

# NOTICE OF PRIVACY PRACTICES

Effective date: September 23, 2013

This notice describes how Truman Medical Centers (TMC) may use and disclose your health information.

## Our Commitment to Your Health Information

We understand that your medical information is very personal. We are committed to protecting information about the healthcare services you receive at TMC. This notice will be followed by every healthcare provider at every location at which TMC provides medical services.

## Your Health Information Rights (and Limits on Those Rights)

Your medical record is the physical property of TMC.

You have the right to:

- Inspect and obtain a copy of your medical record;
- Request limits on certain uses and disclosures of the information;
- Request amendments to your medical record;
- Request a record of disclosures other than for payment, treatment or healthcare operations, or as authorized by you;
- Request that a different phone number or address be used for communications or that an alternative method of providing information be utilized; and
- Revoke any authorization to use or disclose your medical record except to the extent that action has already been taken with that information.

## Our Responsibilities

We are required to:

- Make sure your medical information is kept private;
- Give you this Notice of Privacy Practices;
- Follow the terms of the Notice of Privacy Practices in effect;
- Notify affected individuals following a breach of unsecured Protected Health Information (PHI);
- Notify you if we are unable to agree to your request to limit the use or disclosure of your health information; and
- Try to meet reasonable requests to communicate your medical information by other means or at other locations.

We reserve the right to change our practices and to be sure the new practices keep all medical information safe. Should this Notice change, we will post a revised Notice on [www.trumed.org](http://www.trumed.org) and throughout our facilities, and will have copies available for you. We will not use your medical information without your permission, except as described in this Notice or allowed by law.

## How We May Use and Disclose Medical Information

For each category of uses or disclosures, we will explain what we mean and try to give examples. All of the ways we are permitted to use and disclose information will fall into one of the categories.

- **Treatment:** Your health information may be shared with others who provide you with medical treatment or services. For example, upon discharge from an inpatient hospitalization TMC may provide information to outside healthcare providers who are following up with you on your medical condition.
- **Payment:** Your health information may be shared with insurance companies and other third parties to collect payment for the services received. For example, TMC may give your insurance company information about your surgery so they will pay for the treatment.

**EXCEPTION:** You have the right to restrict disclosure for payment purposes when you agree to be self pay and pay for the services in full.

- **Healthcare Operations:** Your health information may be shared in order to support business activities that are considered necessary to TMC. For example, TMC may use your health information to conduct quality assessment and improvement activities, to review competence or qualifications of healthcare professionals or for reviews by external agencies for licensure, accreditation or auditing.
- **Appointment Reminders:** We may provide reminders by mail, secure email, text messages, or phone, or by leaving messages according to your specifications.
- **Treatment Alternatives:** We may provide you with information about treatment alternatives and other health related benefits and services.
- **Required by Law:** We disclose information as required by federal, state or local law. For example, we are required to report gunshot wounds to the police.
- **Law Enforcement:** We may disclose health information for law enforcement purposes as required by law, pursuant to a court order, warrant, subpoena or summons.
- **To prevent a serious threat to health or safety:** We may use or disclose health information about you to prevent a serious threat to your health and safety or the health and safety of the public or another person.

- **Hospital Directory:** Unless you object, we will place your name, your location in the hospital, general condition and religious affiliation in a hospital directory. If you do not want to be included in this directory, please tell a Patient Access Representative when you are admitted.
- **Individuals involved in your care or payment for your care:** Unless you object, TMC may share your medical information with your family, friends or others identified by you who are involved in your medical care or payment. TMC may also share your medical information for disaster relief efforts and with family members, or others so that they can be told about your location or condition.
- **Disaster Relief/Emergencies:** Unless you object, TMC may share your medical information in emergencies, tell you later, and give you the right to object to future sharing.
- **Public Health:** As required by law, TMC may disclose your health information to public health agencies or authorities charged with preventing or controlling disease, injury or disability, or to report a suspected case of abuse or neglect.
- **Organ and Tissue Procurement Organizations:** TMC may disclose health information to organizations that handle organ, eye and tissue transplantation or to an organ bank as necessary to facilitate organ or tissue donation.
- **Marketing:** We will ask your permission to use or disclose your medical information for marketing purposes.
- **Fundraising:** Unless you object by telling the TMC Charitable Foundation at 816-444-3430 the Foundation may contact you for fundraising purposes.
- **Research:** TMC may disclose your medical information to researchers when their research has been approved by an institutional review and privacy board that has reviewed the research proposal and established protocols to ensure the privacy of your protected health information.
- **Business Associates:** We may contract with outside businesses to provide some services for us. For example, we may use the services of transcription or billing agencies. Under such contracts, we may share your medical information with them to do the job we have asked them to do. These contracts require businesses to protect the medical information we share with them.
- **Coroners and Funeral Directors:** We may disclose information to coroners or medical examiners for the identification of a body or to determine cause of death. We may also disclose information to funeral directors to carry out their duties.
- **Correctional Institutions:** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may disclose your health information to the institution or official.
- **Health Oversight Activities:** Your health information may be disclosed to governmental agencies and boards for investigation, audits, licensing and compliance purposes.
- **Legal Proceedings:** If you are involved in a lawsuit or dispute, we may disclose health information about you in response to a subpoena, court order or administrative order.
- **Military and Veterans:** If you are a member of the armed forces, we may release health information about you as required by the military.
- **National Security Efforts:** We may disclose medical information about you to authorized federal officials so that they may provide protection to the President and other authorized individuals or for the purposes of intelligence, counterintelligence and other national security activities authorized by law.
- **Other Uses and Disclosures of Medical Information:** Other uses and disclosures of medical information not covered by this notice or required by law may require your approval.

## Use of Health Information Exchanges

A health information exchange is an electronic method to share medical information about your care with other health care providers who have an established treatment relationship with you. We participate in health information exchanges and may use or disclose your information with those health information exchanges. You may obtain more information about the exchange or begin the opt-out process by contacting TMC Health Information Management at 816-404-3125.

## For More Information or to Report a Problem

If you feel that your privacy rights have been violated, you can file a complaint by calling our toll-free Compliance Concern line at 1-866-494-3600, or you may file a complaint with the Secretary of the United States Department of Health and Human Services. You will not be penalized for filing a complaint.