

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.

THIS NOTICE OF PRIVACY PRACTICES (this "Notice") provides a summary of how **Hospice of the Northwest** (the "*Hospice*") may use and disclose health information about you, your rights, and the Hospice's obligations about health information.

USES AND DISCLOSURES OF HEALTH INFORMATION

The following is a summary of the purposes for which the Hospice may use and disclose health information about you. Not every type of use or disclosure is listed, but the general ways in which we use and disclose information will fall under these purposes.

Uses and Disclosure for Treatment, Payment, and Health Care Operation

To Treat You. The Hospice may use and disclose health information about you to provide care to you and to coordinate care within the Hospice and with others involved in your care, such as your attending physician, members of the Hospice interdisciplinary team, and other health care professionals. For example, physicians involved in your care will need information about your symptoms to prescribe appropriate medications.

To Bill for Your Services. The Hospice may use and disclose health information about you to be paid by third parties or by you for the care you receive from the Hospice. For example, your health insurer may require the Hospice to provide information regarding your health care status so that the insurer will reimburse you or the Hospice. The Hospice also may need to obtain prior approval from your insurer and may need to explain to the insurer your need for hospice services.

To Run the Hospice. The Hospice may use and disclose health information for its own operations to run the Hospice and as necessary to provide quality care to all of the Hospice's patients. For example, the Hospice may use health information about you to evaluate its staff performance, may combine health information about you with other Hospice patients to see how to more effectively serve all Hospice patients, may disclose health information about you to Hospice staff for training purposes, and may use health information about you to contact you as a reminder regarding a visit to you, or send you informational mailings.

Uses and Disclosures of Health Information if You Do Not Object. As long as you do not object, the Hospice may use and disclose health information about you in the following situations.

Individuals Involved in Your Care. The Hospice may disclose health information about you to a friend, family member, or other person you designate who is involved in your care or the payment for your care.

Notification Purposes. The Hospice may use and disclose health information about you directly or to an entity assisting in a disaster relief effort and so that your family can be notified about your condition and location.

Directory Information. The Hospice may include certain limited information about you in the facility directory.

For Emergency Services. The Hospice may disclose health information to emergency responders to help them respond to 911 calls for assistance.

Other Uses and Disclosures of Health Information Without Your Authorization. The Hospice may use and disclose health information about you without an authorization as may be required or permitted by law. The Hospice has to meet many conditions in the law before it can use or disclose health information for these purposes.

For Fundraising Activities. The Hospice may use limited information about you, such as your name, address, phone number, age, treating physician, and the dates you received care, to contact you to raise money for the Hospice. The Hospice also may disclose this information to a related Hospice foundation. You have the right to opt out of receiving fundraising communications.

When Legally Required. The Hospice will disclose health information about you when it is required to do so by federal, state, or local law.

To Business Associates. The Hospice may disclose health information about you with its contractors who create, receive, maintain, or transmit health information for certain activities on behalf of the Hospice. All these business associates must agree to safeguard your information.

For Public Health. The Hospice may use and disclose health information about you for public activities, such as to: prevent disease and injury; report disease, injury, and vital events (such birth or death); assist with the public health surveillance, investigations, and interventions; report adverse events, and product defects; help with product recalls; and notify a person who may be at risk of getting or spreading a disease.

To Report Abuse, Neglect, or Domestic Violence. The Hospice must notify government authorities if it believes someone is the victim of abuse, neglect, or domestic violence. The Hospice will make this disclosure only when specifically required or authorized by law or when the patient agrees to the disclosure.

To Conduct Health Oversight Activities. The Hospice may disclose health information about you to a health oversight agency for activities authorized by law, such as for audits, investigations, inspections, licensure, or disciplinary actions.

For Legal Actions. The Hospice may disclose health information about you for lawsuits and legal actions, such as court orders, subpoenas, discovery requests, and other lawful process.

For Law Enforcement. The Hospice may disclose health information about you to a law enforcement official for certain law enforcement purposes including: as required by law; for reporting of certain types of injuries; as required by a court order, warrant, subpoena, summons, or similar process; and, in limited situations, about a person who is a victim of a crime.

To Coroners and Medical Examiners. The Hospice may disclose health information about you to coroners and medical examiners for purposes of determining cause of death or for their other duties.

To Funeral Directors. The Hospice may disclose health information about you to funeral directors, as permitted by law, as necessary for them to carry out their duties with respect to funeral arrangements. If necessary to carry out their duties, the Hospice may disclose health information about you prior to and in reasonable anticipation of your death.

For Organ, Eye, or Tissue Donation. The Hospice may use, or disclose health information about you to organ procurement organizations, for organ, eye, and tissue donation and transplant purposes.

