
Notice of EveryStep 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.

Use and Disclosure of Health Information

EveryStep may use your health information for purposes of:

- Providing you treatment
- Obtaining payment for your care
- Conducting health care operations

The following are examples of times under which your health information may be used or disclosed after you sign the written consent.

For Treatment

To coordinate care within EveryStep. This includes sharing your health information with your attending physician, the interdisciplinary group and other health care professionals who assist EveryStep in providing your care. EveryStep may also share your health information with individuals outside of EveryStep such as family members, clergy whom you designate, pharmacists, medical equipment suppliers and other health care professionals who are used in the coordination of your care.

To Obtain Payment

EveryStep may include your health information in invoices to insurers (private insurance, Medicare and/or Medicaid) to collect payment for services you have received. EveryStep may need prior approval from your insurer and may need to explain to them your need for care and the services that will be provided to you.

To Conduct Health Care Operations

EveryStep may use and disclose your health information for our own operations and as necessary to provide quality care to all of EveryStep patients and clients. These include functions like: quality improvement activities, protocol development, professional review and performance evaluation, training programs for students, accreditation, licensing, medical review, legal services, business planning, cost management, administrative activities of EveryStep, fundraising for the benefit of EveryStep and certain marketing activities (unless you tell us you do not want to be contacted).

If you are a patient at one of the hospice houses, certain information about you (name, general health status, religious affiliation, and room number) may be disclosed while you are receiving care in that facility. EveryStep may disclose this information to people who ask for you by name. Please inform us if you do not want this information disclosed.

For Fund Raising

EveryStep may use information about you (name, address, phone number, and dates of care) to contact you or your family to support EveryStep with a contribution. This information may be released to the EveryStep Foundation. If you do not want EveryStep Foundation to contact you or your family, notify the foundation director at 515-271-1309 and indicate that you do not wish to be contacted.

For Marketing

EveryStep may send to you or your family members communications informing you of EveryStep activities. If any personal health information and/or photos are to be included in this material, EveryStep will obtain a specific authorization from you before using your information/photos.

In addition, any disclosures that constitute a sale of personal health information for marketing purposes requires a specific authorization from you.

When Legally Required

EveryStep will disclose your health information when it is required to do so by any Federal, State or local laws. EveryStep may release your health information in response to a court order or other valid legal processes. In addition, EveryStep may release your health information to identify or locate a missing person, fugitive or suspect, if EveryStep suspects your death was the result of criminal conduct, in order to report a crime or when you are the victim of a crime

When There Are Risks to Public Health

EveryStep may disclose your health information for public health activities such as: prevention or controlling a disease, reporting death, reporting of adverse events or product defects. EveryStep may disclose your health information, in good faith, if we believe that such disclosure is needed to prevent an imminent threat to your health or safety or to the health and safety of the public.

To Report Abuse, Neglect or Domestic Violence

EveryStep is allowed to notify government authorities if EveryStep believes a patient or client is a victim of abuse, neglect or domestic violence. EveryStep will make this disclosure only when specifically required or authorized by law or when the patient agrees to the disclosure.

To Coroners and Medical Examiners

EveryStep may disclose your health information to coroners and medical examiners for purposes of determining your cause of death or for other duties, as authorized by law.

To Funeral Directors

If necessary to carry out their duties with respect to your funeral arrangements.

For Organ, Eye or Tissue Donation

To organ procurement organizations or those involved in procuring, banking or transplanting to comply with patient or family wishes.

For Research Purposes

Before EveryStep discloses any of your health information for research purposes; the project will be subject to an extensive approval process. EveryStep will ask your permission if any researcher will be granted access to your individually identifiable health information.

For Worker's Compensation

EveryStep may release your health information to worker's compensation or similar programs.

For all other uses and disclosures not described in this Notice of Privacy Practices document; including must uses and disclosures of psychotherapy notes (where appropriate); a specific authorization from the individual will be required.

Your Rights with Respect to Your Health Information

You have the following rights regarding your health information that EveryStep maintains:

Right to Request Restriction

You may request restrictions to certain uses and disclosures of your health information. You may request a limit on EveryStep's disclosure of your health information to someone involved in your care or in the payment of your care. EveryStep is not required to agree to your request. In addition, you may restrict certain disclosures of your personal health information to a health plan if you pay for a service in full and out of pocket. If you wish to make a request for restriction, please contact the EveryStep Privacy Officer at 515-271-1313.

Right to Receive Confidential Communications

You may request that EveryStep communicate with you in a certain way. For example, you can request that EveryStep communicate health information to you privately with no family members present. If you wish to receive confidential communications in an alternative manner, please contact the EveryStep Privacy Officer at 515-271-1313. EveryStep will not request that you provide any reasons for your request and will attempt to honor your reasonable request for confidential communications.

Right to Inspect and Copy Your Health Information

A request to inspect and copy your health records or your billing records may be made to the EveryStep Privacy Officer at 515-271-1313. If you request a copy of your health information, EveryStep may charge a reasonable fee for copying and assembling costs associated with your request.

Right to Amend Health Care Information:

If you or your personal representative believes that your health records are incorrect or incomplete, you may request that EveryStep amend the record. This request applies to information maintained by EveryStep. A request for amendment must be made in writing to the EveryStep Privacy Officer. EveryStep may deny the request if it is not in writing or does not include a reason for the amendment. The request may also be denied if your records were not created by EveryStep or are not a part of EveryStep's records, if the health information you wish to amend is not part of the health information you are permitted to inspect and copy, or if in the opinion of EveryStep, the records containing your health information are accurate and complete.

Right to Opt out of Fundraising Communications:

EveryStep may contact you or your family to raise money for EveryStep. The communication you receive regarding this will include an "opt out" selection for you if you do not wish to receive further communications.

Right to an Accounting:

You or your personal representative may request an accounting of disclosures of your health information made by EveryStep for any reason other than for treatment, payment or health operations. The request must be made in writing to the Privacy Officer. The request must include the time period for the accounting starting no sooner than 2007. Accounting requests may not be made for periods of time in excess of six years. EveryStep will provide the first accounting during any 12-month period without charge. Subsequent accounting requests are subject to a reasonable cost-based fee.

Right to a Paper Copy of this Notice:

You or your personal representative has a right to a separate paper copy of this notice at any time even if you or your representative received this notice previously. To obtain a separate paper copy, please contact the EveryStep Privacy Officer at 515-271-1313.

Right to be Notified of a Breach:

In the event there is an unsecured breach of your health information, EveryStep will notify you as required in the Breach Notification Rule (45 CFR Parts 160 and 164).

Contact Person

EveryStep contact person for all issues regarding patient privacy and your rights under the State and Federal Privacy Standards is: EveryStep Privacy Officer at 515-271-1313. Please call for address information.

Duties of EveryStep

EveryStep is required by law to maintain the privacy of your health information and to provide to you and your personal representative this notice of its duties and privacy practices. EveryStep of Iowa is required to abide by the terms of this notice as may be amended from time to time. EveryStep reserves the right to change the terms of its notice to make the new notice provisions effective for all health information that it maintains. If EveryStep changes its notice, EveryStep will provide a copy of the revised notice on their web site or by request to the EveryStep Privacy Officer at 515-271-1313. You or your personal representative has the right to express complaints to EveryStep and to the Secretary of Health and Human Services if you believe that your privacy rights have been violated. Any complaint to EveryStep should be made in writing to the Privacy Officer. EveryStep encourages you to express any concerns you may have regarding privacy of your information. You will not be retaliated against in any way for filing a complaint.