



Notice of Privacy Practices

Effective December 2016

Summary

We understand that protected health information about you and your health is personal. The health professionals at TruCare Medical Center, LLC ("TruCare") are committed to protecting PHI about you. When you become a patient at our clinic, we create a record of the care and services you receive at TruCare. This Notice describes the ways in which we can legally use this information and how you can gain access to this information. This Notice applies to all of the records of your care generated by TruCare. We also describe your rights and certain obligations we have regarding the use and disclosure of PHI. Please review it carefully.

We are required by law to:

- make sure that PHI that identifies you is kept private;
- give you this Notice of our legal duties and privacy practices with respect to PHI about you; and
- follow the terms of the Notice that is currently in effect.

What is classified as "Protected Health Information"?

Protected health information ("PHI") is your health information or other individually identifiable information, such as data, that may identify you. PHI relates to your past, present or future physical or mental health or any condition related to healthcare services. This Notice describes how TruCare may use and disclose your PHI to carry out treatment, for payment, for healthcare operations and for other purposes permitted or required by law.

The terms of this Notice may change at any time. The new Notice will apply to all protected health information acquired after it goes into effect. Upon your request, we will provide you with any historical Notice of Privacy Practices.

Who will follow these privacy practices?

This notice describes our clinic's practices and that of:

- any health care professional, whether employee or independent contractor, or office staff member authorized to enter information into your patient chart.

How can we use and disclose your PHI?

Your PHI may be used and disclosed by TruCare, our staff and others outside of our offices who are involved in your care and treatment for the purpose of providing healthcare services to you. Your PHI may also be used and disclosed to pay your healthcare bills and to support the operations of TruCare. The following list, by way of example rather than limitation, explains certain uses and disclosures of your protected health information that TruCare is permitted to make.

- **For treatment:** TruCare will use and disclose your protected health information to provide, coordinate or manage your healthcare and any related services. This includes the coordination or management of your healthcare with another provider. For example, TruCare may disclose your protected health information, as minimally necessary, to a home health agency that provides care to you. TruCare will also disclose health information to physicians or other healthcare providers who may be treating you or who you may be referred to for treatment. For example, a physician treating you for a broken leg may need to know if you have diabetes because diabetes may slow

the healing process. In addition, the physician may need to tell the dietitian if you have diabetes so that we can arrange for appropriate meals.

- For payment: TruCare may use and disclose your PHI as necessary to obtain payment for healthcare services. This may include providing it to your health insurance plan before it approves or pays for recommended healthcare services so that it may make a determination of eligibility or coverage for insurance benefits. It may also include supplying the information to review services provided to you for medical necessity and to undertake utilization-review activities. For example, obtaining approval for a hospital stay may require that your relevant PHI be disclosed to the health insurance plan to obtain prior plan approval.
- For health care operations: TruCare may use and disclose PHI about you for clinic health care operations. These uses and disclosures are necessary to run the clinic and make sure that all of our patients receive quality care. For example, we may use PHI to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine PHI about many clinic patients to decide what additional services we should offer, what services are not needed, and whether certain new treatments are effective. We may also disclose information to doctors, nurses, technicians, and other clinic personnel for review and learning purposes. We may disclose this information by mail, fax, e-mail, or other appropriate PHI communication methods. We may remove information that identifies you from this set of PHI so others may use it to study health care and health care delivery without learning who the specific patients are.
- For appointment reminders: TruCare may use and disclose PHI to contact you as a reminder that you have an appointment for treatment or medical care.
- For treatment alternatives: TruCare may use and disclose PHI to tell you about or recommend possible treatment options or alternatives that may be of interest to you.
- For health-Related benefits and services: TruCare may use and disclose PHI to tell you about health-related benefits or services that may be of interest to you.
- For individuals involved in your care or payment for your care: TruCare may release PHI about you to a person who has been determined to be actively involved in your medical care. We may also give information to someone who helps pay for your care. We may also tell your family or friends your condition and whether you are in the hospital. In addition, we may disclose PHI about you to an agency assisting in a disaster relief effort so that your family can be notified about your condition, status and location.
- When required by law: TruCare will disclose PHI about you when required to do so by federal, state or local law.
- To avert a serious threat to health or safety: TruCare may use and disclose PHI about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.
- For organ and tissue donation: If you are an organ donor, we may release PHI to organizations that handle organ procurement or organ, eye, or tissue transplantation or to an organ donation bank, as necessary, to facilitate organ or tissue donation and transplantation.
- If you are in the military or are a veteran: If you are a member of the armed forces, we may release PHI about you as required by military command authorities. We may also release PHI about foreign military personnel to the appropriate foreign military authority.
- For workers' compensation: TruCare may release PHI about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.
- For public health risks: We may disclose PHI about you for public health activities. These activities generally include the following:
 - prevent or control disease, injury or disability
 - report births and deaths;

