

Women's Center for Health HIPPA Notice

THIS NOTICE OF PRIVACY PRACTICES DESCRIBES HOW MEDICAL INFORMATION MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

This Notice of Privacy Practices is given on behalf of certain health care providers, departments, units, employed health care professionals, students, and members of volunteer groups who are allowed to help you while you are staying in or being treated at a Women's Center for Health facility. All of these entities follow the terms of this Notice of Privacy Practices, and may share your medical information with each other for treatment, payment, or health care operations purposes.

This Notice of Privacy Practices is effective as of April 14, 2003. If you have any questions about this notice, please contact the Women's Center for Health at (630) 416-3300.

Women's Center for Health is required to give you this Notice of Privacy Practices ("Notice") to comply with the regulations (the "Privacy Rule") established under federal law (the Health Insurance Portability and Accountability Act, or "HIPAA"). Women's Center for Health is committed to protecting your medical information, including health information protected by HIPAA and other federal and state laws, and using that information appropriately.

This Notice is intended to describe your rights, and to inform you about the ways in which Women's Center for Health may use and disclose your protected health information, and the obligations Edward has when using and disclosing your protected health information. Your personal physician or any other provider of your health care services may have different policies or notices regarding their use and disclosure of your protected health information which is created in that provider's office.

I. HOW WE USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION

A. The Privacy Rule allows Women's Center for Health to use or disclose protected health information about you for purposes of treatment, payment, and Women's Center for Health's health care operations. Any uses or disclosures for payment or health care operations must be limited to the minimum necessary to accomplish the purpose of the use or disclosure.

1. Treatment. Women's Center for Health may use protected health information about you to provide you with medical treatment or services, to coordinate or manage your health care services, or to facilitate consultations or referrals as part of your treatment.

For example, Women's Center for Health may disclose protected health information contained in your medical record to doctors, nurses, or other Women's Center for Health personnel who are involved in taking care of you. Doctors involved in your treatment will need access to your medical records to determine if you have any conditions or medical history that would affect your treatment. Different departments of Women's Center for Health also may share your medical records in order to coordinate your treatment and care, such as prescriptions, lab work and x-rays. Women's Center for Health also may disclose your medical records to people outside of Women's Center for Health who may be involved in your medical care after you leave a Women's Center for Health facility, including family members, clergy or other health care providers such as nursing homes or home health agencies.

2. **Payment.** Women's Center for Health may use and disclose your medical records to send bills and collect payment from you, your insurance company or other third parties, for the treatment and other services you may receive from Women's Center for Health. For example, Women's Center for Health may need to give your health insurer or HMO information about your treatment so they can pay Women's Center or reimburse you. Women's Center for Health may also tell your health insurer or HMO about a treatment you are going to receive in order obtain prior approval or to determine whether your health plan will cover the treatment.
3. **Health Care Operations.** Women's Center for Health may use and disclose protected health information about you for Women's Center health care operations. These uses and disclosures are necessary to provide quality care to all patients and residents and to facilitate the functioning of Women's Center, including, among other things:
 - Quality assessment and improvement activities;
 - Protocol development;
 - Care management, coordination and related functions;
 - Competence assessments and performance reviews of Women's Center employees;
 - Training, accreditation, certification, licensing, credentialing or other related activities;
 - Insurance related activities;
 - Assess your satisfaction with Women's Center for Health services by asking you to complete a patient satisfaction survey;
 - Medical review and auditing functions, including fraud and abuse detection and compliance programs;
 - Conducting or arranging for legal services;
 - Business planning and development;
 - Internal patient complaint or grievance resolution;
 - Business management and general administrative activities;
 - Creating "de-identified" health information; and
 - Activities relating to improving health or reducing health care costs.

For example, Women's Center for Health may:

- Use medical records to review its treatment and services and to evaluate the performance of its staff in caring for you.
- Combine medical records about many Women's Center patients to decide what additional services Women's Center for Health should offer, what services are not needed, and to study the safety and effectiveness of treatments;
- Disclose information to doctors, nurses, and other Women's Center for Health personnel for training purposes;
- Combine its medical records with medical records from other hospitals and health care providers to compare how it is doing and find ways to make improvements in its care and services it offers;
- Remove information that identifies you from a set of medical records so that others may use it to study health care and health care delivery without learning who the specific patients are; or

- Use and disclose medical records to contact you by telephone or in writing as a reminder that you have an appointment for a test or procedure, or to see your doctor.

