

NOTICE OF PRIVACY PRACTICES

and Acknowledgement of Receipt of Notice

This Notice describes privacy practices in effect for the following organizations:

*Oconee Medical Center and all affiliated services lines and business units
OHCA Members*

Effective April 14, 2003

Revised May 15, 2008



**298 Memorial Drive
Seneca, SC 29672
(864) 882-3351 • (800) 357-5902
www.oconeemed.org**

This Notice describes how your medical information may be used and disclosed and how you can access this information. Please review this Notice carefully.

Our pledge to you

We understand that your medical information is personal. We are committed to protecting your medical information. We create a record of the care and services you receive to provide quality care and to comply with legal requirements.

This Notice applies to all records of your care that we maintain, whether created by facility staff or your personal doctor. Your personal doctor may have different policies or Notices regarding the doctor's use and disclosure of your medical information created in the doctor's office.

We are required by law to do the following:

- Keep medical information about you private,
- Give you this Notice of our privacy practices with respect to medical information about you, and
- Follow the terms of the Notice that is currently in effect.

Who will follow this Notice?

Oconee Medical Center and its network of service providers offer healthcare to our patients, residents, and clients in partnership with physicians and other professionals and organizations.

The privacy practices in this Notice will be followed by:

- Any healthcare professional who treats you at any of our locations,
- All departments and units of our organization and all off-campus units or departments,
- All staff and volunteers of Oconee Medical Center, the parent organization, with whom we may share information, and
- Any business associate or partner of Oconee Medical Center with whom we may share health information.

Changes to this Notice

Oconee Medical Center may change our policies at any time. Changes will apply to medical information we already possess, as well as information we receive after the change occurs. When we make a significant change in our policies, we will change our Notices and post the new Notices in waiting areas, exam rooms, and on our Website at www.oconeemed.org. The effective date of the Notice is listed on the front.

You can receive a copy of the current Notice at any time. You will be offered a copy of the current Notice each time you register at our facilities for treatment. Also, you will be asked to acknowledge in writing your receipt of this Notice.

How we may use and disclose your medical information

- We may use and disclose medical information about you for the following reasons:
 - **For treatment** (such as sending medical information about you to a specialist as part of a referral);
 - **To obtain payment for treatment** (such as sending billing information to your insurance company or Medicare); and
 - **To support our healthcare operations** (such as comparing patient data to improve treatment methods).
- We may use or disclose medical information

about you **without** your prior authorization for several other reasons. Subject to certain requirements, we may give out medical information about you without prior authorization for:

- **Public health purposes,**
- **Abuse or neglect reporting,**
- **Health oversight audits or inspections,**
- **Research studies,**
- **Funeral arrangements and organ donation,**
- **Workers' compensation purposes,** and
- **Emergencies.**
- We also disclose medical information **when required by law**, such as in response to a request from law enforcement in specific circumstances or in response to valid judicial or administrative orders.
- We may contact you to tell you about **new treatment options, alternative health-related benefits or services** that may be of interest to you, or to support **fundraising efforts**, unless you choose to decline the information
- If admitted as a patient we will list your name and location in the hospital **patient directory** so that the information can be made available to anyone who asks for you by name, unless you tell us otherwise.
- Unless you object, we may tell a family member, friend, or other person you identify, or that we have a reasonable basis to believe is involved in your medical care, medical information about you that relates to that person's involvement in your care; or to disaster relief authorities so that your family can be notified of your location and condition.

Your rights regarding your medical information

- In most cases, **you have the right to look at or obtain a copy of medical information** that we use to make decisions about your care when you submit a written request. If you request copies, we may charge a fee for the cost of copying, mailing, or other related supplies. If we deny your request to review or obtain a copy, you may submit a written request for a review of that decision.
- If you believe that information in your record is incorrect or that important information is missing, **you have the right to request that we correct the records**, by submitting a written request providing your reason for requesting the amendment.

Oconee Medical Center could deny your request to amend a record for the following reasons:

- If we did not create the information;
- If it is not part of the medical information that we maintain; or
- If we determine that the record is accurate.

You may appeal *in writing* our decision not to amend a record.

- **You have the right to a list of those instances where we have disclosed medical information about you**, other than for treatment, payment, healthcare operations, or where you specifically authorized a disclosure, when you submit a written request. The request must state the time period desired for the accounting, which must be less than a six-year period and must start after April 14, 2003. You may receive the list in paper or electronic form. The first disclosure list

request in a 12-month period is free; other requests will be charged according to South Carolina law. We will inform you of the cost before you incur any costs.

- If you receive this Notice electronically, **you have the right to a paper copy of this Notice.**
- **You have the right to request that medical information about you be communicated to you in a confidential manner.** An example of this might be a request for mail be sent to an address other than your home. You must notify us in writing of the specific way or alternate location we can use to communicate with you.
- **You have the right to request a restriction on certain uses and disclosures of your information as provided by 45 C.F.R. § 164.522;** however, Oconee Medical Center is not required to agree to a requested restriction.

Other uses of medical information

In any other situation not covered by this Notice, we will ask for your written authorization before using or disclosing medical information about you. If you choose to authorize use or disclosure, you can later revoke that authorization by notifying us in writing of your decision.

- **You may request, in writing that we not use or disclose medical information about you** for treatment, payment, or healthcare operations unless required by South Carolina law. However, you will be responsible for your bill.
- **You have a right to amend your medical information.** We will consider your request but are not legally required to accept it. We will inform you of our decision about your request.

Submitting Requests or Appeals

Submit all written requests or appeals to our Corporate Compliance Office at Oconee Medical Center, 298 Memorial Drive, Seneca, SC 29672.

Complaints

If you are concerned that your privacy rights may have been violated or if you disagree with a decision we made about access to your records, you may:

- Contact the Oconee Medical Center Corporate Compliance Office by phone at (864) 885-7928, or in writing at 298 Memorial Drive, Seneca, SC 29672.
- Contact our Corporate Compliance hotline at (888) 398-2633.
- You may also send a written complaint to the U.S. Department of Health and Human Services Office of Civil Rights at 200 Independence Avenue, Washington, DC, 20201 or call them at (202) 619-0257.

Under no circumstances will you be penalized or retaliated against for filing a complaint.

Online

You may also find this "Notice of Privacy Practices and Acknowledgement of Receipt" and the Hospital's complete "Notice of Privacy Practices" on our Oconee Medical Center website at www.oconeemed.org.



Notice of Privacy Practices and Acknowledgement of Receipt

Name (Please print)

Signature

Date