



## **NOTICE OF PRIVACY PRACTICES**

Written pursuant to the rules and regulations  
implementing the Health Insurance Portability and  
Accountability Act (or "HIPAA")  
Effective April 14, 2003

MISSION HOSPITAL'S NOTICE OF PRIVACY PRACTICES DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Mission's Notice of Privacy Practices applies only to the care and treatment that you receive at facilities and from service providers operating under the Mission Hospital name, including: Lifeline, Trauma Surgeons Services, Inc., Fullerton Genetics Center, Mission Children's Hospital, Mission Children's Clinic, Mission Children's Dental Program, Mission Rehab and Sports Clinic, Medical Center Pharmacy, Olson Huff Center, Wound Therapy Center, Asheville Surgery Center, 21 Walden Ridge, Suite 20, Madison County Emergency Medical Services (EMS), Mitchell County EMS and Yancey County EMS. It also applies to the infusion services that you receive from Advanced Home Care and to all other services for which Mission bills. Mission's Notice of Privacy Practice covers the privileged doctors and appointed allied health professionals of Mission. Mission's Notice of Privacy Practices does not apply to Asheville Imaging Center, Asheville Specialty Hospital, Mission Children's Clinic – Yancey, Mission Children's Clinic – Mayland, Mayland Family Health Center, Spruce Pine Hospital, or Yancey Community Medical Center. Also, Mission's Notice of Privacy Practices does not apply to you if you are an inmate.

### **WHAT DO WE MEAN WHEN WE SAY "MEDICAL INFORMATION ABOUT YOU"?**

Every time that you come to a doctor's office, hospital, or clinic for treatment, medical information about you – information that, in Mission's Notice of Privacy Practices, we call "protected health information" or "PHI" – is created. For example, when you came to the hospital, you may have filled out a form telling us who you are, where you live, and why you came to the hospital. If you did, you created PHI. During your stay at the hospital, your doctors, nurses, and the other people who take care of you will create more information about you, your condition, and how you are responding to treatment. All of this information, and other information, will be referred to in our Notice of Privacy Practices as "your PHI". In general, "your PHI" includes information about: (1) your past, present or future physical or mental health or condition, (2) the health care that you received, are receiving, or will receive, and (3) the ways that you have paid for, are paying for, or will pay for, your health care.

### **WHY DOES ANYONE ELSE WANT TO KNOW ABOUT YOUR PHI?**

Your PHI is important. Consequently, a lot of people want to know about it. Most people want to know about your PHI for very good reasons. For example, a doctor who is planning to do surgery on you needs to know if you have had any illnesses that will change the way she should do the surgery. Likewise, a scientist who is doing research needs to know if you felt better or worse after taking the medicine he is studying. Although there are many more reasons why people might want to know about your PHI, it is important for you to know that most people who get your PHI get it so that they can help you or help others.

### **HOW DOES MISSION USE YOUR PHI?**

Mission uses your PHI for many purposes – so many purposes, in fact, that it is impossible to list every one here. Below, we have listed some of the main, general purposes for which we use and, sometimes, tell others about your PHI. We have divided these purposes into four categories: (1) Purposes for which we can freely use and share your PHI; (2) Purposes for which we can use and share your PHI only after you have been given an opportunity to agree or object; (3) Purposes for which we can use and share your PHI without first giving you an opportunity to agree or object; and (4) Special cases.

- **PURPOSES FOR WHICH WE CAN FREELY USE AND SHARE YOUR PHI:**

**1. FOR TREATMENT:**

We often use and share your PHI so that we can help you to receive good-quality treatment and care. Sometimes we will share your PHI only with people inside the hospital. For example, if you tell the nurse at the front desk that you are allergic to penicillin, he will tell the doctor who is treating you so that she does not give you penicillin. Other times, though, we will share your PHI with people outside the hospital. For example, if you are from Florida and will return to a hospital near your home after receiving treatment at Mission, we will, upon receiving a proper request, tell people at your Florida hospital about you, your condition, and the care and treatment we have provided to you. That way, your Florida hospital will know everything that it needs to know to provide you good-quality treatment and care.

