

NOTICE OF PRIVACY POLICIES FOR BEACHAM MEMORIAL HOSPITAL

Magnolia, Mississippi

Effective April 15, 2003

Revised October 20, 2009

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Introduction

At Beacham Memorial Hospital, we are committed to treating and using protected medical information about you responsibly. This Notice of Health Information Practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information. This **Notice is effective April 15, 2003**, and applies to all protected health information as defined by federal regulations.

Understanding Your Medical Information

Each time you are admitted to Beacham Memorial Hospital, a record of your visit is created. 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.
- Means of communication among the many health professionals who contribute to your care,
- Legal document describing the care you received.
- Means by which you or a third-party payer can verify that services billed were actually provided.
- A tool in educating health professionals.
- A source of data for medical research.
- A source of information for public health officials charged with improving the health of this state and the nation.
- A source of data for our planning and marketing.
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understanding what is in your record and how your medical information is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may access your medical information, and make more informed decisions when authorizing disclosure to others

Your Medical Information Rights

Although your medical record is the physical property of Beacham Memorial Hospital, the information belongs to you. You have the right to:

- Receive communications from Beacham Memorial Hospital in a confidential manner.
- Request a paper copy of this Notice of Privacy Practices.
- Generally you may inspect and copy your medical / health records. This right is subject to certain specific exceptions and you may be charged a reasonable fee for any copies of your medical information. 45 CFR 164.524
- Request amendments to your medical information. Due to certain specific reasons your request may be denied, if so Beacham Memorial Hospital will provide you with a written explanation for the denial and information in reference to your rights. 45 CFR 164.528
- Obtain an accounting of disclosures of your medical information made by Beacham Memorial Hospital during the last six (6) years (or after April 14, 2006) except for, disclosures for treatment, healthcare operations, or payments,

disclosures which you authorize, and certain other specific disclosures. This information is subject to certain exceptions, restrictions, and limitations. 45 CFR 164.528

- Request communications of your medical information by alternative means or at alternative locations.
- Request a restriction on certain uses and disclosures of your medical information. Beacham Memorial Hospital is not required to agree to the request but if agreed to, the facility will honor. 45 CFR 164.522
- Revoke your authorization to use or disclose medical information except to the extent of action that has already been taken.

Our Responsibilities

Beacham Memorial Hospital is required to:

- Maintain the privacy of your medical information.
- Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- Abide by the terms of this notice.
- Notify you if we are unable to agree to a requested restriction, and
- Accommodate reasonable requests you may have to communicate medical information by alternative means or at alternative locations.

Privacy Policy Revisions

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. If revisions are made, BMH will make paper copies of revised Notice of Privacy Policies available.

Authorizations

We will not use or disclose your medical information without your authorization, except as described in this notice. We will also discontinue the use of or disclose your health information after we have received a written revocation of the authorization according to the procedures included in the authorization. To request a Revocation of Authorization form, you may contact:

BEACHAM MEMORIAL HOSPITAL
Director, Health Care Information
205 N. CHERRY ST. – P.O. BOX 351
MAGNOLIA, MS 39652
601-783-2353 Ext: 314

Examples of Disclosures for Treatment, Payment and Health Operations

We will use your medical information for treatment.

For example: Information obtained by a nurse, physician, or other member of your health care team will be recorded in your record and used to determine the course of treatment that should work best for you. Departments of the hospital may also share medical information about you in order to coordinate your medical treatment. Members of your health care team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment.

We will also provide your physician or a subsequent health care provider with copies of various reports that should assist him or her in treating you once you're discharged from this hospital.

We will use your medical information for payment.

For example: A bill may be sent to you 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.

We will use your medical information for regular health operations.

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

Business Associates: There are some services provided in our organization through contracts with business associates. Examples include consulting physicians and various contracted therapeutic services and radiology, also certain laboratory tests. When these services are contracted, we may disclose your medical information to our business associate so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your medical information, however, we require the business associate to appropriately safeguard your information.

Directory: Unless you notify us that you object, we will use your name, location in the facility, general condition, and religious affiliation for directory purposes. Directory information except for your religious affiliation will be released to people who ask for you by name. This information may be provided to members of the clergy, even if they do not ask for you by name, unless you object.

Notification: Unless you object we may use or disclose your medical information to notify or assist in notifying a designated family member, personal representative, or another person responsible for your care, your location, and general condition.

Communication with Family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person you identify, medical information relevant to that person's involvement in your care or payment related to your care.

Research: We may disclose your medical information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your medical information.

Coroners, Medical Examiners, Funeral Directors: We may disclose your medical information consistent with applicable law to carry out their duties.

Organ Procurement Organizations: Consistent with applicable law, we may disclose your medical 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.

Marketing: We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

Fund Raising: We may contact you as part of a fund-raising effort.

Food and Drug Administration (FDA): We may disclose to the FDA your medical 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.

Workers' Compensation: We may disclose your medical 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.

Public Health: As required by law, we may disclose your medical information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Disaster Relief: Your medical information may be disclosed to a public or private entity, such as the American Red Cross, for the purpose of coordinating with that entity to assist in disaster relief efforts.

Abuse or Neglect: As required by federal and state law, we may disclose your medical information when it concerns abuse, neglect, or violence to you.

Law Enforcement: We may disclose medical information for law enforcement purposes as required by law or in response to a valid subpoena. We may also disclose medical information in the course of certain judicial or administration proceedings.

Oversight Activities: Federal law makes provision for your medical information to be released to an appropriate health oversight agencies, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

For More Information or to Report a Problem

If you have questions and would like additional information, you may contact:

Beacham Memorial Hospital
Privacy Officer
205 N. Cherry St - P.O. Box 351
Magnolia, MS 39652
601-783-2351 Ext: 249

If you believe your privacy rights have been violated, you can file a complaint with the hospital's Privacy Officer or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Privacy Officer or the Office for Civil Rights. The address for the OCR is listed below:

Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F, HHH Building
Washington, D.C. 20201