



OAKWOOD

OAKWOOD LUTHERAN
SENIOR MINISTRIES

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.

Oakwood Lutheran Homes Association Inc is required by law to maintain the privacy of your health information and provide you with this notice of our responsibilities and Privacy Practices. We are required to abide by the terms of our Notice of Privacy Practices. Oakwood reserves the right to change the terms of its Notice and make new Notice provisions effective for the health information it creates and maintains. Should our privacy practices change, you will be notified. Revised copies will be posted in the facility and on the Oakwood web site. Upon request, a paper copy is available at the reception desk.

YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION

Your health record is the legal physical property of Oakwood. The information contained within it belongs to you. Under the Privacy Rule of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), you have the following rights regarding your health information. If you wish to exercise any of the following rights, please contact the Health Information Services Privacy Officer at Oakwood.

Right to Request Restrictions

You have the right to ask for restrictions on how your health information is used or to whom your information is disclosed. You may want to limit the health information provided to family or friends involved in your care or payment of medical bills. Oakwood is not required to agree with your request in all circumstances.

The American Recovery and Reinvestment Act (ARRA) (2/18/10) allows you the right to request restrictions of disclosure to a health plan for purposes of payment or healthcare operations when the health information pertains to a service (not treatment) for which the healthcare provider has been paid in full by the resident "out of pocket".

Right to restrict use and disclosure of PHI for Marketing Purposes

An authorization must be obtained by you for use and disclosure of PHI for Marketing Purposes.

Right to restrict uses and disclosures of psychotherapy information

An authorization must be obtained for use and disclosures of psychotherapy information.

Right to restrict use and disclosure that constitutes a sale of PHI

An authorization must be obtained for disclosures that constitute a sale of PHI.

Right to Receive Confidential Communication

You have the right to ask that we communicate your health information to you in different ways or places. For example, you may wish to receive information about your health status in a special private room or through a written letter sent to a private address. We will accommodate reasonable requests.

Right to Access, Visually Inspect and Receive Copies of Your Health Information

You have the right to inspect and receive copies of your health information, including billing records. Oakwood charges the statutory fee in the State of Wisconsin for copying and assembling costs associated with your request. Your health care records are stored in a secure area until destroyed 10 years after discharge or death.

Right to Amend Your Health Information

You have the right to request an amendment to your health information created by Oakwood if you believe it is incomplete or inaccurate. That request may be made as long as the information is maintained by Oakwood. You will be asked to make such a request in writing and give reason as to why you believe your health information is incorrect. If Oakwood did not create the information that you believe is incorrect, or if we disagree with you and believe your health record is correct, Oakwood can deny your request. Amendments to records are made in the form of addenda to the record since changes and/or deletions are not allowed.

Right to an Accounting of Disclosures

You have the right to request an accounting of disclosures that Oakwood has made from your health record for certain purposes authorized by law. Requests should specify the time period to be included in the accounting (starting no earlier than April 12, 2003). Accounting requests may not be made for periods of time exceeding six years. Oakwood will provide the first accounting during any 12-month period without charge. There will be a reasonable cost-based fee for subsequent requests in any 12-month period.

Right to a Paper Copy of This Notice

A copy of the Notice of Privacy Practices is posted in the facility. You have the right to request that we provide you with a paper copy of the Notice at any time, even if you have received one previously. A copy of the Notice is also available on our web site at www.oakwoodvillage.net.

Right to Complain

If you believe your privacy rights have been violated, you may file a complaint with the Health Information Services Director, who is the designated Privacy Officer for Oakwood or with the Corporate Compliance Officer at Oakwood, or with the U.S. Department of Health and Human Services at the Office of Civil Rights Washington, DC. Oakwood encourages you to express any concerns you may have

regarding the privacy of your information. You will not be retaliated against in any way for filing a complaint.

Any other uses and disclosures not described in the Notice of Privacy Practices will be made only with authorization from the individual.

It is our right to be notified following a breach of unsecured PHI.

USE AND DISCLOSURE OF HEALTH INFORMATION

Oakwood Lutheran Homes Association, Inc. may use and disclose your health information, that is, information that constitutes protected health information as defined in the Privacy Rule of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996, for purposes of providing you treatment, obtaining payment for your care and conducting health care operations. Oakwood has established policies and procedures to guard against unnecessary disclosure of your health information. The following is a summary of the most common permitted uses and disclosures of your health information.

To Provide Treatment

Your protected health information may be used to provide care for you and disclose it to others who provide care for you. For example, information obtained will be recorded in your health record and used to determine the course of treatment that best meets your needs. Your physician will document your medical status and give orders for treatments, medications and diagnostic testing to be administered. Nurses and other members of the treatment team will then record the actions they took and their observations of your response to determine its effectiveness and your progress.

Your protected health information may be shared with members of your treatment team, which may include contracted service providers, including physicians, consultants, diagnostic service providers such as lab and x-ray, acute care and emergency providers, (should you require transfer to a hospital or other acute care setting), rehabilitation therapy (physical, occupational and speech therapies), pharmacy services, oxygen therapy, dental services, audiology services, podiatry services, optometry services, suppliers of medical equipment, family members, and other health care professionals as necessary to coordinate services.

We may provide your physician and other providers who will treat you once you are discharged from Oakwood with information from your health record to assure you receive the appropriate follow-up care in your new living environment.

To Obtain Payment

Oakwood may disclose your health information to obtain payment for the cost of your care. For example, a bill may be sent to you or third parties such as your insurance provider that may include information identifying you, listing your diagnoses, procedures and treatments provided plus supplies used. This information may also be shared with your insurance provider and certain medical review agencies on an ongoing basis as necessary to obtain prior approval for programs such as Medicaid or Medicare to obtain payment.

We may provide your protected health information to our contracted health care providers, (Business Associates), who will perform services or provide supplies and medical equipment for you on our behalf, (i.e. lab, x-ray, pharmacy, rehabilitation therapy) so they may obtain payment for their services.

Business Associates

Some services are provided for Oakwood Village through contracts with other individuals or agencies know as Business Associates. Examples include our insurance provider, financial auditors, nursing home software providers and consultants. We may disclose your protected health information to our Business Associates so they can perform the job we have asked them to do and receive payment for their services. To protect your health information, we require our Business Associates to sign a contract promising to appropriately safeguard your information according to the guidelines established by Oakwood's privacy policies and the Privacy Rule of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996.

To Conduct Health Care Operations

We may use and disclose your protected health information for our own operations as necessary to assure provision of quality care to all residents. For example, members of our quality assurance committee, other committees, outside auditors and accrediting agencies may use your protected health information to assess the care provided to you and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the health care services we provide. Other activities include those designed to reduce health care costs, develop protocols, case management and coordination, professional review and performance review, training programs, legal services, business management and general administrative activities.

For the Campus Directory

Oakwood Village maintains a resident directory for internal use that includes your name, address and phone number. You will be asked if you want your name, address and phone number included in the directory. If you check "no" your name, address and phone number will not be included in the directory. The directory is updated periodically. If you decide at a later point in time that you do not want to be included in this directory, notify the receptionist. If you have opted out of being included in the directory, we will not be able to confirm to anyone who inquires of you, either in person or by phone that you are a resident at Oakwood.

For Fundraising Activities

The Oakwood Foundation uses resident names and addresses and those of family members to provide opportunities for them to contribute to Oakwood projects requiring Foundation support. Residents may opt out of receiving fundraising materials for themselves and/or family members by calling the Foundation Office.

For Treatment Alternatives

Oakwood may use and disclose your health information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

To the Food and Drug Administration (FDA)

We may disclose your health information to report adverse events, product defects, to track products or enable product recalls, repairs and replacements and to conduct post-marketing surveillance and compliance with requirements of the Food and Drug Administration.

When There Are Risks to Public health

Oakwood may disclose your health information for the following public activities and purposes: To prevent or control disease, injury or disability, report disease, injury, vital events such as birth or death and the conduct of public health surveillance, investigations and interventions. To notify a person who has been exposed to a communicable disease or who may be at risk of contracting or spreading a disease.