- 4. Persons Involved in Your Care of Payment for Your Care.** Women's Center for Health may release protected health information about you to a family member, friend, or someone you designate who is involved in your care or payment of medical bills. Unless you object in writing, Women's Center for Health may also tell your family or friends your condition and that you are an inpatient at the hospital. Women's Center for Health may also disclose your health information to an entity authorized to assist in disaster relief so that those who care for you can receive information about your location or health status.
- 5. Fundraising Activities.** Women's Center for Health may use contact information (such as your name, address, telephone number, dates of services, age and gender) to contact you in the future to raise money for Women's Center for Health. The money raised will be used to expand and improve the services and programs we provide the community. If you do not wish to be contacted for fundraising efforts, you must notify in writing the Women's Center for Health, 1220 Hobson Rd., Ste. 116, Naperville, IL 60540.
- 6. Marketing.** Women's Center for Health may use or disclose your medical records to tell you about or recommend possible treatment options or alternatives that may be beneficial to you. For example, your name and address may be used so that we can send you newsletters or health care bulletins about Women's Center for Health and the services we provide. We may also send you information about health-related products or services that we or others make available and that we think may be useful or of interest to you. You may contact the Women's Center for Health if you do not wish to receive any of our newsletters or other information.
- 7. Research.** Under certain circumstances Women's Center for Health may use and disclose your protected health information for research purposes. Before they begin, all research projects that are conducted at Women's Center for Health are carefully reviewed. This process evaluates the proposed project's use of medical information, trying to balance the needs of medical research with your need for privacy. Before we use or disclose medical information for research, the project will have been approved through Women's Center for Health's research approval process, but we may disclose your medical information to people preparing to conduct the research project, for example, to help them look for patients with specific medical conditions or needs. We will almost always ask for your specific permission if protected health information that identifies you will be used or disclosed in the research project.
- 8. Business Associates.** There are some services at Women's Center for Health that are provided through contracts with business associates. Examples include pharmacy services, certain laboratory tests, and a copy service we use when making copies of your health record. When these services are contracted, we may disclose your health information to our business associate so that they can perform the job we've asked them to do. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Illinois law is more protective of certain information than the Privacy Rule. Accordingly, Women's Center for Health will not disclose your information relating to treatment for mental health, developmental disabilities, alcoholism, drug dependence, or information

concerning the presence of HIV, antigen or non-antigenic products of HIV or an antibody to HIV, without in each case obtaining your authorization unless otherwise permitted or required by Illinois or federal law.

B. The Privacy Rule and Illinois law allow Edward to use or disclose your protected health information/patient health care records without your authorization or informed consent for a number of special functions and activities, described below.

- 1. As Required by Law.** Women's Center for Health is permitted to disclose your protected health information when required to do so by federal, state or local law.
- 2. Public Health Risks.** Women's Center for Health is permitted to disclose your protected health information for public health activities, including:
 - to prevent or control disease, injury or disability, to report vital statistics such as births and deaths, and for public health surveillance or interventions;
 - to report the abuse or neglect of children, elders and dependent adults;
 - to the FDA, to report adverse reactions or product defects or problems, to track products, to enable product recalls, or to conduct post-market surveillance as required by the FDA; and
 - to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition.
- 3. Victims of Abuse, Neglect, or Domestic Violence.** The Privacy Rule authorizes Women's Center for Health to notify the appropriate government authority if Women's Center believes a patient or resident has been the victim of abuse, neglect or domestic violence. Edward will only make this disclosure if you agree, or when required or authorized by law.
- 4. Health Oversight Activities.** Women's Center for Health is permitted to disclose protected health information to a health oversight agency for activities authorized by law, including audits, investigations, inspections, licensure or disciplinary activities, and other similar proceedings. Women's Center may not disclose the protected health information of a person who is the subject of an investigation that is not directly related to that person's receipt of health care or public benefits.
- 5. Disputes, Lawsuits, Administrative Proceedings.** If you are involved in a lawsuit or dispute, the Privacy Rule allows Women's Center for Health to disclose your confidential protected health information in response to a court or administrative order. Women's Center may also disclose your protected health information in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested if that is required by law. Illinois law may require a court order for the release of patient health care records in these circumstances, and may be considered more protective of your privacy than the Privacy Rule.
- 6. Law Enforcement.** The Privacy Rule allows Women's Center for Health to disclose protected health information if asked to do so by a law enforcement official in the following circumstances:
 - In response to a court order, subpoena, warrant, summons or similar process;
 - To identify or locate a suspect, fugitive, material witness, or missing person;
 - About the victim of a crime if, under certain limited circumstances, Women's Center for Health is unable to obtain the person's agreement;

- About a death Women’s Center for Health believes may be the result of criminal conduct;
- About criminal conduct at Women’s Center for Health; and
- In emergency circumstances to report a crime, the location of the crime or victims, or the identity, description or location of the person who committed the crime.