**2. FOR PAYMENT:**

It is a fact of life that the medical treatment and care you receive at Mission must be paid for. Therefore, we share your PHI with others – like billing departments, collection agencies, insurance companies, health plans, hospital departments, and consumer reporting agencies – so that they can send you, another person, an insurance company, or the government, a bill for our services and/or can collect payment for our services. Usually, we share your PHI with others after you have received treatment. But sometimes we share your PHI with others before you receive treatment so that we can make sure, in advance, that your treatment will be paid for.

**3. FOR OUR HEALTH CARE OPERATIONS:**

Every day, we look at how we can run our business more safely and effectively. In exploring these possibilities, we often use your PHI. For example, we might use your PHI when applying for insurance. Or we might use your PHI when evaluating our doctors' performances. Or we might use your PHI when exploring ways to better manage or administer our business. The end result of these efforts, we hope, is that you will receive better care and better service each time you come to our facilities.

**4. TO MAKE SURE THAT WE ARE PROVIDING GOOD SERVICES:**

We are always trying to improve the quality of the services we provide – and to make sure that the services we provide are the services you and others want to receive. Your PHI and your ideas are very important to us in this regard. If you felt better after having a new kind of surgery performed on you, then we would want other doctors to know about that fact so that they could perform that kind of surgery on their patients. Similarly, if a patient in a New York hospital felt better after sleeping in a special kind of bed, then we would want to know about that fact so that we could look into purchasing that kind of bed for our patients. We do not always use your name, age, gender, or other information that could be used to identify you, when we use your PHI to make sure that we are providing good services.

**5. TO LET YOU KNOW ABOUT OTHER TREATMENTS:**

Sometimes we learn of new treatments that may be helpful to you. In these situations, we might use or share your PHI so that you can find out about all the treatment options that are available to you.

**6. FOR FUNDRAISING:**

Anyone who has ever received a doctor's bill knows that good quality medical services are not free. For this reason, we try to raise money to help pay for the medical care and treatment that we provide. Some of this money helps people who can't afford to pay for their care. Some of this money helps us purchase new and better tools and buildings. And some of this money helps us expand our range of services. Whatever the use, we can assure you that the money we raise helps real people in real situations. After you have been at Mission, we may use or share your PHI so that we or others can contact you and ask you to take part in our important fundraising efforts.

## **7. TO MAKE SURE THAT YOUR BABY RECEIVES GOOD CARE**

If you recently gave birth, your PHI may be important to the people who are taking care of your baby. For example, it may be necessary for your baby's doctor to know that you have the flu so that she can protect your baby from that illness. When you give birth at Mission, some of your PHI is included in your baby's medical record. As a result, we have more of the information we need to offer your newborn good-quality care.

## **8. TO LET YOU KNOW ABOUT OTHER SERVICES**

We sometimes use and share your PHI so that you can be told about services or benefits that you may want to take advantage of.

## **9. TO REMIND YOU ABOUT APPOINTMENTS**

Not all uses of your PHI are exciting and dramatic. We may sometimes use or share your PHI so that we can make sure you show up at your scheduled appointments for care or treatment on time. No, it is not exciting. But it sure is helpful when you're having a busy week.

### **• PURPOSES FOR WHICH WE CAN USE AND SHARE YOUR PHI ONLY AFTER YOU HAVE BEEN GIVEN AN OPPORTUNITY TO AGREE OR OBJECT:**

#### **1. TO PUT YOUR NAME IN THE HOSPITAL DIRECTORY**

Mission keeps a Hospital Directory that lists the name, location, general condition, and room number of our patients. We use this Directory for many purposes. For example, we use the Directory to locate your room when your friends and family members come to visit you. We also use the Directory to let members of the clergy know that you are in the hospital (upon your request) so that you can receive spiritual care. If you come to the hospital for care or treatment, we will use your PHI to create an entry about you in our Directory, but only if (a) you first tell us that it is ok to include your PHI in our Directory, (b) there is an emergency and we think that including your PHI in our Directory is in your best interests, or (c) we cannot communicate with you and think that including your PHI in our Directory is in your best interests. If we include your PHI in our Directory for reason (b) or (c), then we will tell you about that fact and will give you an opportunity to agree or object to our action as soon as possible.

#### **2. TO LET OTHERS KNOW WHERE YOU ARE AND HOW YOU ARE DOING:**

It is often important for other people to know where you are and how you are doing. For example, if there is a major flood near your house, an out-of-town family member or friend who is responsible for you will want to know that you are safe. Mission may help get this information out by sharing your PHI with such a family member or friend or, if necessary, with a disaster relief agency like the Red Cross. Also, we may share with a member of your family or a friend who is helping to take care of you or to pay for your medical bills as much of your PHI as that person needs to help you out.

### **• PURPOSES FOR WHICH WE CAN USE AND SHARE YOUR PHI WITHOUT FIRST GIVING YOU AN OPPORTUNITY TO AGREE OR OBJECT:**

#### **1. TO COMPLY WITH THE LAW:**

Sometimes a state, federal or local law will make us use or share your PHI. In such a case, we do what the law requires us to do.

#### **2. TO PROMOTE PUBLIC HEALTH:**

The government has many programs designed to help keep you healthy and safe. We at Mission help the government in this effort by using and sharing your PHI to promote public health. Generally, the PHI that we share for

public health purposes is used to: (a) prevent or control disease, injury, or disability; (b) monitor births and deaths; (c) help prevent child abuse and neglect; (d) let the public know about bad drugs or bad medical products; (e) let the public know about product recalls; (f) let the public know about diseases and conditions that they may have been exposed to or may spread; and (g) let the police or other authorities know about patients who, we suspect, are victims of abuse, neglect, or domestic violence. Importantly, we only share your PHI for the purposes discussed in section (g) if we are required or allowed to do so by law or are allowed to do so by you.

### **3. TO HELP THE GOVERNMENT AND BUSINESSES MAKE SURE WE ARE DOING GOOD WORK IN A GOOD WAY:**

The government, accrediting organizations and many businesses watch over Mission to make sure we are doing our job the way we are supposed to. For example, the state of North Carolina inspects Mission from time to time to make sure that we are complying with state laws. Mission may share your PHI with the government or these inspectors and investigators to let them know that we are playing by the rules.

### **4. TO COMPLY WITH A COURT ORDER, SUBPOENA OR LEGAL REQUEST FOR YOUR PHI:**

If you are involved in a lawsuit or another kind of legal dispute, we may have to share your PHI with the court, the lawyers, and other people involved in the dispute. Usually, we will give out your PHI only after we have received a subpoena, a court order or some other kind of legal request or demand.

### **5. TO HELP LAW ENFORCEMENT DO ITS JOB:**

Part of being a good citizen is helping the police and other law enforcement authorities do the tough job they've been asked to do. We do our part by sharing your PHI, in limited circumstances and to a limited extent, in order to: (a) comply with court orders, subpoenas, warrants, summons, and other legal requests for information or evidence; (b) help identify criminals, missing persons, crime suspects or material witnesses in criminal cases; (c) help identify victims of crimes; (d) help the authorities investigate deaths that might be the result of crimes; (e) help the authorities investigate crimes that have occurred at our facilities; and (f) report crimes or the locations of crimes, criminals, suspects, or crime victims.

### **6. TO DETERMINE A CAUSE OF DEATH AND TO HELP FUNERAL DIRECTORS DO THEIR JOBS:**

If you die, it may be important for others to know how or why you died and how you wanted your body to be taken care of. For this reason, we may share your PHI with coroners, medical examiners, funeral directors, and others who can help make sure that the cause of your death is understood and your preferences for burial or cremation are carried out.

