

Brewster Parke Resident's Rights

- Summary

- The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires both Brewster Parke and Bel Air Senior Living Communities (facilities) to protect and maintain the privacy of all resident's health information. Because the confidentiality of health information is important to us, we are providing residents with this notice of Privacy Practices to inform residents about (1) our legal duties under HIPAA, (2) the privacy practices of the "facilities", with respect to resident's protected health information, and (3) the privacy rights granted to residents by HIPAA. The "facilities" are required to abide by the terms of this notice to maintain the privacy of resident's protected health information.
- *Protected Health Information* (PHI) is defined as "individually identifiable health information that is transmitted by electronic media or transmitted or maintained in any other form or medium.
- This page is a plain language summary of the "facilities" Notice of Privacy Practices and of the individual privacy rights of residents regarding their health information. Details about how we use and disclose resident's PHI and about resident's privacy rights are provided in full Notice of Privacy Practices.
 - A. The "Facilities" will use and disclose resident's PHI:
 1. For treatment and care of the resident, for payment activities such as submitting claims to Medicare and Medicaid, and for health care operations of the facility or other health care providers involved in the resident's care.
 2. As required by state or federal law.
 3. As required by law enforcement or disaster relief agency activities.
 4. As needed in emergency situations.
 5. For any other use or disclosure that a resident, or a resident's legal representative, authorizes in writing.
 - B. Individual privacy rights of resident's include:
 1. The right to request the "facility" restricts use and disclosure of PHI.
 2. The right to direct confidential communication to an alternate location or by alternate means.
 3. The right of access to their own PHI.
 4. The right to request an amendment of their PHI in the "facility's" medical records.
 5. The right to accounting of disclosures of PHI made by the "facility in the six years prior to the date on which accounting is requested, with exceptions.
 6. The right to receive a paper copy of this notice upon request.
 7. The right to file complaints if they believe their privacy rights have been violated.
 - The facilities reserve the right to change the terms of this Notice of Privacy Practices and to add new provisions effective for all Protected Health Information that we maintain. The Privacy Officer will provide residents with revised notices as necessary, and upon resident request.

- NOTICE OF PRIVACY PRACTICES AND INDIVIDUAL RIGHTS CONCERNING PROTECTED HEALTHY INFORMATION
- 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.

- If you have any questions about our Privacy Practices, or this notice, please contact John S. Childs II, privacy officer.
- The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires our facilities to protect and maintain the privacy of all residents' health information. Because the confidentiality of health information is important to us, we are providing residents with this NOTICE OF PRIVACY PRACTICES to inform residents about (1) our legal duties under HIPAA, (2) the privacy practices of our facilities with respect to residents' protected health information, and (3) the privacy rights granted to residents by HIPAA.
- To help you better understand our Notice of Privacy Practices; here are some important HIPAA definitions:
 - *Protected Health Information* (PHI) is defined as individually identifiable health information that is transmitted by electronic media or transmitted or maintained in any other form or medium.
 - *Authorization* is written document signed by a resident that allows our facility to use or disclose PHI for purposes other than treatment, payment and health care operations.
 - *Disclosure* means the release, transfer, provision of access to, or divulging in any manner of health information outside of our facility.
 - *Use* means the sharing, employment, application, utilization, examination, and analysis of a resident's health information by the facility.
 - *Health Care* refers to any treatment, care, services or supplies related to the health of maintenance, palliative, and counseling care and services, or the sale of drugs, devices, equipment and other items in accordance with a prescription.
 - *Designated Record Set* refers to medical and billing records created and maintained by the facility for a resident's care and treatment and for payment associated with a resident's care.

A. Facility's Use and Disclosure Resident's PHI:

1. The facility will use PHI internal for the treatment and care of the resident, for payment activities such as submitting claims to Medicare and Medicaid, for health care operations such as conducting quality assessments and improvement activities, for emergency care operations such as calling for an ambulance or paramedics, and for disaster relief agency activities.
2. The facility may disclose to a family member, or other close relative or close personal friend of the resident, or any other person identified by the resident, PHI that the person needs to know concerning the resident's care of payment related to the resident's care.
3. If the resident is present and has the capacity to make health care decisions, the facility may use or disclose PHI with others present if the facility provides the resident with an opportunity to object and obtain the resident's agreement, or if the facility reasonably infers from the circumstances, based upon the exercise of professional judgment, the resident does not object.

4. The facility will use certain information about a resident to maintain a directory of all residents in the facility. The information includes the resident's name, his or her location in the facility, a general description of the resident's condition that does not communicate specific medical information, and the resident's religious affiliation. Resident information included in the facility directory will be disclosed only to a clergy member or other persons who ask for the resident by name. All residents may be subject to the use of their information by exercising their right to Restrict PHI as described in Section B (3).
5. The Facility will disclose PHI without a resident's authorization only as follows
 - a. For treatment or care activities of a resident involving another health care provider, such as a pharmacy, laboratory, X-ray Company, etc.
 - b. For payment activities, including claims submitted to Medicare, Medicaid, private insurance carriers, etc.
 - c. To another health care provider with which the resident has or has had a relationship, for healthcare operations to manage the resident's care and the facility's coordination of a resident's care.
 - d. For purposes of health care fraud and abuse detection and compliance.
 - e. For the facility to monitor its own performance in coordinating resident's care.
 - f. When disclosure is required by state or federal law, such as in response to a subpoena or court order, to health departments for protection of the public's health and safety, to coroners for funeral directors, or to law enforcement.
6. The facility is required to disclose PHI to a resident or his or her legal representative when requested in writing, and to the Secretary of the Department of Health and Human Services for the purpose of determining the facility's compliance with HIPAA.
7. The facility may not disclose PHI without a resident's authorization for purposes of marketing or any purpose not covered above. A resident's PHI may only be used for purposes other than treatment, payment, and health care operations if the resident signs and authorization. A resident has the right to revoke his or her authorization in writing at any time. A resident's revocation of authorization is effective only to the extent that the facility has not already taken action in reliance on the authorization.
8. Any disclosure of PHI will be restricted to the minimum information necessary for the facility to accomplish the activity, treatment, payment, or other intended purpose of the use of disclosure.

B. Individual Rights of the Resident

- a. HIPAA provides all residents with certain rights regarding how the facility uses or discloses their health information. A resident may exercise any of these rights by contacting the facility's privacy officer. Note that some of these rights require a request in writing. Resident's privacy rights include:
 1. The right to request the facility restrict certain uses or disclosures of PHI:
 - a. A resident may exercise this right to restrict how the facility uses and discloses his or her PHI for treatment, payment or health care operations. A resident may also request the facility not discuss their PHI with certain persons, such as family members or friends.

- b. Although the facility will consider all reasonable requests for restriction, we are not required to agree to a resident's request for restriction. If the facility agrees to a restriction, we are bound by our agreement. A resident's request for restriction must be in writing. Any restriction that the facility agrees to may be terminated in writing at any time.
2. The right to request receipt of confidential communications at a place or by means indicated by the resident:
 - a. Residents may submit a request to receive communications of PHI by alternative means or alternative locations (such as information as to how payment will be handled or providing an alternative address or other method of contact). The facility will accommodate all reasonable requests.
3. The rights to access PHI:
 - a. Residents have a right to access, inspect, and copy their PHI as maintained in designated medical record set by the facility. This right does not apply:
 - i. To Psychotherapy notes or if the PHI was compiled in reasonable anticipation of, or for use in, civil, criminal or administrative action of proceeding; or
 - ii. To PHI obtained from someone other than the health care provider under a promise of confidentiality and a resident's request for access would be reasonably likely to reveal the source of the information.
 - b. The facility will act on requests for access to PHI no later than 30 days after we receive a resident's request for access. If resident requests a copy of PHI, the facility will charge fees as follows:
 - i. Records Search Fee \$15.00
 - ii. First ten pages \$1.00 per page
 - iii. Page 11 through 50 \$0.50 per page
 - iv. Page 51 and higher \$0.25 per page
 - v. Actual postal charges, if applicable
 - c. If the facility is unable to grant a resident's request we will provide an explanation in writing, along with a description of a resident's right to review the denial, if applicable.
4. The right to amend incorrect or incomplete facts in a resident's PHI as maintained in a designated record set.
 - a. A resident may request an amendment to his or her PHI maintained by the facility in a designated record set except as follows
 - i. The record was not created by the facility.
 - ii. The record is not part of our designated medical record set.

- iii. The record would not be available for inspection for the same reasons explained in the “The Right To Access PHI” (see above) or:
 - iv. The record is already complete and accurate
 - b. The facility must act on allowable requests to amend PHI within 60 days of receipt of a written request. If a resident’s request to amend PHI is accepted by the facility, we will inform him or her about our acceptance, attach the amendment to the resident’s medical record and notify all persons who may have received the inaccurate or incorrect PHI.
- 5. The right of accounting of disclosure PHI:
 - a. Residents have the right to an accounting of disclosures of PHI made by the facility in the six years prior to the date on which the accounting is requested, except for the disclosures made:
 - i. To carry out treatment, payment or healthcare operations.
 - ii. To individuals of PHI about themselves.
 - iii. Incident to uses or disclosures otherwise permitted by HIPAA.
 - iv. Pursuant to an authorization given by the resident.
 - v. For the facility’s directory or to persons involved in the resident’s care of other notification purposes.
 - vi. For emergency, national security or intelligence purposes.
 - vii. Prior to the effective date of the HIPAA Privacy regulations (April 14, 2003)
 - b. Residents or their legal representatives may request an accounting in writing. The facility must act upon the request within 60 days of receipt of the request.
- 6. Residents and their legal representatives have the right to receive a paper copy of this notice upon request.

C. Complaint Process

- a. Residents or their legal representatives have the right to file a complaint if they believe that their privacy rights have been violated. Residents should first register their complaint, either verbally or in writing, with the facility’s privacy officer. The privacy officer will investigate all complaints and will inform the resident about the procedure for submitting complaints to the Secretary of the Department of Health and Human Services.
- b. Residents will never be retaliated against in any way for filing such complaints.
- c. The facility reserves the right to change the terms of this Notice of Privacy Practices and to add new provisions effective for all Protected Health Information that we maintain. The Privacy Officer will provide residents with revised notices as necessary, and upon a resident’s request.