

HIPAA SUMMARY OF NOTICE OF PRIVACY PRACTICES

Wells Health Systems

Effective Date: January 1, 2003 (revised September 23, 2013)

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

Please review the full Notice of Privacy Practices (NPP), which is attached. If you have any questions about this Notice, please contact Greg Wells, Vice President of Operations, Wells Health Systems, 725 Harvard Drive, Owensboro, KY. 42301.

WHO WILL FOLLOW THIS NOTICE:

All management and others employed by Wells Health Systems as well as all entities and individuals who are charged with the responsibility of working in the best interest of the resident for treatment, payment, or health care operations. This includes, but is not limited to, any health care professional authorized to enter information into your health record; all employees, medical staff, and other personnel of Wells Health Systems; and any volunteer and volunteer group associated with Wells Health Systems.

This Notice describes the privacy practices of Wells Health Systems and any related entities, sites, and locations. All these entities, sites, and locations follow the terms of this Notice. In addition, these entities, sites, and locations may share Protected Health Information (“PHI”) with each other for treatment, payment, or health care operations purposes described in this Notice. PHI is the information that you provide us or that we create or receive about your health care.

OUR PLEDGE REGARDING YOUR PHI:

We understand that your PHI is personal. We are committed to protecting this information. We create a record of the care and services that you receive from us. We need this record to provide you with quality care and to comply with certain legal requirements. This Notice tells you about the ways in which Wells Health Systems may use and disclose your PHI, your rights to your PHI, and our obligations regarding the use and disclosure of your PHI.

We are required by law to:

- Maintain the privacy of your PHI;
- Provide you with this Notice of our legal duties and privacy practices with respect to your PHI; and

- Follow the terms of the Notice that is in effect at the time we use or disclose your PHI.

The law provides you with certain rights as described in the full NPP.

HOW WE MAY USE AND DISCLOSE YOUR PHI.

The following categories describe different ways that we use and disclose PHI. By coming to Wells Health Systems for care and services, you give us the right to use your PHI for treatment, to get reimbursed for your care, and to operate our organization. For each category of uses or disclosures in the full NPP, we explain what we mean and provide examples. Not every use or disclosure in a category will be listed in the full NPP. However, all of the ways we are permitted to use and disclose PHI will fall within one of those categories.

- **Appointment Reminders**
- **Health-Related Services and Treatment Alternatives**
- **Fundraising Activities**
- **Research**
- **To Provide Information About Organ and Tissue Donation**
- **To Allow Oversight of the Quality of the Healthcare We Provide**
- **To Allow Workers' Compensation Claims**
- **As Required by Subpoena in Lawsuits and Disputes**
- **Various Uses as Required by Law or to Avert a Serious Threat to Health or Safety**

The full details for all these uses are contained in the full NPP.

YOUR RIGHTS REGARDING YOUR PHI.

You have the following rights regarding health information we maintain about you:

- **Right to Inspect and Copy**
- **Right to Amend**
- **Right to an Accounting of Disclosures**
- **Right to be Notified of a Breach of your Unsecured PHI**
- **Right to Request Restrictions**
- **Right to Request Confidential Communications**
- **Right to a Paper Copy of This Notice**

Information on how to exercise these rights can be seen in the full NPP or can be obtained from Greg Wells, Vice President of Operations, Wells Health Systems, 725 Harvard Drive, Owensboro, KY. 42301, 270-926-9355.

CHANGES TO THIS NOTICE

We reserve the right to change this Notice. We reserve the right to make the revised or changed Notice effective for PHI we already have about you as well as any information we receive in the future. We will post a copy (located in our Public Information Book) of the current Notice in our facility. The Notice will contain on the first page, the effective date and any revision date thereafter. In addition, each time you register for treatment or health care services, we will offer you a copy of the current Notice in effect.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with us or with the Secretary of the Department of Health and Human Services. To file a complaint with us, contact Greg Wells, Vice President of Operations, Wells Health Systems, 725 Harvard Drive, Owensboro, KY. 42301, 270-926-9355. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

OTHER USES OF PHI.

Other uses and disclosures of PHI not covered by this Notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose your PHI, you may revoke that permission, in writing, at anytime. If you revoke your permission, we will no longer use or disclose your PHI for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provided to you. Some typical situations that require your written permission include marketing and fundraising, sale of electronic health records or PHI, and psychotherapy notes. The full details regarding other uses of PHI are included in the full NPP.