

Ebenezer Notice of Privacy Practices

Revised January 1, 2018

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.

What is this notice for?

The Notice of Privacy Practices tells you about your rights under a federal law called the Health Insurance Portability and Accountability Act – or HIPAA for short. This law protects your health information and sets rules about who can see and get your health information. (“Health information” includes any information about your mental or physical health, your health care, payment for your health care, and any demographic information.) The notice also tells you about Ebenezer’s policies for protecting, using, and sharing your health information.

Why am I getting this notice?

Your privacy is important to us. The law requires that you be given a copy of this notice so that you can:

- know your rights
- use your rights
- ask questions about your rights
- file a complaint if you think your rights may have been violated.
- Know that we will notify you if there is a breach of your health information.

How will Ebenezer protect my health information?

Ebenezer works hard to protect your health information. We use computer systems to store your health information. We have protections in place to keep your information from being seen by anyone that should not see it. While our computer systems are protected from access by unauthorized people, e-mails sent through the Internet are not. We will not communicate with you using e-mail unless you want us to.

What are my rights over my health information? *You have the right to:*

- **See and get a copy of your health information.** To see or get a copy of your health information, write to us at the address at the end of this Notice of Privacy Practices. You may have to pay for the cost of copying and mailing your records.
- **Ask for changes to your health information.** If you feel that the health information we have about you is incorrect or incomplete, you can ask us to change it. To ask for a change, write to us at the address at the end of this Notice. You must tell us why you want to change your records. We will tell you in writing if we are unable to make the change.
- **Know how your health information is used or shared with others.** We use health information for treatment and payment or to manage other business matters. (For more information, see “How will Ebenezer use and share my health information?” below.) Sometimes we must also share information with others, usually because we are required by law to do so. For example, we must report births, deaths, abuse, and certain diseases. You can ask for a list (“an accounting”) of the times we have shared your

health information with an outside organization or person. It will show who we shared it with and why. The list may go back as long as six years from the date you ask. We would not include the times your information was shared for treatment, payment, or business and other times (such as when you asked us to share information). You can get your report for free once a year. If you want more reports, we may charge you for the cost of making them. However, we will let you know what this cost will be before we send you more reports.

- **Ask us to restrict how your health information is used or shared with others.** To do this, write to us at the address listed at the end of this Notice. Tell us what you don't want us to do with your health information. For example, perhaps you don't want us to give information to your insurer. In this case, you must also tell us how you will pay for your treatment.
- **Note that the law says we do not always have to agree to your request, as we may not be able to accommodate it.** For example, if you wish to prevent a particular provider from viewing your records, we would be unable to meet this request due to the nature of electronic health records. If we agree to your request, we will not restrict your health information if it is needed to provide you with emergency care.
- **Ask us to reach you in a certain way or place.** For example, you can ask that we contact you at work rather than at home or by mail rather than by phone. To make this request, write to us at the address at the end of this Notice. Tell us exactly how and where you wish to be reached. We will allow all reasonable requests and we will not ask you why you are making the request.
- **Have a copy of this notice.** You may ask for a copy of this notice at any time from the Administrator or the Executive Director at your site. You can also download a copy from our website, www.EbenezerCares.org

How will Ebenezer use and share my health information?

