



Agapé Physicians Care, Inc. Joint Notice of Privacy Practices

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.

Agapé Physicians Care, Inc., licensed prescribing providers and non-licensed prescribing providers who provide services in any Agapé Senior facility, may use and/or share your health information for treatment, to obtain payment for treatment, for administrative purposes, to evaluate the quality of care that you receive and for any and all other purposes described in this notice.

Understanding Your Health Record/Information

A record is created each time you receive services from Agapé Physicians Care, a licensed prescribing provider or other healthcare provider associated with us. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information often referred to as your health or medical record, serves as a basis for planning your care and treatment. It is communicated among the many health professionals who contribute to your care and enables you or a third-party payer to verify that services billed were actually provided. Your medical record is a legal document describing the care you received. It is a tool we use to educate health professionals and to assess and continually work to improve the care we provide and the outcomes we achieve. Your medical record may be a source of data for medical research, public health initiatives and facility planning.

The purpose of this Notice of Privacy Practices is to assist you in understanding what is in your medical record and who, what, when, where and why others may access your health information. This document will assist you in making more informed decisions when authorizing disclosures of your health information.

Your Health Information Rights

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have rights afforded to you by The Health Insurance Portability and Accountability Act of 1996 (HIPAA), a federal regulation (42 CFR Part 164). These rights include:

- The right to request a restriction on certain uses and disclosures of your information. Agapé Physicians Care is not required to agree to a requested restriction. Requests for restrictions should be sent to the Agapé Physicians Care or the specific department maintaining your health information.
- The right to obtain a paper copy of our Notice of Privacy Practices upon request. The Notice of Privacy Practices may be obtained from Agapé Physicians Care registration areas.
- The right to inspect and obtain a copy of your medical record. Agapé Physicians Care charges a fee for copying medical records in accordance with South Carolina law. Copies may be obtained by contacting the Agapé Physicians Care or the specific department maintaining your health information.
- The right to amend or correct your medical record. However, Agapé Physicians Care is not required to agree to the requested amendment under certain circumstances. Requests for amendments should be sent to the Agapé Physicians Care or the specific department maintaining your health information.
- The right to obtain an accounting of certain disclosures of your health information. An accounting of disclosures can be obtained from the Agapé Physicians Care. We will provide you with one free accounting each year. For subsequent requests, we will charge a \$25 fee per request.
- The right to request communication of your health information by alternative means or at alternative locations. Requests for alternative communications should be made to Health Information Management or the specific department maintaining your health information.

Our Responsibilities

Agapé Physicians Care is required to:

- maintain the privacy of your health information
- provide you with a Notice of Privacy Practices describing our legal duties and practices with respect to information we collect and maintain about you

- abide by the terms of the Notice of Privacy Practices
- notify you if we are unable to agree to a requested restriction or if there is any unauthorized acquisition, access, use or disclosure of PHI that compromises the privacy and/or security of the information
- accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

Agapé Physicians Care reserves the right to change our health information practices, policies and/or procedures at any time and to make the new provisions effective for all protected health information we maintain. You will be informed of such changes at the time of your next visit when you receive our Notice of Privacy Practices. The most recent version of our Notice of Privacy Practices will be posted in each Physicians Care location's registration/waiting area.

We may use and disclose your health information for purposes of Treatment, Payment and Health Care Operations.

Treatment

For example: Information obtained by a nurse, licensed prescribing practitioner, or other member of your healthcare team will be entered in your record and used to determine the course of your treatment. Your licensed prescribing provider will document in your record his or her expectations of the members of your healthcare team. Members of your healthcare team will then record the actions they took and their observations. In that way, the licensed prescribing provider will know how you are responding to treatment. We also will provide your licensed prescribing provider or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you once you are discharged from this hospital.

Payment

For example: A bill may be sent to you and/or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures and supplies used. This information will be used for billing, claims management and collection activities to obtain payment for services provided to you.

Health Care Operations

For example: Members of the medical staff, the risk management and quality improvement teams may use your health information to assess the care and outcomes in your case and others like it. This information then will be used in an effort to continually improve the quality and effectiveness of the healthcare and services we provide.

