Notice of Privacy Practices

This section describes how medical information about patients may be used and disclosed and how they can get access to this information. Preview this section carefully. (Effective April 11, 2003)

Each time a patient visits Bellin Health or a Bellin Health provider for health care, an electronic and paper record of their visit is made. This record usually contains identification and financial information and information such as symptoms, diagnoses, test results, a description of the physical examination, and a treatment plan. This record of information is often referred to as “medical record” or “health information.” It is used:

- To plan patient care and treatment;
- To communicate information among health care professionals;
- To legally record the care received;
- To verify to the patient or to the patient’s insurance company what services were actually provided;
- To help Bellin Health and all providers approved to practice at Bellin Health evaluate and improve the care they provide and the outcomes they achieve;
- To provide a source of information for important health related research;
- To educate health professionals and students; and
- To provide a source of information for facility planning and marketing.

Bellin Health has always worked to protect patients’ personal health information and will continue to do so. In addition, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) now requires Bellin Health to provide the patient with this notice describing our legal duties and privacy practices concerning the patient’s personal health information. In general, when we use or disclose health information, we are obligated to use or disclose only the least amount of information necessary to achieve the purpose. For example, we will tell the patient’s insurance company what laboratory tests were performed in order to get paid for that work, but we will not tell the insurance company the results of those laboratory tests. We do want the provider to have all the information they need about the patient to provide the best possible care; they would need the names of the tests and the results. The least necessary rule does not apply if the disclosure is to the patient’s health care provider regarding treatment, to the patient themselves, or due to a legal requirement. It is for the benefit of the patient that we are required to abide by the privacy practices described in this notice.

All of the below listed organizations and individuals agree to abide by the terms of this notice. They will share health care information with each other as necessary for the patient’s treatment, to get paid for services, and to carry out other activities such as third party review of health care decisions, and for quality assessment and improvement activities.

This joint notice describes how Bellin Health employees, volunteers, and providers use and share health information. Bellin Health has several separate, but related organizations, which provide quality health care, train future health care professionals (such as doctors, nurses, and radiology technicians), and conduct health sciences research. Bellin Health is made up of the following organizations:

- Bellin Hospital
- Bellin Medical Group Clinics
- Bellin Home Health
- Bellin Home Infusion
- Bel-Regional Home Medical Equipment
- Bellin Retail Pharmacies
- Bellin Psychiatric Center
- Bellin Behavioral Health
- Bellin Foundation
- CT Imaging, LLC
- All providers approved to practice at any Bellin facility. This includes area physicians, podiatrists, dentists, nurse practitioners, physician assistants, and other health professionals.

Bellin Health reserves the right to change the privacy practices described in this notice, in keeping with the law. Changes to our privacy practices would apply to all health information maintained by us. If we change our privacy practices, patients may read a summary of substantive changes on our website at www.bellin.org. Patients may also obtain a revised copy of the privacy notice at the front desk of any of our facilities or on our website at www.bellin.org.

We are able to use health information without the patient’s written authorization for the following purposes:

- **Treatment:** We may use medical information about the patient to provide medical treatment or services. We may disclose medical information about the patient to doctors, nurses, technicians, students preparing for health care related careers, or other personnel who are involved in the patient’s care or treatment. For example, a physician may use the information in a patient’s medical record to determine which treatment option, such as a drug or surgery, best addresses health needs.
The treatment selected will be documented in the patient’s medical record, so that other health care professionals can make informed decisions about care. Different departments of the organization may share medical information about the patient in order to coordinate the different things they may need, such as prescriptions, laboratory work and X-rays. At shift change we will provide information that is vital for the patient’s care. A respiratory therapist will provide a report about to the next therapist who will be taking care of the patient. We may also share health information in person or by phone, letter, fax, or electronically to people outside this system who are involved in the patient’s medical care, such as a primary or referring physician, a long-term care facility, family members, or others we work with to provide services that are part of the patient’s care.

- **Payment:** Here are some cases where we use health information without written authorization for payment purposes. To check eligibility or to determine whether an insurance company will pay for the treatment, Bellin Health will tell the health insurance company about the patient’s treatment plan. Most of the time this information is provided electronically (by computer), or by fax and/or telephone.

