



Your Health. Your Community. Your Hospital.

JOINT NOTICE OF PRIVACY PRACTICES

Effective: September 1, 2013

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 Joint Notice of Privacy Practices covers services provided to you by Cottage Hospital and members of its medical staff as governed by Cottage Hospital's by-laws, rules and regulations regarding medical staff. It also covers Woodsville Rescue Ambulance when they are working jointly with Cottage Hospital to provide services to you. It applies to the medical record of all services provided to you by Cottage Hospital regardless of whether specific services are provided by Cottage Hospital employees, its medical staff, or Woodsville Rescue Ambulance.

Cottage Hospital respects the privacy of our patient's personal health information. Cottage Hospital maintains a record of your protected health information. This record may consist of examination and test results, diagnoses, symptoms, treatment, and plans for future care. We are committed to maintaining the confidentiality and privacy of your protected health information. This Notice applies to all information and records related to your care that Cottage Hospital has received or created. It extends to information received or created by our employees, temporary employees, staff, volunteers, and medical staff. This Notice informs you about the possible uses and disclosures of your personal health information. It also describes your rights and our obligations regarding your personal health information.

Cottage Hospital is required by law to:

- maintain the privacy of your protected health information;
- provide to you this detailed Notice of our legal duties and privacy practices relating to your personal health information; and
- abide by the terms of the Notice that are currently in effect.

HOW COTTAGE HOSPITAL WILL USE AND DISCLOSE YOUR HEALTH INFORMATION

- **For Treatment:** We will use and disclose your personal health information in providing you with treatment and services. We may disclose your personal health information to healthcare providers and volunteers who are involved in your care, such as physicians, nurses, nurse aides, and physical therapists. For example, a nurse caring for you will record your condition for use by your physician to determine a course of treatment. Your physician will document his expectations of members of your healthcare team. We also may disclose personal health information to healthcare providers who will be involved in your care after you leave Cottage Hospital.
- **For Payment:** We will use and disclose your personal health information for payment for treatment and services you receive. We may disclose your personal health information to your representative, an insurance or managed care company, Medicare, or another third party payer. For example, we may contact Medicare or your health plan to confirm your coverage or to request coverage information for a proposed treatment or service. This information or an accompanying bill may include information that identifies you.
- **For Health Care Operations:** We will use and disclose your personal health information for health care operations. These uses and disclosures are necessary to manage the Hospital and to monitor our quality of care. For example, we may use personal health information to evaluate Cottage Hospital's services, including the performance of our staff.
- **Hospital Directory:** Unless you object, we will include your name, your location in the hospital, your general condition, and your religious affiliation in our hospital directory. This information may be provided to members of the clergy. With the exception of religious affiliation, we will provide this information to individuals who ask for you by name.
- **Individuals Involved in Your Care or Payment for Your Care:** Unless you object, using our best professional judgment, we may disclose your personal health information to a family member or close personal friend, including clergy, who is involved in your care.
- **As Required By Law:** We may disclose your personal health information when required by law to do so.

- **Public Health Activities:** We may disclose your personal health information for public health activities. These activities may include, for example:
 - reporting to a public health or other government authority for preventing or controlling disease, injury or disability, or reporting abuse or neglect;
 - reporting to the federal Food and Drug Administration (FDA) concerning adverse events or problems with products for tracking products in certain circumstances, to enable product recalls or to comply with other FDA requirements;
 - to notify a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition or
 - For certain purposes involving workplace illness or injuries.
- **Reporting Victims of Abuse, Neglect or Domestic Violence:** If we believe that you have been a victim of abuse, neglect or domestic violence, we may use and disclose your personal health information to notify a government authority if required or authorized by law, or if you agree to the report.
- **Health Oversight Activities:** We may disclose your personal health information to a health oversight agency for oversight activities authorized by law. These may include, for example, audits, investigations, inspections and licensure actions or other legal proceedings. These activities are necessary for government oversight of the health care system, government payment or regulatory programs, and compliance with civil rights laws.
- **Judicial and Administrative Proceedings:** We may disclose protected health information in the course of any judicial or administrative proceeding. We also may disclose information in response to a subpoena, discovery request, or other lawful process.
- **Law Enforcement:** We may disclose your personal health information for certain law enforcement purposes as required by law or in response to a valid subpoena.
- **Research:** We may disclose personal health information of patients from our Hospital who choose to participate in research studies. Your personal health information may be used for research purposes only if the privacy aspects of the research have been reviewed and protocols have been established to protect the privacy of your health information.
- **Coroners, Medical Examiners, Funeral Directors, Organ Procurement Organizations:** We may release your personal health information to a coroner, medical examiner, funeral director or, if you are an organ donor, to an organization involved in the donation of organs and tissue.
- **To Avert a Serious Threat to Health or Safety:** We may use and disclose your personal health information when necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public. However, any disclosure would be made only to someone able to help prevent the threat.
- **Workers' Compensation:** We may use or disclose your personal health information to comply with laws relating to workers' compensation or similar programs.
- **Appointment Reminders:** We may use or disclose personal health information to remind you about appointments.
- **Treatment Alternatives:** We may use or disclose personal health information to inform you about treatment alternatives that may be of interest to you.
- **Military Personnel and National Security:** We may use and disclose the protected health information of individuals who are Armed Forces personnel for activities deemed necessary by appropriate military command authorities to assure the proper execution of the military mission.
- **Health-Related Benefits and Services:** We may use or disclose personal health information to inform you about health-related benefits and services that may be of interest to you.
- **Fundraising and Marketing:** We may contact you as part of a fundraising effort. You have the right to "opt-out" of receiving fundraising materials/communications and may do so by sending your name, address to the Privacy Officer together with a statement that you do not wish to receive fundraising materials or communications from us. Cottage Hospital will not condition treatment or payment on your choice with respect to the receipt of fundraising communications.
 We must receive your authorization for any use or disclosure of PHI for marketing, except if the communication is in the form of a face-to face communication made to you personally; or a promotional gift of nominal value provided by Cottage Hospital. It is not considered marketing to send you information related to your individual treatment case management, care coordination or to direct or recommend alternative treatment. Therapies, healthcare providers or setting of care. These may be sent without written permission. If the marketing is to result in financial remuneration to Cottage by a third party we will state this on the authorization.
- **Cottage Hospital Community Building and Activities:** We may use or disclose your health information incidentally in the course of providing a variety of activities, functions, or entertainment that you may participate in as a patient of Cottage Hospital.