Illinois law generally requires a court order for the release of patient health care records in these circumstances, and may be considered more protective of your privacy than the Privacy Rule. However, Illinois law does allow the release of confidential patient health care records when a crime occurs on the premises and a victim is threatened with bodily harm. Illinois law also requires that gunshot wounds or other suspicious wounds, including burns, that are reasonably believed to have occurred as the result of a crime must be reported to the local police or sheriff. The report must include the nature of the wound and the patient’s name.

- 7. Coroners, Medical Examiners and Funeral Directors.** Women’s Center for Health may disclose protected health information to a coroner or medical examiner to identify a deceased person or determine the cause of death. Women’s Center for Health may also release protected health information about you to funeral directors as necessary to carry out their duties.
- 8. Organ and Tissue Donation.** Women’s Center for Health may disclose protected health information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank to facilitate organ or tissue donation and transplantation.
- 9. Serious Threat to Health or Safety.** If there is a serious threat to your health and safety or the health and safety of the public or another person, Women’s Center for Health may use and disclose your protected health information to someone able to help prevent the threat.
- 10. Specialized Government Functions.** In certain circumstances, the Privacy Rule authorizes Women’s Center for Health to use or disclose your protected health information to facilitate specified government functions.
 - **Military and Veterans.** Women’s Center for Health may disclose the protected health information of armed forces personnel as required by military command authorities for the proper execution of a military mission.
 - **National Security and Intelligence Activities.** Women’s Center for Health may disclose your protected health information to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state, or conduct special investigations.
 - **Medical Suitability Determinations.** Women’s Center for Health may disclose your protected health information to the Department of State for use in making medical suitability determinations.
 - **Inmate and Law Enforcement Custody.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, Women’s Center for Health may release the protected health information of inmates and others in law enforcement custody to the correctional institution or law enforcement official, where necessary (1) for the institution to provide you with health care; (2) to

protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

11. **Workers' Compensation.** Women's Center for Health may release your protected health information for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.
12. **Other Uses of Medical Information.** Other uses and disclosures of medical information not covered by this Notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose medical information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose the medical information about you for the reasons covered in your authorization. You understand that we are unable to take back any disclosure the Women's Center for Health has already made with your permission, and that we are required to retain our records of the care that we provided to you.

II. YOUR RIGHTS REGARDING YOUR PROTECTED HEALTH INFORMATION

1. **Right to Request Restrictions.** You have the right to request restrictions or limitations on Women's Center for Health's uses or disclosures of protected health information about you for treatment, payment or health care operations.
Women's Center for Health is not required to agree to your request. If Women's Center for Health does agree, it will comply with your request unless the information is needed to provide you emergency treatment. A request for restrictions must be in writing, directed to the Women's Center Medical Records Department, and should include (1) what information you want to limit; (2) whether you want to limit its use, disclosure or both; and (3) to whom you want the limits to apply.
2. **Right to Request Confidential Communications.** You have the right to request that Women's Center for Health communicate with you about medical matters through specific channels, that is, in a certain way or at a certain location. For example, you can ask that Women's Center only contact you at work, or only at home, or only by mail. To request confidential communications, you must make a request in writing to the Women's Center Medical Records Department, and your request must specifically and clearly state how or where you want to be contacted. Women's Center for Health will not ask you the reason for your request, and will attempt to accommodate all reasonable requests.
3. **Right to Inspect and Copy.** You have the right to inspect and copy a designated set of your medical records. This designated set typically includes medical and billing records, but may not include psychotherapy notes. Please note that a request to inspect your medical records means that you may examine them at a mutually convenient time or place. If you request a copy of the information, your request must be in writing and must be submitted to the Women's Center Medical Records Department. Women's Center may charge a reasonable fee for the costs of copying, mailing or other supplies associated with your request. Women's Center for Health may deny your request to inspect and copy in certain circumstances. If you are denied access to your medical records, you may have the denial reviewed by a licensed health care professional chosen by Women's Center for Health. The person conducting the review will not be the person who denied your request. Women's Center for Health with the outcome of the review.
4. **Right to Amend.** If, in your opinion, your medical records are incorrect or incomplete, you may request that Women's Center for Health amend your records. You have the right to

request an amendment for as long as the information is kept by or for Women's Center for Health. A request to amend your medical records must be in writing and must be submitted to the Women's Center Medical Records Department. Your written request must give the reasons for the amendment.

Women's Center for Health may deny your request for an amendment if it is not in writing or does not include a reason.

Women's center for Health may also deny your request for amendment if it covers medical records that:

- Were not created by Women's Center for Health, unless the person who actually created the information is no longer available to make the amendment.
- Are not part of the medical records kept by or for Women's Center for Health.
- Are not part of the information which you would be permitted to inspect and copy, as discussed above; or
- Are accurate and complete.