In order for an insurance company or another agency to pay for treatment, we must submit a bill that identifies the patient, the diagnosis, and the treatment provided to the patient. As a result, we will pass necessary health information onto an insurer or another agency for Bellin Health to receive payment for medical bills.

- **Health Care Operations:** Here are some cases where we use health information without written authorization for our operational purposes. We may need diagnosis, treatment, and outcome information in order to improve the quality or cost of care delivered by us. These quality and cost improvement activities include evaluating the performance of physicians, nurses, and other health care professionals, or examining the effectiveness of the treatment provided when compared to other patients in similar situations. We contract with reputable and credible companies to help us analyze our data and compare ourselves to other health care providers to see where we can make improvements in the care and services we offer. Information will be removed that identifies the patient from this set of medical information so others may use it to study health care without learning who the specific patients are.

Bellin Health will also use health information for teaching purposes, administrative activities, or for accreditation, certification, or licensing purposes. To remind patients of their appointments for visits, tests, and treatments, we may use the patient’s health information. For example, we will view a patient’s medical record to determine the date and time of their next appointment with us, and then send a reminder letter or call to remind the patient of the appointment.

We will want to let the patient know of other treatments or services we offer that may improve or benefit their health. For example, we may notify a patient with poor circulation to their legs of a new program we offer that might help them. We may communicate good health practices, such as a mailing with information about how to lower cholesterol or stop smoking, and about health fairs, wellness classes, or support groups that we offer. In order to provide more charity care or otherwise improve the health of the community, we may want to contact a patient for fundraising purposes.

Here are some other special instances when we can use health information without written authorization:

1. As required or permitted by law. In certain circumstances, we may have to report some of a patient’s health information to legal entities, such as the police, court officials, or government agencies. Examples of such circumstances include reporting abuse, neglect, or certain physical injuries, or responding to a court order. Bellin Health may notify an appropriate government official if they believe a patient has been the victim of abuse, neglect, or domestic violence. But under state law, Bellin Health will only make this type of disclosure about an adult patient if the patient consents.

2. For public health activities. We may be required to report a patient’s health information to authorities to help prevent or control disease, injury, or disability. This may include using the medical record to report certain diseases, injuries, birth or death information, reactions to medications or problems with products, or to notify people of recalls of products they may be using. We may also have to report certain work-related illnesses and injuries to the patient’s employer.

3. For health oversight activities. We may disclose a patient’s health information to authorities for audit, investigation, inspection, licensure, disciplinary or other purposes related to oversight of the health care system or government benefit programs.

4. For activities related to death. We may disclose a
patient’s health information to coroners, medical examiners and funeral directors so they can carry out their duties, such as identifying the body, determining cause of death, or in the case of funeral directors, to carry out funeral preparation activities.

5. For organ, eye, or tissue donation. We may disclose a patient’s health information to entities involved in obtaining, banking or transplanting organs, eyes or tissue for donation or transplantation purposes.

6. For research. Under certain circumstances, and only after a special approval process, we may use and disclose a patient’s health information to help conduct research. Such research might involve studies related to evaluating the effectiveness of a treatment.

7. To avoid a serious threat to health or safety. As required by law and standards of ethical conduct, we may disclose a patient’s health information to the necessary authorities if we believe, in good faith, that such disclosure is necessary to prevent or minimize a serious and imminent threat to a patient’s or the public’s health or safety.

8. For military, national security, or incarceration/law enforcement custody. If a patient is involved with the military, national security or intelligence activities, or in the custody of law enforcement officials or an inmate in a correctional institution, we may disclose health information to the proper authorities so they may carry out their duties under the law.

9. For workers’ compensation. We may disclose a patient’s health information to the appropriate persons in order to comply with the laws related to workers’ compensation or other similar programs. These programs may provide benefits for work-related injuries or illness.

10. Bellin directory. During the admission process a patient will be asked if we can list in our directory their name, location in our facility, their general health condition (eg, “stable” or “unstable”), and their religious affiliation. The information about the patient contained in our directory will be disclosed to people who ask for that patient by name. However, the information about religious affiliation will only be disclosed to clergy. Patients can tell us whether they object or agree regarding the use of their health information for directory purposes.