- **Treatment.** We use your health information to give you medical treatment and coordinate your care. To treat you properly, we may need to share your health information with doctors, nurses and other staff taking care of you at Ebenezer. We will ask for your consent before sharing your health information with health care providers outside of Ebenezer, unless it is an emergency, or required by law.
- **Electronic health records/health information.** Ebenezer uses an electronic health record that allows care providers and other approved users within Ebenezer to store, update and use your health information. They may do so as needed at the time you are seeking care, even if they work at different clinics and hospitals. We do this so it is easier for your providers to access your health information when you are seeking care and to better coordinate and improve the quality of your care. If you receive care from more than one provider who uses Ebenezer's electronic health record, your health information will be combined into one record. Once information is combined, it cannot be separated in the future. This electronic health record is a secure system. Ebenezer and the providers using the system are trained to ensure your information is private.
- **Appointment reminders.** We may use and share your health information to remind you of an appointment.
- **Treatment alternatives and health-related services.** We may use and share your health information to tell you about treatment options and health-related benefits or services that you may be interested in.
- **Payment.** We will use and share your health information so that we can bill you or whoever is responsible for paying for your care.
- **Health Care Operations.** We may use and share your health information to help run our facility and make sure that all of our residents are getting quality care. For example, we may use health information to review our services and the staff caring for you. We may also combine health information about many residents to see if new treatments are effective.
- **Fundraising.** We may contact you to help support the mission of Ebenezer. We may also share your information with Ebenezer Foundation. We will only share contact information including your name,

address, contact information (phone numbers, email addresses), gender, and date of birth. Also, limited treatment information including dates, department and general outcome. If you are contacted for a donation, you can choose not to be contacted again. Write to Ebenezer Foundation at 2722 Park Avenue, Minneapolis, MN 55407, or call 612-672-7778 and ask to be taken off of the contact list.

- **Resident directory.** Friends, family and others may call to ask about you while you are a resident of Ebenezer. If someone calls and asks for you by name, we will tell them your location so that they may call or visit you. If they ask, we will also tell them in general terms how you are doing (doing well, serious condition, etc.). If you ask us to list your faith community (or religious affiliation) in the directory, we will also share this information with a leader from your faith community (priest, minister, rabbi, or other spiritual advisor). If you do not want us to tell anyone that you are here, please tell us upon admission or move in.
- **People involved in your care or payment for your care.** We may share your health information with family members or friends involved in your health care or with those helping to pay for your care. If you do not want us to share your information with family members or friends involved in your care, please tell us upon admission. In the event of a disaster, we may share your health information with those helping with disaster relief so that your family can know what has happened to you and where you are.
- **As required by law.** We will share your health information when required to do so by federal, state, or local law. For example, we are required to report abuse or neglect.

Special situations.

A serious threat to health or safety

We may use or share your health information to prevent a serious threat to your health and safety or the health and safety of the public, or another person. We would only give this information to someone who can prevent the threat.

Organ and tissue donation

If you are an organ donor, we may share your health information with organizations that handle organ or tissue donation and transplantation.

Military and veterans

If you are a member of the armed forces, we may share health information as required by military authorities.

Workers' Compensation

If you are being treated for a work-related injury or condition, we may share your health information with workers' compensation or similar programs.

Public health risks

We may share your health information with public health or authorized government authorities

- To prevent or control disease, injury or disability
- To report births and deaths
- To report abuse or neglect
- To report problems with medicines and other products
- To tell people about recalls of products they may be using

- To let a person know if he or she may have been exposed to a disease or may be at risk for getting or spreading a disease or condition; or
- If we believe you have been the victim of abuse, neglect or domestic violence.

We will only share this information if you say we can or when required or authorized by law.

Health oversight activities

We may share health information for health oversight activities as authorized by law. Examples of oversight activities include audits, investigations, inspections, and licensing. These activities are needed for the government to oversee the health care system.

Lawsuits and disputes

If you are involved in a dispute or lawsuit, we may share your health information if required by court order. We may also share your health information in response to a subpoena, discovery request or other lawful process by someone else involved in the dispute, but usually only if you give us permission.

Law enforcement

- We may share health information with law enforcement agencies:
- In response to a court order, grand jury subpoena, warrant, summons, or similar process
- To identify someone who has died
- To locate a missing person
- About a death we believe may be the result of criminal conduct
- About criminal conduct at the health care facility
- In emergency situations to report a crime; the location of the crime or victims; or the identity, description or location of the person who committed the crime; and
- In other situations as required by law

Coroners, medical examiners and funeral directors

We may give health information to a coroner or medical examiner. We may need to do this, for example, to identify someone who has died or to determine the cause of death. We may also give health information to funeral directors with your permission as needed to carry out their duties.