To Coroners, Medical Examiners and Funeral Directors

Oakwood may disclose your health information to coroners and medical examiners for purposes of determining your cause of death or for other duties as authorized by law. Health information may also be disclosed to funeral directors consistent with applicable law and if necessary to carry out their duties with respect to your funeral arrangements.

As Legally Required

Oakwood will disclose your health information when it is required to do so by Federal, State or local law.

In Connection with Judicial and Administrative Proceedings

As permitted or required by law, Oakwood 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 Oakwood makes reasonable efforts to either notify you about the request or to obtain an order protecting your health information.

Law Enforcement

Oakwood may disclose your health information to law enforcement officials as required by applicable law for law enforcement purposes, including, under certain limited circumstances, if you are a victim of a crime or in order to report a crime.

To Report Abuse, Neglect or Domestic Violence

Oakwood may disclose your health information to notify government or legal authorities if we believe you were the victim of abuse neglect, or domestic violence as specifically required by applicable law or when you agree to the disclosure.

Complaint Investigation

Oakwood may disclose your health information to an appropriate health oversight agencies, public health authority or attorney to investigate a complaint registered in good faith which states we or one

of our business associates engaged in unlawful conduct or have otherwise violated professional standards and have potentially endangered one or more residents, workers or the public.

For Organ, Eye or Tissue Donation

Oakwood may use or disclose your health information 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.

For Specified Government Functions

Oakwood may disclose your health information under certain circumstances, according to Federal regulations, to facilitate specified government functions relating to the military and veterans, national security and intelligence activities, protective services for the President and others.

To Health Oversight Activities

Oakwood may disclose your health information to health oversight agencies for activities that include: audits; civil, administrative, or criminal investigations; inspections, licensure or disciplinary action. We may not, however, disclose your health information if you are the subject of an investigation and the investigation does not arise out of and is not directly related to your receipt of health care or public benefits.

For Research

Oakwood may disclose your health information, under certain circumstance, for research that has undergone an extensive approval process.

For Emergency Notification

Oakwood may use or disclose protected health information to notify or assist in notifying a legal representative or another person responsible for your care regarding a significant change in condition or an emergency situation.

In the Event of a Serious Threat to Health or Safety

Oakwood may disclose your health information consistent with applicable law and ethical standards of conduct, if we believe in good faith that such a disclosure is necessary to prevent or lessen a serious and imminent threat to your health and safety or the health and safety of the general public.

For Disaster Relief

Oakwood may release your health information to organizations authorized to handle disaster relief effort, such as the Red Cross, so those who care for you can receive information about your location or health status. You may agree or disagree orally to such release, unless there is an emergency.

To Your Religious Affiliation/Clergy unless you opt out

At the time of move in, you are asked to complete a Resident Options Form. You will be asked if you want your name provided to clergy members who visit Oakwood. If you opt out, your name will not be provided to clergy. If you decide at a later point in time that you do not want to be included on this list, notify the campus chaplain.

Workers Compensation

Oakwood may disclose your health information to the appropriate persons in order to comply with the laws related to Worker's Compensation or other similar programs. If an Oakwood employee is injured while providing care to you, we may release medical information about you if it is pertinent to the case.

Miscellaneous Uses of Your Name and/or Health Information

Upon move in, you are asked to complete a Resident Options form. You will be asked if you want your name on the birthday calendar located in the common area of your living option. If you opt out your name will not be listed. If you decide at a later point in time that you do want to be included on this list, notify the front office staff at UW Campus at 230-4699 or PR Campus 230-4000. We may display your name near the door of your room and to the entry of your living option. We may use or disclose health information to make or confirm an appointment for medical care or services.

Uses and disclosures of your health information, other than described above, will only be made with your individual informed written authorization, which you may revoke in writing at any time, except if action has already been taken.

Any other uses and disclosures not described in the Notice of Privacy Practices will be made only with authorization from the individual.

Uses and disclosures of your health information, other than described above, will only be made with your individual informed written authorization, which you may revoke in writing at any time, except as action has already been taken.