When Bellin Health is required to obtain authorization to use or disclose health information:

Except for the situations listed above, any other use or disclosure of health information requires us to obtain a patient’s specific written authorization. For example, if we wanted to make a patient education video and have patients participate in the film, we would need their authorization.

For all patients treated at Bellin Psychiatric Center and the Behavioral Health Clinics, we need a patient’s specific written authorization to release their health information, even for the purposes of treatment, payment, and operations.

If a patient does sign an authorization form, they may withdraw their authorization at any time, as long as their withdrawal is in writing. If a patient wishes to withdraw their authorization, please submit their written withdrawal to the Medical Records Department at Bellin Hospital or to the Bellin site where they signed the authorization form.

Patient Health Information Rights

Patients have several rights with regard to their health information. If they wish to exercise any of the following rights, please contact the Bellin Health Privacy Officer at 920-433-3595. Specifically, they have the right:

1. **To inspect and copy health information:** Patients have the right to inspect and obtain a copy of their health information, with a few exceptions. For example, this right does not apply to psychotherapy notes or information compiled for judicial proceedings. In addition, we may charge the patient a reasonable fee if they want a copy of their health information.

2. **To request an amendment of health information:** If patients believe their health information is incorrect, they may ask us to amend the information. The patient will be asked to make such a request in writing and to give a reason...
as to why their health information should be changed. However, if we did not create the health information that they believe is incorrect, or if we disagree with them and believe their health information is correct, we may deny the request.

3. **To request restrictions on certain uses and disclosures:** Patients have the right to notify us that they want restrictions placed on how their health information is used or to whom their information is disclosed, even if the restriction affects their treatment, our payment, or our health care operation activities. Patients may want to restrict the health information provided to family or friends involved in their care or payment of medical bills, or to restrict the health information provided to authorities involved with disaster relief efforts. If patients receive certain medical devices, they may refuse to release their name, address, telephone number, Social Security number or other identifying information used for tracking the medical device. However, Bellin Health is not legally required to agree to such restrictions. While we will consider each patient’s request, because of the number, complexity, and nature of the services we deliver we may not be able to grant the request.

4. **To receive confidential communication of health information:** Patients have the right to request alternative means or locations where we may communicate their health information to them. For example, a patient may wish to receive a follow up call from their provider at a work telephone number instead of their home number. Or a patient may wish to have their billing information sent to a private address. We will accommodate reasonable requests.

5. **To receive a report listing to whom we have disclosed health information:** In some limited instances, patients have the right to request a report of the disclosures of their health information that we have made during the previous 6 years, but the request cannot include dates before April 14, 2003. This written report must include the date of each disclosure, who received the disclosed health information, a brief description of the disclosed health information, and why the disclosure was made. We must comply with each patient’s request for the report within 60 days, unless they agree to a 30-day extension. We may not charge for this report, unless the patient requests such a report more than once per year. Our report will not include disclosures made to the patient, disclosures where the patient signed the authorization form, or disclosures for purposes of treatment, payment, or health care operations, information that is part of a limited data set, our directory, national security, law enforcement/corrections, and certain health oversight activities.

6. **To obtain a paper copy of this notice:** Upon a patient’s request, they may at any time receive a paper copy of this notice, even if the patient earlier agreed to receive this notice electronically. This notice is available on-line at www.bellin.org. Or patient’s may call the Privacy Officer at 920-433-3595 to request a paper copy of this notice.

7. **To file a complaint:** If a patient believes their privacy rights have been violated, they may file a complaint with us and/or with the Secretary of the Department of Health and Human Services. Complaints in no way affect our care for the patient. To file a complaint with either Bellin Health or the Department of Health and Human Services, please contact the Bellin Health Grievance Coordinator at 920-433-7869 who will provide the patient with the necessary assistance and paperwork.

If patients have any questions or concerns regarding their privacy rights or the information in this notice, please contact the Bellin Health Privacy Officer at 920-433-3595.