For Research Purposes. The Hospice, under very limited circumstances, may use and disclose health information about you for research.

Where there is a Serious Threat to Health or Safety. The Hospice may use and disclose health information about you if the Hospice believes that the disclosure is necessary to prevent or lessen a serious and imminent threat to someone's health and safety.

For Special Government Functions. The Hospice may use or disclose health information about you for special government functions, such as military and veterans, national security, protective services for the President, and law enforcement custody.

For Worker's Compensation. The Hospice may disclose health information about you for worker's compensation and similar programs.

Incidental Disclosures. Incidental disclosures of health information about you may occur as a by-product of permitted uses and disclosures.

De-identified Information and Limited Data Sets. The Hospice may use and disclose health information that has been "de-identified" by removing certain identifiers (such as name and address) making it unlikely that you could be identified. We also may disclose limited health information, contained in a "limited data set," as allowed by law.

Personal Representatives. Minors and incapacitated adults may have "personal representatives." These personal representatives may be able to act on the individual's behalf and exercise the individual's privacy rights.

Authorization to Use or Disclose Health Information. Other than is stated above, the Hospice will not disclose health information about you without your written authorization. The Hospice generally will not sell health information about you, use or disclose health information about you for marketing, or use or disclose health information about you in psychotherapy notes without your authorization. Generally, you may revoke an authorization in writing at any time. If you revoke your authorization, then the Hospice no longer will use or disclose health information about you for the reasons covered by your authorization, except to the extent that the Hospice already relied on your authorization. The Hospice cannot take back any disclosures already made based on your authorization. The Hospice is required to retain our records of the care that the Hospice provided to you. Certain information, such as information related to mental health, AIDS/HIV, substance abuse, and genetic testing, may have additional protections under federal and state law.

YOUR RIGHTS

When it comes to health information about you, you have certain rights. This section explains these rights. To exercise any of these rights, please contact the Contact Person listed below.

Right to Request Limits to Uses and Disclosures. You may request restrictions on certain uses and disclosures of health information about you. Except as required by law, the Hospice does not have to agree to your request. If the Hospice does agree, then the Hospice will comply with your request unless the information is needed to provide you with emergency treatment. The Hospice will agree not to disclose to a health plan information about services for which you pay out-of-pocket in full, subject to certain exceptions.

Right to Receive Confidential Communications. You have the right to request that the Hospice contact you in a certain way. The Hospice will try to honor your reasonable requests.

Right to Get a Copy of Health Information About You. You have the right to see and get a paper or electronic copy of certain health information that the Hospice uses to make decisions about you. The Hospice may charge a reasonable cost-based fee. The Hospice may deny your request in certain limited circumstances. If you are denied access to health information, then, generally, you may request that the denial be reviewed.

Right to Correct Health Care Information. If you believe that health information about you is incorrect or incomplete, you have the right to request that the Hospice correct or amend information that the Hospice uses to make decisions about you. You must give us a reason for your request. We may deny your request in certain situations. If your request is denied, then you may write a statement of disagreement, and the Hospice may include a rebuttal statement.

Right to an Accounting of Disclosure. You have the right to request a list (called an accounting) of disclosures of health information about you made by the Hospice for certain reasons. The request should specify the time period for the accounting, which may not be longer than six years. The Hospice will provide the first accounting at no charge, but may charge a reasonable cost-based fee for other ones during a 12-month period.

Right to a Paper Copy of This Notice. You have a right to get a paper copy of this Notice even if you agreed to receive this Notice electronically.

Right to File a Complaint. If you believe your privacy rights have been violated, then you may contact or submit your complaint to the Privacy Contact. The Hospice encourages you to tell the Privacy Contact about any concerns you may have about the privacy of your information. You also have the right to file a written complaint with the Office for Civil Rights. The quality of your care will not be jeopardized, and you will not be penalized (or retaliated against) for filing a complaint.

DUTIES OF THE HOSPICE

The Hospice is required by law to: maintain the privacy of health information; to provide to you this Notice of its duties and privacy practices; follow this Notice as may be amended from time to time; and notify affected individuals following a breach of unsecured health information.

CHANGES TO THIS NOTICE

The Hospice reserves the right to change this Notice. Changes to this Notice will apply to health information the Hospice already has as well as any information the Hospice creates or receives in the future. The revised Notice will be available upon request, in the Hospice's facilities, and on the Hospice's website.

CONTACT PERSON

The Hospice has designated the Executive Director of Hospice of the Northwest as the contact person for all issues and complaints regarding patient privacy and your rights. If you have any questions or concerns about this Notice, please contact this person at 227 Freeway Drive, Suite A, Mount Vernon, WA 98273, (360) 814-5550 or (800) 894-5877.

EFFECTIVE DATE

This Notice is effective February 5, 2016.