### **7. TO HELP MAKE ORGAN AND TISSUE DONATION POSSIBLE:**

Every year, thousands of people benefit from donated organs, tissues and eyes. But these people can only benefit if Mission and other organizations know about people who are potential donors. Mission may use or share your PHI so that your donations and transplants can be used to help people in need.

### **8. TO DO RESEARCH:**

Almost everything that the world knows about medicine comes from research. Sometimes, research is very easy to do. A scientist may be able to find out if medicine X works better than medicine Y just by comparing the conditions of one patient who took medicine X and one patient who took medicine Y. Other times, though, research is very difficult to do. A scientist who wants to know if smoking hurts men more than women might have to look at PHI from hundreds of men and women. Whether research is easy or difficult to do, it is very important that it be done. Thus, we sometimes use and share your PHI for research purposes. But don't worry! We will always ask for your written authorization before using or sharing your PHI for research purposes unless (a) our institutional review board (or "IRB") or privacy board decides that your written authorization is not needed because the research poses only a small risk to your privacy; (b) the researcher promises us that your PHI will only be used or shared, as necessary, to prepare a research study and that your PHI will not be removed from our facilities; or (c)

the researcher promises us that her research involves the use and sharing only of the PHI of people who have died.

#### **9. TO PROMOTE SAFETY AND PREVENT DANGER:**

If a person came into the hospital with a serious disease that you could catch, you would probably want to know about it. Not surprisingly, the reverse is also true. So Mission may use or let others know about your PHI if your condition or something about you being in the hospital threatens your health or the health of other people. In this type of case, we will share your PHI only with people who can help prevent the threat and people who are directly threatened.

#### **10. TO PROVIDE INFORMATION TO MILITARY AUTHORITIES:**

If you are a member of the United States armed forces, we may have to share your PHI with U.S. military command authorities. Likewise, if you are a member of another country's armed forces, we may have to share your PHI with your country's military command authorities.

#### **11. TO PROMOTE NATIONAL SECURITY AND INTELLIGENCE:**

From time to time, we are asked to share your PHI with federal officials who are in charge of national security, national intelligence, and national counterintelligence. If required to do so by law, we will use or share your PHI in response to such a request.

#### **12. TO HELP THOSE WHO PROTECT THE PRESIDENT AND OTHER HEADS OF STATE:**

The people who protect the President of the United States and leaders of other foreign countries need a lot of information to do their jobs well. In fact, sometimes the information they need may even include your PHI. If such a need arises, we will let security people know about your PHI to the extent required by law.

#### **13. TO HELP PRISON WARDENS AND LAW ENFORCEMENT AUTHORITIES:**

If you are in jail, on parole, or under the custody of the law enforcement authorities, we may share your PHI with your jailor, parole officer, or law-enforcement official. This sharing is necessary to: (a) allow us to give you health care, (b) make sure that you and others are safe, and (c) make sure that your jail or correctional facility is safe and secure.

#### **14. TO HELP YOUR EMPLOYER PROVIDE YOU BENEFITS:**

If Mission is treating you for an illness or injury that you got when you were working, then we may have to share your PHI with your employer so that it can pay, or help pay, for your care and treatment.

#### **• SPECIAL CASES**

In some cases, North Carolina law and special U.S. laws make Mission protect your PHI in ways that HIPAA does not. This section describes those cases.

##### **1. COMMUNICABLE DISEASES**

Mission must report some communicable diseases – like AIDS, HIV, sexually transmitted diseases, food poisoning, measles and other conditions – to the government. As a general rule, Mission will not share information about these diseases with entities other than the government unless it first gets your written permission.

##### **2. MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE ABUSE**

If you are treated at Mission for a mental health condition, developmental disability, or substance abuse problem, Mission generally will not share information about that treatment without your written permission. There are some cases in which Mission may or must share information about that treatment, however. To learn about these special cases, please contact Mission's Corporate Privacy Officer at the address or phone number found on page 8.

