
- ◆ Any release made with your prior written authorization;
- ◆ For a facility directory;
- ◆ To persons involved in your care;
- ◆ For national security or intelligence purposes;
- ◆ To correctional institutions or law enforcement officials; or
- ◆ That occurred prior to April 14, 2003.

For each disclosure, you will receive: the date of the disclosure, the name of the receiving organization and address if known, a brief description of the PHI disclosed and a brief statement of the purpose of the disclosure or a copy of the written request for the information, if there was one.

You must make your request for an accounting of disclosures of your PHI in writing to Belmond Medical Center. You must include the time period of the accounting, which may not be longer than 6 years. Belmond Medical Center will respond to your request within 60 days from its receipt. If Belmond Medical Center cannot, Belmond Medical Center will notify you in writing to explain the delay and the date by which Belmond Medical Center will act on your request. In any event, Belmond Medical Center will act on your request within 90 days of its receipt.

In any given 12-month period, Belmond Medical Center will provide you with an accounting of the disclosures of your PHI at no charge. Any additional requests for an accounting within that time period will be subject to a reasonable fee for preparing the accounting.

D. Right to Request Restrictions: You have the right to request restrictions on certain uses and disclosures of your PHI to carry out treatment, payment or health care operations functions or to prohibit such disclosure. However, Belmond Medical Center will consider your request but is not required to agree to the requested restrictions.

You also have an additional right to limit the release of PHI to family, friends, or in the facility directory. For example, you may ask that your name not be used in the waiting room or that information about your expected discharge date not be shared with your family.

E. Right to Confidential Communications: You have the right to receive confidential communications of your PHI by alternative means or at alternative locations. For example, you may request that Belmond Medical Center only contact you at work or by mail.

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- F. **Right to Receive a Copy of this Notice:** You have the right to receive a paper copy of this Notice of Privacy Practices, upon request.

VI. Complaints

If you believe your privacy rights have been violated, you may file a complaint with Belmond Medical Center or with the Secretary of the Department of Health and Human Services. To file a complaint with Belmond Medical Center, please contact Belmond Medical Center Privacy Official, at 641-444-3223. All complaints must be submitted in writing directly to Belmond Medical Center Privacy Official. Belmond Medical Center assures you that there will be no retaliation for filing a complaint.

VII. Sharing and joint use of your Health Information

In the course of providing care to you and in furtherance of Belmond Medical Center's mission to improve the health of the community, Belmond Medical Center will share your PHI with other organizations as described below who have agreed to abide by the terms described below:

- A. **Medical Staff:** The medical staff and Belmond Medical Center participate together in an organized health care arrangement to deliver health care to you at Belmond Medical Center. Both Belmond Medical Center and its medical staff have agreed to abide by the terms of this Notice with respect to PHI created or received as part of delivery of health care services to you at Belmond Medical Center. Physicians and allied health care providers are members of Belmond Medical Center's medical staff and will have access to and use your PHI for treatment, payment and health care operations purposes related to your care within Belmond Medical Center. Belmond Medical Center will disclose your PHI to the medical staff for payment, treatment and health care operations.
- B. **Business Associates:** Belmond Medical Center will use and disclose your PHI to business associates contracted to perform business functions on its behalf including Wright Medical Center and Mercy Medical Center - North Iowa, who performs certain business functions for Belmond Medical Center. Whenever an arrangement between Belmond Medical Center and another company involves the use or disclosure of your PHI, that business associate will be required to keep your information confidential.
- C. **Utilization Review and Quality Assessment Activities:** Belmond Medical Center is partnered with Wright Medical Center and participates together for utilization review and quality assessment activities. We have agreed to abide by the terms of this Notice with respect to PHI created or received as part of utilization review and quality assessment activities.
- D. **Affiliations:** Belmond Medical Center is affiliated with the following health care organizations:

Wright Medical Center (Management)

Mercy Health Network - North Iowa (CAH Affiliate)

Belmond Medical Center will share your PHI with these organizations for purposes of your treatment, payment, and health care operations as needed by these organizations.

VIII. Additional Information

For further information regarding the issues covered by this Notice of Privacy Practice, please contact: Privacy Official at Belmond Medical Center, 403 1st Street NE, Belmond, IA 50421, telephone number 641-444-3223.