5. **Right to an Accounting of Disclosures.** You have the right to request an accounting of certain disclosures of your protected health information by Women's Center for Health. A request for accounting of disclosures must specify a time period, which may not be longer than six years, and which may not include dates of service before April 14, 2003. A request for accounting of disclosures must be in writing and must be submitted to the Women's Center Medical Records Department. Your written request should indicate in what form you want the disclosure (for example, on paper). The first accounting within a 12-month period will be free; for additional accountings, Women's Center may charge for its costs after notifying you of the cost involved and giving you the opportunity to withdraw or modify your request before any costs are incurred.
6. **Right to Complain.** If you believe your privacy rights have been violated, you may file a complaint with Women's Center for Health and/or with the federal Department of Health and Human Services. Women's Center for Health cannot require you to waive your right to complain in order for you to receive treatment at Women's Center for Health. To file a complaint with Women's Center for Health, contact (630)416-3300.
7. **Right to a Paper Copy of this Notice.** You have the right to a paper copy of this Notice. You may ask us to give you a copy of this notice at any time.

III. AMENDMENTS TO THIS NOTICE

Women's Center for Health reserves the right to amend this Notice at any time. In addition, Women's Center for Health is required to amend this Notice as made necessary by changes in the Privacy Rule. Each version of the Notice will have an effective date on this first page. Women's Center for Health reserves the right to make the amended Notice effective for protected health information Women's Center has at the time the amendment is made, as well as for any protected health information Women's Center may receive or create in the future.

IV. WOMEN'S CENTER FOR HEALTH'S DUTIES

Women's Center for Health is required by the Privacy Rule to maintain the privacy of your protected health information. The Privacy Rule requires that Women's Center for Health provide notice of its privacy practices

to all of its patients or clients. Women's Center for Health's obligations to maintain your privacy, and the situations and circumstances in which your protected health information may be used or disclosed, are described in more detail in this Notice of its legal duties and privacy practices. Women's Center for Health is required to comply with the terms and condition of this Notice, and may not amend this Notice except as set forth above.

Data Sharing Agreement

NOTICE OF PRIVACY PRACTICES

Covered Entity maintains its Designated Record Set through the use of an electronic health record ("**EMR System**") shared with Edward Hospital, Linden Oaks Hospital, Elmhurst Memorial Hospital, Edward Health Ventures, Edward Medical Group, Linden Oaks Medical Group, Sandwich Family Client, Yorkville Family Client, Elmhurst Clinic, Elmhurst Primary Care Associates, Elmhurst Medical Group, and DuPage Medical Group, all of which participate in Illinois Health Partners ACO, an accountable care organization (the "**ACO**"). Through the EMR System, PHI of patients of Covered Entity is combined with that of the other Covered Entities that participate in the EMR System (each, a "**Participating Covered Entity**" and collectively, the "**Participating Covered Entities**"), such that each patient has a single, longitudinal health record with respect to health care services provided by the Participating Covered Entities.

Through the EMR System and the ACO, the Participating Covered Entities have formed an organized system of health care in which the Participating Covered Entities participate in joint utilization review and/or quality assurance activities, and as such qualify to participate in an Organized Health Care Arrangement ("**OHCA**"). With limited exceptions, as OHCA participants, all Participating Covered Entities and the ACO may use and disclose the PHI contained within the EMR System for the Treatment, Payment and Health Care Operations purposes of each of the OHCA participants and the ACO.

"EPIC CARE EVERYWHERE ACKNOWLEDGMENT OF UNDERSTANDING:

We participate in Epic Care Everywhere program ("Care Everywhere"). Care Everywhere allows healthcare organizations that use Epic electronic health record ("EHR"), like us and other participating systems, to share your medical records through secure, encrypted connections for purposes of enabling your treating providers to access your medical records when treating you. Care Everywhere allows providers real-time access to his or her patient's medical records which includes but is not limited to medical history, previous diagnoses, results of diagnostic tests (e.g. labs, cardiology, radiology), medications, allergies, progress notes and other crucial medical information without having to wait for these records to be transferred from one facility to another. However, when it comes to your medical records you have certain rights and do not have to share your medical records through Care Everywhere and can "opt out". If you do not want to share your medical records through Care Everywhere, please contact the Edward-Elmhurst Health Information Management Department at 331-221-6990 and inform them that you are "opting out" of Care Everywhere ask them to complete the necessary steps to remove you from Care Everywhere.

PLEASE NOTE, WE WILL MAKE YOUR MEDICAL RECORDS AVAILABLE TO OTHER HEALTHCARE ORGANIZATIONS AND PROVIDERS THROUGH CARE EVERYWHERE UNTIL SUCH TIME YOU

DECIDE TO “OPT OUT” AND BE REMOVED FROM CARE EVERYWHERE.”