- report child abuse or neglect;
 - report reactions to medications or problems with products;
 - notify people of recalls of products they may be using;
 - notify a person who may have been exposed to a disease or may be at risk for getting or spreading a disease or condition; or
 - notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect or domestic violence. We will only make this disclosure if you agree or when required or authorized by law.
- For health oversight activities: TruCare may disclose PHI to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.
 - For lawsuits and disputes: If you are involved in a lawsuit or a dispute, we may disclose PHI about you in response to a court or administrative order. We may also disclose PHI about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.
 - To law enforcement agency: TruCare may release PHI if asked to do so by a law enforcement official:
 - In response to a court order, subpoena, warrant, summons or similar process;
 - To identify or locate a suspect, fugitive, material witness, or missing person;
 - About the victim of a crime if, under certain limited circumstances, we are unable to obtain the person's agreement;
 - About a death we believe may be the result of criminal conduct;
 - About criminal conduct at the hospital;
 - In emergency circumstances to report a crime; the location of the crime or victims; or the identity, description or location of the person who committed the crime.
 - To coroners, Medical Examiners and Funeral Directors: TruCare may release PHI to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release PHI about patients of the hospital to funeral directors as necessary to carry out their duties.
 - To National Security and Intelligence Activities: TruCare may release PHI about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

What are your rights related to your PHI?

- Right to Inspect and Copy. You have the right to inspect and copy PHI that may be used to make decisions about your care. Usually, this includes medical and billing records, but does not include psychotherapy notes. To inspect and copy medical information that may be used to make decisions about you, you must submit your request in writing to TruCare. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies associated with your request. TruCare may also deny your request to inspect and copy in certain very limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed. Another licensed health care professional chosen by TruCare will review your request and the denial. The person conducting the review will not be the person who denied your request. TruCare will comply with the outcome of the review.

- Right to Amend. If you feel that the PHI we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the clinic. To request an amendment, your request must be made in writing and submitted to TruCare. In addition, you must provide a reason that supports your request. We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:
 - Was not created by TruCare, unless the person or entity that created the information
 - is no longer available to make the amendment;
 - Is not part of the medical information kept by or for the hospital;
 - Is not part of the information which you would be permitted to inspect and copy; or
 - Is accurate and complete.

Right to an Accounting of Disclosures. You have the right to request an "accounting of disclosures." This is a list of the disclosures we made of medical information about you. To request this list or accounting of disclosures, you must submit your request in writing to TruCare. Your request must state a time period which may not be longer than six years and may not include dates before February 26, 2003. Your request should indicate in what form you want the list (for example, on paper, electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred. We will be allowed 30 days to provide you with this information.

Right to Request Restrictions. You have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about a surgery you had. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment. To request restrictions, you must make your request in writing to the TruCare. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

Right to Request Confidential Communications. You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail. To request confidential communications, you must make your request in writing to TruCare. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

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.

Changes to this Notice

TruCare reserves the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you as well as any

information we receive in the future. We will post a copy of the current notice in the clinic. The Notice will contain on the first page the effective date.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with the clinic or with the Secretary of the Department of Health and Human Services. To file a complaint with TruCare, contact the TruCare at 219-237-2079 or mail to 8437 Kennedy Ave., Highland, Indiana 46322. You may contact the Department of Health and Human Services at the following address: Secretary of DHHS, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Washington, D.C. 20201, or phone them at 877-696-6775. **You will not be penalized for filing a complaint.**

Acknowledgement:

My signature below indicates that I have read this Notice, that I have been provided with a copy, and that I understand that I can request a copy of this Notice in the future.

Signature (Patient or other authorized person)

Date

Printed Name

Date of Birth

Relationship to Patient

Signed (Witness)

Address, City, State, Zip