Other Permitted or Required Uses and Disclosures of your Health Information

Appointments: Agapé Physicians Care may call or send information to remind you of an upcoming appointment or to reschedule an appointment. When appropriate, a message will be left on your answering machine. The content of that message will be kept as generic as possible so as to protect your privacy.

Business Associates: There are some services provided in our organization through contracts with business associates. Examples include answering services, collection agencies, medical record storage companies and a copy service we use when making copies of the medical record. When these services are contracted, we may disclose your health information to our business associate so that they can perform their job and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Communication with Family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person whom you identify, health information relevant to that person's involvement in your care or payment related to your care. Generally, we will provide you the opportunity to object to such disclosures; however, in certain circumstances, we may use and disclose your health information for these purposes without providing you the opportunity to object.

Coroner: We may disclose health information to coroners, consistent with applicable law, to carry out their duties.

Correctional Institution: If you are an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.

Decedant Information: Protected Health Information is no longer protected after a period of Fifty (50) years; and information about the care and services rendered (prior to death) may be provided without authorization unless prohibited by the patient in advance. To prohibit such releases, please call (888)344-1810.

Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs or replacement.

Fundraising: Patients have the right to opt out of fundraising communications by contacting (888)344-1810.

Funeral Directors: We may disclose health information to funeral directors, consistent with applicable law, to carry out their duties.

Government Functions: Your health information may be disclosed for the purpose of protecting public officials, national security and intelligence activities and other specialized government functions, as necessary.

Marketing: We may use your information to contact you to provide information about treatment alternatives or other health-related benefits and services that may be of interest to you. From time to time, your health care provider or designee may contact you to request your permission to participate in health education and/or promotion.

Military and Veterans: If you are a member of the armed forces, we may release medical information about you as required by military command authorities. We also may release medical information about foreign military personnel to the appropriate foreign military authority.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, and inform them of your location and general condition.

Organ Procurement Organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant. This is to facilitate a patient or family's request to be an organ or tissue donor.

Post-Treatment Follow-up: Agapé Physicians Care may contact you to check on your health status or to ensure we have answered all of your questions. If you participate in post-treatment support groups, you may be given tools for your convenience that inform others of your diagnosis and/or treatment.

Private Payment Restrictions: Patients may request to restrict disclosure of PHI to a health plan if paying in full out of pocket at the time services are rendered.

Public Health: As required by federal, state and local law, we may disclose your health information to public health or legal authorities charged with preventing, reporting or controlling disease, injury, disability or for other health oversight activities.

Required by Law or Law Enforcement: Agapé Physicians Care may use and disclose information about you as required by law. Your information also may be used and disclosed for law enforcement purposes, as required by law or in response to a valid subpoena. For example, we may disclose information for the following purposes:

- for judicial and administrative proceedings pursuant to legal authority,
- to report information related to victims of abuse, neglect and/or domestic violence,
- to assist law enforcement officials in their law enforcement duties and
- for purposes of governmental investigation.

Research: We may disclose information to researchers when their research has been approved by an Institutional Review Board and/or Privacy Board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Serious Threat to Health or Safety: To avert a serious threat to health or safety, we may use and disclose medical information about you when necessary. Any disclosure, however, would only be to someone able to help prevent such a threat.

Telephone Contacts: We may contact you by telephone to provide you with test results, return your call, answer questions or obtain additional information.

Workers' Compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to Workers' Compensation or other similar programs established by law.

Other uses and disclosures of your health information will be made only with your written authorization. You may revoke your authorization to use or disclose health information at any time except to the extent that action already has been taken.

For More Information or to Report a Problem

If you have questions or concerns about Agapé Physicians Care health information policies or practices, you can contact **Agapé Senior's high quality care line 1-888-344-1810 (toll free)**. If you believe your privacy rights have been violated, you may file a complaint with **Agapé Senior's high quality care line 1-888-344-1810**. There will be no retaliation for filing a complaint.



Acknowledgment of Notice of Privacy Practices

My signature acknowledges my receipt of the Notice of Privacy Practices from Agapé Physicians Care.

Signature of Patient or Designee

Date

Follow Up Documentation: