



LEADERS IN HOSPICE AND PALLIATIVE CARE

A caring not-for-profit partnership of Bellin Health, St. Mary's and St. Vincent Hospitals

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.

Federal law requires Unity to maintain the privacy of your Protected Health Information (PHI). Unity is required by law to give you this notice and to comply with the terms and conditions of the most current notice.

USE AND DISCLOSURE OF HEALTH INFORMATION

Unity may use your health information, information that constitutes PHI as defined in the Health Insurance Portability and Accountability Act, also known as "HIPAA", for purposes of providing you treatment, obtaining payment for your care and conducting health care operations. Unity has established policies to guard against unnecessary disclosure of your health information.

BY LAW, WE ARE ABLE TO USE OR DISCLOSE YOUR HEALTH INFORMATION WITHOUT YOUR AUTHORIZATION FOR THE FOLLOWING PURPOSES:

Treatment. Unity may disclose your PHI in person, by phone, mail, fax or electronically to coordinate your care. For example, physicians involved in your care may need information about your symptoms in order to prescribe appropriate medications. Unity also may disclose your health care information to individuals outside of Unity involved in your care including family members, privately hired caregivers, clergy whom you have designated, pharmacists, suppliers of medical equipment or other health care professionals that Unity uses in order to coordinate your care. As required by Wisconsin law we will obtain your authorization before disclosing psychotherapy notes or HIV test results to other health care professionals for treatment purposes.

Payment. Unity may use or disclose your PHI to bill and collect payment from you, your insurance company or other parties responsible for paying for your services. For example, Unity may be required by your health insurer to provide health care status information so that the insurer will reimburse you or Unity, unless otherwise restricted as further described in this notice. Unity also may need to obtain prior approval from your insurer and may need to explain to the insurer your need for hospice care and the services that will be provided to you. As required by Wisconsin law we will obtain your authorization before disclosing psychotherapy notes or HIV test results for payment purposes.

Health Care Operations. Unity may use and disclose PHI to facilitate the health care operations of Unity and provide quality care to all of Unity's patients. Health care operations include such activities 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 Unity
- Fundraising

- Listing patient names on memorial service programs and on permanent memorials

For example Unity may use your health information to evaluate its staff performance, combine your health information with other Unity patients in evaluating how to more effectively serve all Unity patients, disclose your health information to Unity staff and contracted personnel for training purposes, use your health information to contact you as a reminder regarding a visit to you, or contact you or your family as part of general fundraising and community information mailings (unless you tell us you do not want to be contacted).

Jack and Engrid Meng Residence. If you are receiving care in Unity's Jack and Engrid Meng Residence, Unity may disclose certain information about you including your name, your general health status, your religious affiliation and room location while you are a patient. Unity may disclose this information to people who ask for you by name. Please inform us if you do not want your information to be included in the directory.

Notification and Communication with Family and Friends. Unity may disclose your PHI to a family member, your personal representative or other person responsible for your care or payment of your care, to notify them of your location, general condition, or death. Unity may also disclose your PHI for notification purposes to public or private entities assisting in disaster relief efforts. We will give you the opportunity to agree or object before disclosing your information in these situations. If you are unable to agree or object to a disclosure, or in cases of emergency, we will use our best judgment in communicating with your family and others.

Fundraising Activities. Unity may use information about you including but not limited to name, address, gender, date of birth, treating physician, scope of services received and outcome information in order to identify you or your family for our own fundraising opportunities. Unity may also release this information to a related Unity foundation. You may opt out of receiving fundraising communications from us at any time. If you do not want Unity to contact you or your family, please contact Unity's Director of Development by calling 920-338-111 or toll free at 800-990-9249 and indicate that you do not wish to be contacted.

Appointment Reminders/Additional Communications. Unity may use and disclose your PHI to contact you as a reminder that you have an appointment for a home visit or give you test results or provide you with surveys regarding your care.

Treatment Alternatives. Unity may use and disclose your PHI to inform you about or recommend possible treatment options or alternatives that may be of interest to you.

Public Health Activities. Unity may disclose your PHI for public health activities and purposes. These activities generally include but are not limited to the following:

- Prevent or control disease, injury or disability, report disease, injury, vital events such as death and the conduct of public health surveillance, investigations and interventions
- Report to cancer registries or other similar registries
- Report adverse events, product defects, to track products or enable product recalls, repairs and replacements and 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 condition or who may be at risk of contracting or spreading a disease or condition

Report Abuse, Neglect or Domestic Violence. Unity is allowed to notify government authorities if Unity believes a patient is the victim of abuse, neglect or domestic violence. Unity will make this disclosure only if you agree or when required or authorized by law.

Health Oversight Activities. Unity may disclose your PHI to a health oversight agencies responsible for overseeing our operations; this may include audits, investigations, and inspections related to oversight of the health care system or government benefit programs. For example, Unity may disclose your PHI to regulatory agencies conducting a review of our quality of care.

Judicial and Administrative Proceedings. Unity 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 Unity makes reasonable efforts to either notify you about the request or to obtain an order protecting your health information.

Required or Permitted by Law. Unity may disclose your PHI to law enforcement officials for law enforcement purposes as follows:

- As required by law for reporting of certain types of wounds or other physical injuries
- To identify or locate a suspect, fugitive, material witness, or missing person.
- Under certain limited circumstances, when you are the victim of a crime
- If Unity has a suspicion that your death was the result of criminal conduct
- As required by law we may disclose PHI to the proper authorities for a patient in the custody of law enforcement or in a correctional institute
- To comply with a court order, warrant, subpoena, summons or other law enforcement purposes
- In an emergency in order to report a crime or criminal conduct

Coroners and Medical Examiners. Unity may disclose your PHI to coroners and medical examiners for purposes of determining your cause of death or for other duties. If necessary to carry out their duties, Unity may disclose your health information prior to and in reasonable anticipation of your death.

Funeral Directors. Unity may disclose your PHI to funeral directors consistent with applicable law and if necessary, to carry out their duties with respect to your funeral arrangements. For example, we may provide HIV test results to a funeral director or other persons who prepare a body for burial.

Organ, Eye or Tissue Donation. Unity may use or disclose your PHI to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs, eyes or tissue for the purpose of facilitating the donation and transplantation.

Research Purposes. Unity may, under very select circumstances, use your PHI for research. Before Unity discloses any of your health information for such research purposes, the project will be subject to a special approval process.

In the Event of a Serious Threat to Health or Safety. Unity may, consistent with applicable law and ethical standards of conduct, disclose your PHI if Unity, in good faith, believes that such disclosure is necessary to prevent or lessen a serious and imminent threat to health or safety of you or the public. For example, Unity may disclose your PHI to the Department of Transportation if your medical condition affects your ability to safely drive a car.

Essential Government Functions. In certain circumstances, Federal regulations authorize Unity to use or disclose your PHI to carry out certain essential government functions. For example, Unity may disclose PHI to a government agency for national security or intelligence activities, a correctional institution or other law enforcement as required by law.

Worker's Compensation. Unity may release your PHI to the appropriate persons in compliance with worker's compensation laws or similar programs. For example, Unity may provide your employer with information about your work-related injury.

Marketing and Sales. Unity will obtain your authorization before using your PHI for marketing or sales purposes, as required by law. For example, Unity will obtain your authorization if we want to use your PHI in an article about Unity. You may revoke this authorization at any time.

Limited Data Set. Unity may use or disclose a limited data set of your health information, that is, a subset of your health information from which all identifying information has been removed, for purposes of research, public health, or health care operations. Prior to our release, any recipient of that limited data set must agree to appropriately safeguard your health information.

Other Uses of Your PHI. Other than stated above, Unity will ask for your written authorization before using or disclosing your PHI for situations not described in this notice. You may revoke that authorization at any time.

YOUR HEALTH INFORMATION RIGHTS

You have the following rights regarding your PHI that Unity maintains:

Request Restrictions on Certain Uses and Disclosures. You have the right to request restrictions on how Unity uses or discloses your PHI for treatment, payment, health care operations, communications to family or friends or disclosure to disaster relief agencies. Unity is not required to agree to or grant restriction requests. Unity will honor your request to restrict disclosure of your PHI to your health plan for payment and healthcare operations purposes and if not otherwise required by law when you or someone on your behalf pays for your services in full. Please forward your written restriction request to our Privacy Officer.

Request to Receive Confidential Communications of Health Information. You have the right to request to receive your PHI through a certain method or at a certain location. For example, you may ask that Unity only conduct communications pertaining to your health information with you privately with no other family members present. If you wish to receive confidential communications, please send your written request to the Privacy Officer.

Inspect and Obtain a Copy of Your Health Information. You have the right to inspect and obtain a copy your PHI, including billing records. You have the right to request that the copy be provided in an electronic form or format; for example as a PDF saved onto a CD. If the form and format are not readily producible, then Unity will work with you to provide it in a reasonable electronic form or format. This right of access does not apply to psychotherapy notes which are maintained for the personal use of a mental health professional. If Unity denies your request for review or to obtain a copy you have the right to have our denial reviewed. Unity may charge a reasonable cost-based fee for copying and mailing your PHI. If you wish to review or request a copy of your PHI please contact the Medical Records Department at 920-338-1111 or 800-990-9249.

Request an Amendment of Your PHI. If you believe your PHI is incorrect you have the right to request that Unity amend it. If you wish to request an amendment of your PHI send the written amendment request to the Privacy Officer. Unity will review your request and notify you in writing of the final decision. If the request is denied you may appeal the decision. Unity may only amend PHI that is created and maintained by Unity.

Receive an Accounting of Disclosures of Your PHI. You have the right to request an accounting of certain types of disclosures of your PHI made by Unity. Unity will provide you with the first accounting in a 12-month period at no cost to you; Unity will charge the cost of producing the information for all other requests.

Receive Notice of a Breach of Your PHI. As required by law, you have the right to receive notification if your health information is acquired, accessed, used or disclosed in an unauthorized manner.

Receive a Copy of This Notice. You have the right to receive a copy of Unity's Notice of Privacy Practice. Unity may change our privacy practices described in this notice at any time. Changes to Unity's privacy practices apply to all PHI we maintain. You may choose to review our current Notice online at www.unityhospice.org, by requesting a copy from your care team or by contacting Unity's Privacy Officer.

File a Complaint. If you are concerned that your privacy rights have been violated you may file a complaint with Unity or with the Secretary of the Department of Health and Human Services Office of Civil Rights. Your complaint will not affect the care and services we provide you in the present or in the future. To file a complaint contact:

Privacy Officer
Unity
2366 Oak Ridge Circle
De Pere, Wisconsin, 54115-9207
920-338-1111 or 800-990-9249

This Notice of Privacy Practices is effective September 23, 2013 and will remain in effect until we revise it.

IF YOU HAVE ANY QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT THE PRIVACY OFFICER AT THE ABOVE ADDRESS AND TELEPHONE NUMBER.