

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

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 Liberty Hospital Health Information Management at 816-415-3480.

Our Responsibilities

- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy upon request.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, at our facilities, and on our website.

This Notice of Privacy Practices applies to the following organizations: Liberty Hospital and its affiliates, which include Liberty Hospital owned clinics; and members of Liberty Hospital's Organized Healthcare Arrangement when they are providing services to our patients.

THE PATIENT AND HIS/HER REPRESENTATIVE HAS THE RIGHT TO:

- An environment that preserves dignity and contributes to a positive self-image.
- Be free from neglect, exploitation, and verbal, mental, physical, or sexual abuse; to a safe and secure environment; to protective services while in the hospital, and to consult with the appropriate protective agency prior to discharge.
- Impartial access to treatment or accommodations regardless of race, color, creed, sex, sexual orientation, national origin, religion, age, gender identity/expression, communicable disease, disability, or source of payment.
- Choose who they want as visitors without unreasonable restriction; to be present for emotional support and to have reasonable visitation hours established by the hospital.
- Have cultural, psychosocial, spiritual and personal values, beliefs and preferences respected and supported.
- Personal privacy; to have all communications and records concerning patient care kept confidential.
- Know the identity and professional status of care givers.
- Supportive care including appropriate management of pain and treatment of uncomfortable symptoms.
- Appoint a person to make health care decisions on his/her behalf, to the extent permitted by law, in the event he/she loses the capacity to do so.
- Make advance treatment directives. To have his/her advance directive honored.
- Be informed regarding the hospital's plan of care for the patient; to be involved in his/her care, to be provided adequate information, and to have questions or concerns about his/her care answered.
- Participate in discharge planning, including being informed of service options that are available to the patient and a choice of agencies which provide the service.
- Accept or refuse any procedure, drug or treatment and to be informed of the possible consequences of any such decision.

- Consent or refuse care that involves research, experimental treatments or educational projects, clinical trials, and that refusal to participate or discontinue participation will not compromise access to care.
- Receive information in a manner he/she can understand.
- Give or withhold informed consent to produce or use recordings, films, or other images for purposes other than his/her care.
- Review the patient's medical record and to receive copies of the record at a reasonable fee.
- When a patient has brought personal possessions to the hospital, s/he has the right to have these possessions reasonably protected.
- Have complaints reviewed by the hospital; be informed of the hospital's patient complaint/grievance procedures, including who to contact and how; the right to file a formal or informal verbal or written grievance and to expect a prompt resolution of the grievance, including a timely written notice of the resolution.
- Be informed of these rights.
- If you have any questions regarding these patient rights or wish to voice a concern about a possible violation of your rights, please ask your nurse, physician, or the director of the unit to address your concern. If after discussion, an issue remains unresolved, we request you contact the patient advocate line at 816-407-4530.
- If your concern is not sufficiently addressed or resolved, then you may file a complaint with either of the following agencies:
 - State of Missouri Division of Health and Senior Services
216 Wildwood Drive
PO Box 570
Jefferson City, Missouri 65012
800-392-0210
complaint@dhss.mo.gov
 - The Office of Quality Monitoring
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
800-994-6610
complaint@jointcommission.org
 - Missouri Medicare Quality Improvement Organization (Primaris)
200 N. Keene Street, Suite 101
Columbia, Missouri 65201
800-735-6776



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.**

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record.

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Request us to amend your medical record.

- You may request that we amend health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request communications be confidential

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say “yes” to all reasonable requests.

Ask us to limit what we use or share

- You can ask us **not** to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

Get a list of those with whom we’ve shared information.

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your HIPAA rights are violated.

- You can complain if you feel your rights have been violated by mail to the Privacy Officer, at Liberty Hospital, 2525 Glenn Hendren Dr., Liberty, MO 64068, email PrivacyOfficer@libertyhospital.org, or phone 816-792-7231
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Ave, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
 - Share information in a disaster relief situation
 - Include your information in a hospital directory
- If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- With marketing companies
- Sale of your information
- Psychotherapy notes, unless otherwise required by law.

In the case of fundraising:

- We may contact you for fundraising efforts, but you may request to opt out of receiving future information.

Our Uses and Disclosures

How do we typically use or share your health information. We typically use or share your health information in the following ways.

Treat You

- We can use your health information and share it with other healthcare professionals who are treating you.
Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

- We can use and share your health information to run our practice, improve your care, and contact you when necessary.
Example: We use health information about you to manage your treatment and services.

Bill for your services

- We can use and share your health information to bill and get payment from health plans or other entities.
Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information? We are allowed or required to share your information in other ways—usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

Help with public health and safety issues.

- We can share health information about you for certain situations such as:
 - Preventing disease
 - Helping with product recalls
 - Reporting adverse reactions to medications
 - Reporting suspected abuse, neglect, or domestic violence
 - Preventing or reducing a serious threat to anyone’s health or safety

Do research

- We can use or share your information for health research.

Comply with the Law

- We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we’re complying with federal privacy law.

Respond to organ and tissue donation requests

- We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers’ compensation, law enforcement, and other government requests

- We can use or share health information about you:
 - For workers’ compensation claims
 - For law enforcement purposes or with a law enforcement official
 - With health oversight agencies for activities authorized by law
 - For special government functions such as military, national security, and presidential protective services