### **3. PHARMACY SERVICES**

North Carolina law requires Mission's Medical Center Pharmacy to be very careful about how it shares your pharmacy information. In fact, except for when our pharmacists must share your pharmacy information to help protect your health or to obey the law, they generally will not share this information with people other than you or your legal decision maker, your doctors, the people or companies helping to pay for your medicine, the people you have authorized to get your pharmacy information, researchers (in a few cases), and the people who run Mission Hospitals, Inc.

### **4. SUBSTANCE ABUSE**

If you come to Mission because of a substance abuse problem, Mission generally will not share information about your identity, treatment, condition or chances of getting better with anyone other than you or your legal decision maker; your doctors; the people with whom you say, in writing, we may share this information; researchers (in a few cases); the people who run Mission Hospital, Inc.; and, in an emergency, other care givers who can help you.

#### **• WHAT ARE YOUR RIGHTS?**

So far, we've told you a lot about how we can use and share your PHI. The next part of our Notice of Privacy Practices tells you how you can use your PHI and keep your PHI from being shared. In other words, it talks about your rights.

#### **1. YOUR RIGHT TO ASK US TO LIMIT THE AMOUNT OF YOUR PHI THAT WE USE AND SHARE:**

You have a right to ask us to limit the amount of your PHI that we use and share for treatment, payment, or hospital operations purposes. You also have a right to ask us to limit the amount of your PHI that we share with your friends and family members who are involved in or paying for your care. To exercise these rights, you have to write a letter to the Director of the Medical Record Department, explaining: (a) what parts of your PHI you want us to stop using or sharing; (b) whether you want us to stop using those parts of your PHI, sharing those parts of your PHI, or both; and (c) what health care providers you want us to keep your PHI away from. Please know that Mission does not have a duty or the ability to say "yes" to every limitation that you ask for.

#### **2. YOUR RIGHT TO ASK US TO COMMUNICATE WITH YOU ABOUT YOUR PHI IN NON-STANDARD PLACES OR WAYS:**

You have a right to ask us to communicate with you about your PHI in certain ways or at certain places. For example, you can let us know if you want us to talk to you about your PHI only when you are at home or only when you are at your office. To exercise the right described in this paragraph, you must write a letter to the Director of the Medical Record Department explaining what you would like us to do. You do not need to give us a reason for your request, however, giving us a reason might help us in deciding how to handle your request. We will grant all reasonable requests for non-standard communications.

#### **3. Your right to look at and get a copy of our PHI:**

You have a right to look at and get a copy of almost all of your PHI. To take advantage of this right, you must write a letter to the Director of the Medical Record Department, asking to see and get a copy of your PHI. Mission may charge you for copying, mailing or doing other things to give you access to your PHI. We may also, in rare cases, deny your request. If we do, you can have us choose a licensed health care professional to review our decision. We may change our decision if the professional tells us to.

#### **4. YOUR RIGHT TO ASK FOR AN AMENDMENT TO YOUR PHI:**

If you do not think that your PHI is complete or correct, you have the right to ask us to change it. To exercise this right, you must write a letter to the Director of the Medical Record Department, telling her why you think your PHI should be changed. We can deny your request for amendment if you forget to ask us in writing or to give us a reason for the change. We can also deny your request if the PHI you are asking us to change: (a) was not created by us (unless the person who created the PHI can no longer change the information himself); (b) is not part

of the PHI we keep; (c) is not part of the PHI that you have a right to look at and copy; or (d) is already complete and accurate.