USE AND DISCLOSURE OF YOUR HEALTH INFORMATION REQUIRING AN AUTHORIZATION

Cottage Hospital will require a valid, signed Authorization to make any uses and disclosures of protected health information not previously described in this Notice. You may revoke your Authorization to use or disclose protected health information in writing, at any time. If you revoke your Authorization, we will no longer use or disclose your protected health information for the purposes covered by the Authorization, except where we have already relied on the Authorization.

YOUR RIGHTS REGARDING YOUR PROTECTED HEALTH INFORMATION

- **Right to Request Restrictions:** You have the right to request a restriction or limitation on the protected health information we use or disclose for treatment, payment, or health care operations. You also have the right to request a limit on the protected health information we disclose to someone involved in your care or the payment for your care, like a family member or friend. For example, you can ask that we not share information about a particular diagnosis or treatment with your spouse. To request a restriction, you must make your request in writing to the Privacy Officer. Cottage Hospital is not required to agree to your request unless you are asking us to restrict the use and disclosure of your protected health information to a health plan for payment or health care operation purposes and such information you wish to restrict pertains solely to a health care item or service for which you have paid us "out-of-pocket" in full. If we agree to your request unless the information is needed to provide you with emergency treatment.
- **Out of Pocket Payments:** If you paid out-of-pocket (or in other words, you have requested that we not bill your health plan) in full for a specific item or service, you have the right to ask that your protected health information with respect to that item or service not be disclosed to a health plan for purposes of payment or health care operations, and Cottage Hospital will honor that request.
- **Right to Receive Confidential Communications:** You have the right to request to receive communications of protected health information from Cottage Hospital by alternative means or at alternative locations. To request confidential communications, you must make your request, in writing to the Privacy Officer. Your request must specify how or where you wish to be contacted. We will accommodate reasonable requests.
- **Right to Amend Health Information:** You have a right to request an amendment to your health information if you believe information in your medical record is inaccurate or incomplete. You have the right to request an amendment for as long as the information is kept by Cottage Hospital. Your request must be made in writing and you must provide a reason that supports your request.
- **Right to an Accounting of Disclosures:** You have the right to request an "accounting of disclosures." An accounting will not include disclosures for treatment, payment, or operations. Your request must state a time period which may not be longer than six years and may not include dates before April 14, 2003.
- **Right of Access to Personal Health Information:** You have the right to request your medical or billing records or other written information that may be used to make decisions about your care. We must allow you to inspect your records within 30 days of your request. We may charge a reasonable fee for our costs in copying and mailing your requested information. If your protected health information is maintained in an electronic format (known as an electronic medical record or an electronic health record), you have the right to request that an electronic copy of your recorded be given to you or transmitted to another individual or entity. We will make every effort to provide access to your protected health information in the form or format you request, if it is readily producible in such form or format. If the protected health information is not readily producible in the form or format you request, your record will be provided in either our standard electronic format or if you do not want this form or format, a readable hard copy form. We may charge you a reasonable cost-based fee for the labor associated with transmitting the electronic medical record.
- **Right to a Paper Copy of This Notice:** You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time.
- **Opportunity to Object to Use and Disclosure:** You have the right to object to the disclosure of any of your information in Cottage Hospital's hospital directory. Also, if you are present prior to or during a disclosure, you may object to such a disclosure.

YOUR RIGHTS TO FILE COMPLAINTS AND TO BE INFORMED OF PRIVACY POLICY CHANGES

- **Complaints:** If you believe that your privacy rights have been violated, without fear of retaliation, you may file a complaint in writing to Cottage Hospital or with the Office of Civil Rights in the U.S. Department of Health and Human Services. To file a complaint with the Hospital, contact Cottage Hospital's Privacy Officer.
- **Changes to This Notice:** We will promptly revise and distribute this Notice whenever there is a material change to the uses or disclosures, your individual rights, our legal duties, or other privacy practices stated in this Notice. We reserve the right to change this Notice and to make the revised or new Notice provisions effective for all personal health information already received and maintained by the hospital as well as for all personal health information we receive in the future. We will post a copy of the current Notice in the hospital. In addition, we will provide a copy of the revised Notice to all patients.

For more information, contact HIPAA Compliance Officer.

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