

**Bowdle Healthcare Center**  
**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 are required by the privacy regulations issued under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") to maintain the privacy of Protected Health Information (PHI) and to provide our patients with notice of our legal duties and privacy practices concerning PHI. In the event applicable law, other than HIPAA, prohibits or materially limits our uses and disclosures of PHI we will restrict our uses or disclosures of your PHI in accordance with the more stringent standard. We are required to abide by the terms of this Notice so long as it remains in effect. We reserve the right to change the terms of this Notice of Privacy Practices as necessary and to make the new Notice effective for all PHI maintained by us. If we make material changes to our privacy practices, we will provide a copy of the revised notice to patients as we provide service.

**UNDERSTANDING YOUR HEALTH RECORD/INFORMATION:**

Whenever you visit a hospital, physician, or other healthcare provider, a record of your visit is made. 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 medical record, serves as a:

- Basis for planning your care and treatment.
- Communication among the many 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.
- Tool in educating health professionals.
- Source of data for medical research.
- Source of information for public health officials charged with improving the health of the nation.
- Source of data for facility planning and marketing.
- Tool with which we can assess and improve the care we render and the outcomes we achieve.
- A tool to help you understand what is in your record and how your health information is used. This also helps you to:
  - a. Ensure the accuracy of your record.
  - b. Better understand who, what, when, where, and why others may access your health information.
  - c. Make informed decisions when authorizing disclosure to others.

**OUR RESPONSIBILITY:**

- Maintain the privacy of your health information.
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- Abide by the terms of this notice.
- Notify you if we are unable to agree to a requested restriction.
- Accommodate reasonable requests to communicate health information to other providers, facilities, or insurance companies.
- We do not sell, rent, lease, or otherwise disclose the medical information of our patients to anyone without the patient's authorization.

**YOUR HEALTH INFORMATION RIGHTS:**

- Your health record is the property of the healthcare practitioner or facility that compiled it. However, the information therein belongs to you.
- You do have the right to:

- a. Request privacy protection for PHI (restrict) certain uses and disclosures as provided by 45 CFR 164.522.
- b. Obtain a paper copy of the Privacy Notice.
- c. Bowdle Healthcare Center will not use or disclose your PHI unless you have signed a form authorizing the use or disclosure. You have the right to revoke that authorization in writing.
- d. Inspect and obtain a copy of your health record as provided for in 45 CFR 164.524.
- e. Request amendment of PHI as provided in 45 CFR 164.258.
- f. Obtain an accounting of disclosures of your PHI provided in 45 CFR 164.528.
- g. Request communications of your PHI by alternative means or at alternative locations.
- h. Complain to Bowdle Healthcare Center and to the Secretary of the Department of Health and Human Services without fear of retaliation by the organization if you believe your privacy rights have been violated. Complaints must be in writing describing the incident and delivered or mailed to: Bowdle Healthcare Center Privacy Officer, PO Box 556, Bowdle, South Dakota 57428.

**USES AND DISCLOSURES FOR WHICH INDIVIDUAL AUTHORIZATION OR OPPORTUNITY TO AGREE OR OBJECT IS NOT REQUIRED:**

- Workman's Compensation: We may disclose PHI to comply with laws relating to workers compensation or other similar program established by law.
- We may use or disclose your PHI, if authorized by law, to a government oversight agency conducting audits, investigations, or civil or criminal proceedings.
- We may use or disclose your PHI for research purposes, but only as permitted by law.
- Law enforcement: As required by law, we will disclose PHI for law enforcement purposes in response to a valid subpoena or a court order.
- Notification: We may use or disclose PHI to notify or assist in notifying a family member, personal representative, or the person responsible for your care, your location, and general condition.
- Communication with family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend, or any other person you identify, PHI relevant to that person's involvement in your care or payment related to your care.
- We may use or disclose PHI if you are a member of the military as required by armed forces services, and we may also disclose your PHI for other specialized government functions such as national security or intelligence activities.
- Child abuse (child's records to the States Attorney).
- Correctional institution: Should you be an inmate of a correctional institution, we may disclose to the institution or agents PHI necessary for your health and the health and safety of other individuals.
- Public Health: As required by law, we may disclose your PHI to public health or legal authorities charged with preventing or controlling disease, injury or disability.
- Organ procurement: Consistent with applicable law, we may disclose PHI to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.
- Funeral directors: We may disclose PHI to funeral directors consistent with applicable law to carry out their duties.
- Marketing: Assemble miscellaneous information, i.e. patient categories, demographics, age categories, populations, specialty clinics.
- Business associates: Network involvement with the local business and professional corporation, Partnership with Avera Health Systems, various insurance companies for the purpose of reimbursement.
- Other providers and health facilities are contractually obligated to treat your PHI as confidential and conform to our privacy policy and applicable laws and regulations.
- Release your PHI to the Secretary of the Department of Health and Human Services for enforcement of HIPAA.

## **CORRECTING EXISTING INFORMATION:**

Upon receipt of the patient's written request to the Hospital Privacy Officer at PO Box 556, Bowdle, SD 57428, the officer will make the PHI available for review. If you believe the PHI we have about you is incorrect or inaccurate, you may request that we make corrections, additions, or deletions upon providing proof of error, i.e. lab tests or other relevant information. If the medical provider agrees, we will correct or amend the record required by applicable law. If the medical provider does not agree and can prove otherwise, i.e. lab tests or physical findings the existing record will not be changed. The patient will be notified in writing of the decision to accept or deny the amendment or correction.

## **EXAMPLES OF DISCLOSURES FOR TREATMENT, PAYMENT, AND HEALTH OPERATIONS:**

- We may disclose your PHI for **treatment**.  
**Example:** The provider may find it necessary, for continuity of care, to share your PHI with a receiving facility.
- We may disclose your PHI for **payment**.  
**Example:** A bill may be sent to you or a third party payer. When billing third party payers, it may be necessary to disclose diagnosis, treatment received, supplies used, etc.
- We may use your PHI for **regular health operations**.  
**Example:** Members of the medical staff, the risk or quality assurance coordinator, or members of the quality assurance team may use information in your PHI to assess care. These statistics are used to improve the quality and effectiveness of the healthcare and services we provide.

## **REQUIREMENT FOR PRIVACY NOTICE:**

This privacy notice is being provided due to recently enacted federal and state laws and regulations establishing new privacy standards. Bowdle Healthcare Center reserves the right to change the terms of this notice.