

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.

What is “Protected Health Information?”

Your Protected Health Information (PHI) is health information that contains identifiers, such as your name, date of birth, Social Security Number or other information that reveals who you are. For example, your medical record is PHI because it includes your name and other identifiers.

What are the duties of Visiting Nurse & Hospice Care in protecting your PHI?

Visiting Nurse and Hospice Care (VNHC) is required by The Privacy Rule of the Administrative Simplification Provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) to maintain the privacy of your health information and to provide to you and your representative this notice of its duties and privacy practices.

VNHC may use your protected health information for purposes of providing you treatment, obtaining payment for your care and conducting health care operations. VNHC may collect various types of PHI from you or your family members and from other sources including other health care providers. This PHI may be used, for example, to provide nursing and other professional services to you, to order medications or other supplies, to evaluate benefits and bill your insurance, to measure performance (such as quality improvement), to review the competence and qualifications of our staff, and to fulfill legal and regulatory obligations.

VNHC has established policies and procedures to guard against unnecessary disclosure of your health information.

What are your rights regarding your PHI?

You have the following rights regarding your health information that VNHC maintains:

Right to Inspect and Copy Your Health Information

You have the right to inspect and copy your health information, including billing records. You must make a written request to inspect and copy records containing your health information to the VNHC Privacy Officer at VNHC, 512 East Gutierrez Street, Santa Barbara, California 93103. If you request a copy of your health information, VNHC may charge a reasonable fee for copying and assembling costs associated with your request. In limited situations, VNHC may deny some or all of your request to see or receive copies of your records, but if we do, we will explain to you why in writing and explain your rights, if any, to have our denial reviewed.

Right to Request Restrictions

You may request, in writing, restrictions on certain uses and disclosures of your health information. You have the right to request a limit on VNHC’s disclosure of your health information to someone who is involved in your care or the payment of your care. You have the right to restrict certain disclosures of your protected health information to a health plan if you pay for a service in full out of pocket (self-pay). If you wish to make a request for restrictions, please write to the VNHC Privacy Officer at VNHC, 512 East Gutierrez Street, Santa Barbara, CA 93103. However, VNHC is not required to agree to your request.

Right to Receive Confidential Communications

You have the right to request that VNHC communicate with you in a certain way. For example, you may ask that VNHC conduct communications pertaining to your health information with you only when no other family members are present. If you wish to receive confidential communications, please contact the VNHC Privacy Officer at (805) 965-5555. VNHC will not request that you provide any reasons for your request and will attempt to honor your reasonable requests for confidential communication

Right to Amend Health Care Information

You or your representative has the right to request that VNHC 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 VNHC. A request for an amendment of records must be made in writing to VNHC, Privacy Officer, 512 East Gutierrez Street, Santa Barbara, California 93103. VNHC may deny the request if it is not in writing or does not include a reason for the amendment. The request also may be denied if your health information records were not created by VNHC, if the records you are requesting are not part of VNHC'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 VNHC, the records containing your health information are accurate and complete. If VNHC denies your request to amend, you may provide VNHC with your own written amendment.

Right to an Accounting

You or your representative has the right to request an accounting of disclosures of your health information made by VNHC 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 VNHC, Privacy Officer, 512 East Gutierrez Street, Santa Barbara, California 93103. The request should specify the time period for the accounting starting on or after April 14, 2003. Accounting requests are only able to be granted if the disclosure was made within the past six (6) years. VNHC 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 be Notified of a Breach of Unsecured PHI

You have the right to be notified if there is a breach of your unsecured protected health information. VNHC takes your privacy rights seriously and takes every precaution to ensure your PHI is secure. In the unlikely event your PHI has been breached, we will notify you in writing regarding the breach.

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 VNHC Privacy Officer at (805) 965-5555. You may also obtain a copy of the current version of VNHC's Privacy Notice at the VNHC website, www.vnhcsb.org.

Under what circumstances may we disclose your PHI?

The following is a summary of the purposes and circumstances under which your health information may be used and disclosed:

To Provide Treatment

VNHC may use your health information to coordinate care within VNHC and with others involved in your care, such as your attending physician, members of the VNHC interdisciplinary team and other health care professionals who have agreed to assist VNHC in coordinating care. For example, physicians

involved in your care will need information about your symptoms in order to prescribe appropriate medications. VNHC may also disclose your health care information to individuals outside of VNHC involved in your care including family members, clergy who you have designated, pharmacists, suppliers of medical equipment, agencies or companies from which you are entitled to and are requesting benefits or services, or other health care professionals.

To Obtain Payment

VNHC may include your health information in invoices to collect payment from third parties for the care you receive from VNHC. For example, VNHC may be required by your health insurer to provide information regarding your health care status so that the insurer will reimburse you or VNHC. VNHC also may need to obtain prior approval from your insurer and may need to explain to the insurer your need for VNHC care and the services that will be provided to you.