#### **5. YOUR RIGHT TO FIND OUT WHO WE HAVE SHARED YOUR PHI WITH:**

You have a right to know the names of the people with whom we have shared your PHI. To exercise this right, you must send a letter to the Director of the Medical Record Department, stating that you want an “accounting of disclosures”. Please include in your letter a couple of sentences telling the Director: (a) the date(s) upon which the PHI you want to see was created (Note: No two dates may be more than six years apart), and (b) the form in which you would like to receive the “accounting” (i.e., paper, electronic file, etc.). We cannot account for any sharing of your PHI that occurred: (a) before April 14, 2003, (b) more than six years before you asked for an accounting, or (c) under your written authorization. Also, although we will give you the first accounting free of charge, we will charge you for each later accounting that you ask for within a 12-month period. We will let you know in advance how much the accounting will cost so that you can withdraw or change your request, if necessary.

#### **6. YOUR RIGHT TO GET A COPY OF MISSION HOSPITAL'S NOTICE OF PRIVACY PRACTICES:**

To receive an additional copy of Mission's Notice of Privacy Practice, simply write a letter to the Director of Health Information Management, stating that you would like a copy of our HIPAA Notice.

### **• WHAT ELSE DO I NEED TO KNOW?**

#### **MISSION'S DUTY TO PROTECT YOUR PHI:**

The law requires Mission to protect the privacy of your PHI. It also requires us to give you notice of our legal duties and privacy practices.

#### **CHANGES TO MISSION'S NOTICE OF PRIVACY PRACTICE:**

Mission has the right to change or add to Mission's Notice of Privacy Practices at any time, for any reason. Each new edition of Mission's Notice of Privacy Practices will have its effective date posted in a place where you can see it. We will offer you a copy of the most recent edition of Mission's Notice of Privacy Practices each time you register at or are admitted to one of our facilities for inpatient or outpatient services. We are only required to abide by the most-recent edition of Mission's Notice of Privacy Practices.

#### **COMPLAINTS:**

If you think that any of your PHI has been used or shared inappropriately, you may file a complaint with us or the Department of Health and Human Services (or “DHHS”). To file a complaint with us, please write a letter that includes your name, address, telephone number, date(s) of treatment, and a description of your complaint and send it to:

Corporate Privacy Officer  
Mission Hospital, Inc.  
509 Biltmore Avenue, Asheville, NC 28801

To file a complaint with DHHS, please write a letter that includes your name, address, date(s) of treatment, the name of the hospital or clinic that is involved, and a description of your complaint and send it to:

HIPAA Complaint  
7500 Security Blvd., C5-24-04  
Baltimore, MD 21244

Your complaint to DHHS must be filed within 180 days of when you knew, or should have known, that the act or failure to act that you are complaining about occurred. However, DHHS may give you more time to file a complaint if it thinks that there is a good reason for your delay. Please know that you will not be punished for filing a complaint with us or with DHHS.

**USES AND DISCLOSURES OF PHI NOT COVERED BY MISSION'S NOTICE OF PRIVACY PRACTICES:**

Uses and disclosures of your PHI that are not discussed in Mission's Notice of Privacy Practices will only be made if you give us written authorization. And you can cancel at any time any authorization that you give us. Although we will not be able to take back PHI that we have already released, we can make sure that PHI is not released after we have received your cancellation.

**MORE INFORMATION:**

For more information about your PHI, your rights, or anything else contained in Mission's Notice of Privacy Practice, please contact:

Corporate Privacy Officer

Mission Hospital, Inc.

509 Biltmore Avenue, Asheville, NC 28801

Tel. No. (828) 213-0330

**OTHER IMPORTANT ADDRESSES:**

Other addresses that you may need to take advantage of your rights under Mission's Notice of Privacy Practice are:

Director of the Health Information Management

Mission Hospital, Inc.

509 Biltmore Avenue, Asheville, NC 28801

Tel. No. (828) 213-0636

Regional Manager

Office for Civil Rights

U.S. D.H.H.S.

61 Forsyth Street., S.W. , Suite 3B70, Atlanta, Georgia 30323

Tel. No. (404) 562-7858

<http://www.hhs.gov/ocr/howtofile.html>