

THIS PRIVACY NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.

I. We are required by law to protect the privacy of your health information.

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This Notice is being provided to you by Barnabas Health Hospice & Palliative Care Centers and its Medical Staff. We are required by law to provide you with this Notice about our privacy practices and legal duties that explains how, when, and why Barnabas Health Hospice and its Medical Staff may use or disclose your protected health information.

We are required by law to maintain the privacy of “protected health information” or “PHI,” which includes individually identifiable health information that relates to your past, present, or future physical or mental health or condition, the provision of health care, or the past, present, or future payment for health care.

At Barnabas Health Hospice, we recognize and respect your right to confidentiality, and we maintain numerous safeguards to protect your privacy. We are required by law to follow the terms of this Notice as currently in effect. We reserve the right to change this Notice at any time and to make the revised Notice effective for all PHI we maintain. You can always obtain a copy of our most current Notice by contacting the Privacy Officer, whose contact information is at the end of this Notice.

II. Permitted Uses and Disclosures - Treatment, Payment, Health Care Operations

The following categories describe different ways that we may use or disclose medical information about you for purposes of treatment, payment or health care operations. For each of these categories of uses and disclosures, we have provided a general description and example below:

Treatment – Means the provision, coordination, or management of your health care, including consultations between doctors, nurses, and other providers regarding your care, and referrals for care from one provider to another. For example, your hospice nurse may disclose your PHI to your physician if he/she is concerned that your condition has changed.

Payment - Means the activities we carry out to bill and collect for the treatment and services provided to you. For example, we may provide information to your insurance company about your medical condition to determine your current eligibility and benefits. We may also provide PHI to outside billing companies and others that process health care claims.

Health Care Operations – Means the support functions related to treatment and payment that help operate our organization function, such as quality improvement, case management, responding to patient concerns, compliance programs, audits, and other important activities. For example, we may use your PHI to evaluate the performance of the staff that cared for you, or we may also combine PHI about many patients to decide what additional services we should offer. In addition, we may remove information that identifies you so that others can use the de-identified information to study health care delivery without learning your PHI.

III. Other Permitted Uses and Disclosures of PHI

In addition to using and disclosing your protected health information for treatment, payment, and health care operations, we may also use or disclose your PHI in the following ways:

Reminders and Health-Related Benefits or Services. We may use PHI to provide you with appointment reminders, contact you regarding an upcoming hospice visit, or to recommend possible treatment

quality, safety or effectiveness of FDA-regulated products or services and to report problems with medications or products; notify people who may have been exposed to a disease or are at risk of contracting or spreading a disease; or notify government agencies if we believe an adult has been the victim of abuse, neglect, or domestic violence, provided that the adult victim agrees or when required by law.

Coroners, Medical Examiners, and Funeral Directors. We may release PHI to a coroner or medical examiner. We may also release health information about patients to funeral directors so they may carry out their duties.

Health Oversight Activities. We may disclose information to federal or state government agencies that oversee our activities.

Law Suits & Disputes. If you are involved in a law suit or dispute, we may disclose your PHI subject to certain limitations.

Required by Law Enforcement. We may release health information about you if asked to do so by law enforcement in response to a court order, subpoena, warrant, summons, or similar process. We also may disclose information to identify or locate a suspect, fugitive, material witness, or missing person. In addition, we may disclose information about a crime victim or about a death we believe may be the result of criminal conduct. In emergency situations, we may disclose PHI to report a crime, to help locate the victims of the crime, or to identify/describe/locate the person who committed the crime.

National Security. We may disclose PHI to authorized officials for national security or other related purposes such as protecting the President of the United States or other heads of state, for conducting intelligence operations.

Inmates. If you are an inmate of a correctional institution or under the custody of law enforcement, we may release PHI about you to the correctional facility or law enforcement officials. This disclosure would be necessary for the institution to provide you with health care; to protect your health and safety and the health and safety of others; or for the safety and security of the correctional institution.

To Avoid Harm. As permitted by law and ethical conduct, we may use or disclose protected health information if we, in good faith, believe the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health and safety of a person or the public, or is necessary for law enforcement to identify or apprehend an individual.

Other