To Conduct Health Care Operations

- VNHC may use and disclose health information for its own operations in order to facilitate the function of VNHC and as necessary to provide quality care to all of VNHC's patients. Health care operations include activities such as:
- Quality assessment and improvement activities,
- Activities designed to improve health or reduce health care costs
- Protocol development, case management and care coordination
- 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
- Training of non-health care professionals
- Accreditation, certification, licensing or credentialing activities
- Review and auditing, including compliance reviews, medical reviews, legal services and compliance programs
- Business planning and development including cost management and planning related analyses and formulary development
- Business management and general administrative activities of VNHC

For example, VNHC may use your health information to evaluate its staff performance, combine your health information with other VNHC patients in evaluating how to more effectively serve all VNHC patients, disclose your health information to VNHC staff and contracted personnel for training purposes.

For Appointment Reminders

VNHC may use and disclose your health information to contact you as a reminder that you have an appointment for a home or facility visit by VNHC staff.

For Treatment Alternatives

VNHC may use and disclose your health information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

Fundraising Activities

We may use medical information about you to contact you or your family in an effort to raise money for the Agency and its operations. We may disclose medical information to the VNHC Foundation so that the VNHC Foundation may contact you in raising money for the Agency. We would only release contact information, such as your name, address, and phone number and the dates you received treatment or services with the Agency. We may also use PHI for grant application and reporting purposes. If you do not want to be contacted for fundraising efforts, you must notify VNHC Foundation at (805) 965-5555. You may opt out of receiving fundraising communications at any time.

The following is a summary of the purposes and circumstances under which your PHI may also be used and disclosed:

When legally required

VNHC will disclose your health information when it is required to do so by any Federal, State or local law.

When there are risks to public health

VNHC may disclose your health information for public activities and purposes in order to:

- Conduct public health surveillance, investigations and interventions
- Prevent or control disease, injury, or disability
- Report births and deaths
- Report adverse events, product defects, or 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 their workforce as legally required

To report suspected abuse or neglect

VNHC is required to notify authorities if VNHC suspects a patient or any other person in a protected group (i.e. child, dependent adult or elder) is the victim of abuse or neglect.

To conduct health oversight activities

VNHC may disclose your health information to a health oversight agency for activities including audits, civil administrative or criminal investigations, inspections, licensure or disciplinary action. VNHC, 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. In connection with judicial and administrative proceedings VNHC 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 VNHC makes reasonable efforts to either notify you about the request or to obtain an order protecting your health information.

For law enforcement purposes

As permitted or required by State law, VNHC may disclose your health information to a law enforcement official for certain law enforcement purposes as follows:

- As required by law for reporting certain types of wounds or other physical injuries pursuant to a 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 VNHC has a suspicion that your death was the result of criminal conduct including criminal conduct at VNHC
- In an emergency in order to report a crime

To coroners and medical examiners

VNHC 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.

To organ donation organizations

VNHC may disclose your health information to organ donation organizations that you have designated to assist with organ, eye or other tissue donations.

To funeral homes

VNHC may disclose your health information to your selected funeral home 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, VNHC may disclose your health information prior to and in reasonable anticipation of your death.

In the event of a serious threat to health or safety

VNHC may, consistent with applicable law and ethical standards of conduct, disclose your health information if VNHC, 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.

Disaster relief efforts

We may disclose medical information about you to an entity assisting in a disaster relief effort.

For specified government functions

In certain circumstances, Federal regulations authorize VNHC to use or disclose your health information to facilitate specified government functions relating to military, veterans, national security and intelligence activities, protective services for the President and others, medical suitability determinations and inmates and law enforcement custody.

For worker's compensation

VNHC may release your health information for worker's compensation or similar programs.

All Other Uses and Disclosures of Your PHI Require Your Written Authorization

Other than stated above, VNHC will not disclose your health information without your written authorization. If you or your representative authorize VNHC to use or disclose your health information, you may revoke that authorization in writing at any time. If you revoke your authorization, there will be no further use or disclosure of your PHI as originally authorized; however, there may have been release of your personal health information prior to your revocation.

Your written authorization is required for uses and disclosures of protected health information for marketing purposes and for disclosures that constitute a sale of protected health information.

Changes to This Notice of Privacy Practices

VNHC is required to abide by the terms of this Notice and it may be amended from time to time. VNHC reserves the right to change the terms of this Notice and to make the new Notice provisions effective for all health information that it maintains. If VNHC changes its Notice, VNHC will provide a copy of the revised Notice to you or your appointed representative, and post it on the VNHC website at www.vnhcsb.org.

How to Contact Us About This Notice or Make A Complaint About Our Privacy Practices

VNHC has designated the VNHC Director of Quality and Compliance as its contact person for all issues regarding patient privacy and your rights under the Federal privacy standards. You may contact this individual by phone or in writing at VNHC, Privacy Officer, 512 East Gutierrez Street, Santa Barbara, California 93103 and at (805) 965-5555, Monday through Friday, from 8:00 am until 5:00 pm.

You or your personal representative has the right to express complaints to VNHC and to the Secretary of the Department of Health and Human Services if you or your representative believes that your privacy rights have been violated. VNHC encourages you to express any concerns you may have regarding the privacy of your information. You may contact the VNHC Privacy Officer by phone or in writing at the above phone number and address. You will not be retaliated against in any way for filing a complaint.

EFFECTIVE DATE

This Notice is effective April 14, 2003.

REVISED

This Notice was revised July 1, 2013