National security and intelligence activities

We may give health information to authorized federal officials for activities authorized by law. We may share health information with authorized federal officials so they can protect the President and other authorized persons or foreign heads of state or conduct special investigations.

Inmates

If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release your health information:

- So that the correctional institution can provide you with health care
- To protect your health and safety or the health and safety of others
- For the safety and security of the correctional institution

Other Uses of Health Information

Other uses and disclosures of health information not covered by this notice or the laws that apply to us will be made only with your written permission. For example, we will ask for your permission to disclose your information for research or marketing purposes or to sell any of your information. We will also ask for your permission to disclose any psychotherapy notes we maintain related to services you have received. If you have given us written permission to use or share your health information, you may take back that permission in writing at any time. If you take back your permission, we will no longer use or share your health information for the reasons listed on your written permission. Of course, we cannot take back any information we have already shared with your permission.

What do I do if I think my privacy rights may have been violated?

If you think your privacy rights may have been violated, you may file a complaint with us. You may call the Ebenezer Privacy Office at 612-672-5647 to talk about your complaint. Or you may email or write to the Ebenezer Privacy Office at privacy1@fairview.org or 400 Stinson Blvd, Minneapolis, MN 55413. You may also file a complaint with the US Department of Health and Human Services Office for Civil Rights at: www.hhs.gov/ocr/privacy/hipaa/complaints. We will not penalize you or act against you in any way for filing a complaint.

Who at Ebenezer must follow this notice?

This notice applies to Ebenezer Society and Ebenezer Management Services. Ebenezer provides a wide variety of health care services in conjunction with a number of hospitals, clinics, and other entities. In order to provide quality care, we share health information within Ebenezer as appropriate. All of Ebenezer's entities, employees, volunteers, and agents will follow this notice. The notice applies to all records of the care you received at Ebenezer.

When doctors and other health care providers not employed by Ebenezer are treating you at Ebenezer, they must follow the terms of this notice. However, they may use a different privacy notice in their office or clinic.

Changes to this notice

We must follow the terms of this Notice of Privacy Practices. We can change this Notice however, and reserve the right to make the new notice effective for health 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 this facility. The effective date of this notice is listed on the first page.

If you have any questions about this notice, please call the Ebenezer Privacy Office at 612-672-5647 or toll free at 1-866-356-7410 or write to Ebenezer Privacy Office at 400 Stinson Blvd, Minneapolis, MN 55413.

Acknowledgment of Receipt of Notice of Privacy Practices

What is this form for?

This form summarizes Ebenezer's Notice of Privacy Practices. The Notice of Privacy Practices tells you about your rights under a federal law that protects your health information.

What information is protected by this law?

All of your health and billing information – whether recorded on a computer, printed on paper, or spoken is protected by this law.

Who must follow this law?

- Doctors, nurses, pharmacies, hospitals, clinics, nursing homes and other health care providers.
- Health insurance companies, HMOs and most health plans
- Certain government programs that pay for health care such as Medicare and Medicaid.

What are my privacy rights under this law?

You have the right to:

- See and get a copy of your health information
- Have corrections added to your health information
- Receive a notice that tells you how your health information is used and shared
- Decide whether to give your permission before your information can be used or shared for certain purposes
- Get a report on when and why your health information was shared
- Ask to be reached somewhere other than your home
- Ask that your information not be shared
- File a complaint if you feel that your privacy rights have been violated.

For more information about this law and Ebenezer's privacy practices, read Ebenezer's Notice of Privacy Practices.

If you have any questions about this notice, please call the Ebenezer Privacy Office at 612-672-5647 or toll free at 1-866-356-7410 or write to Ebenezer Privacy Office at 400 Stinson Blvd, Minneapolis, MN 55413

Federal law requires that we have proof that you have received the Notice of Privacy Practices. By signing below you acknowledge only that you have received a copy, not that you have read it or agree with its contents.

Resident/Legal Representative

Date

Resident Representative

Date