

# **WALKER METHODIST**

## **NOTICE OF PRIVACY PRACTICES**

**EFFECTIVE DATE: April 14, 2003**

**Revised Date: March 2, 2011**

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**

If you have any questions about this notice, please contact our Corporate Compliance Department at: 612-827-8360.

#### **WHO WILL FOLLOW THIS NOTICE:**

- Walker Methodist
- Walker Methodist Health Center, Inc.
- Walker Residence Inc, D/B/A Walker Place
- Walker Senior Housing Corporation I, D/B/A Walker on Kenzie
- Walker Senior Housing Corporation II, D/B/A Walker on the River
- Walker Senior Housing Corporation III, D/B/A Walker Plaza
- Walker Senior Housing Corporation IV, D/B/A Walker at Hazel Ridge
- Walker Senior Housing Corporation IX, D/B/A Walker at Westwood Ridge
- Walker Senior Housing Corporation X, D/B/A Walker on Lyndale
- Walker Assisted Living Corporation I, D/B/A Walker Elder Suites
- Walker Community Services, Inc.
- Walker Senior Services, Inc.
- Walker Methodist Foundation
- Walker ElderCare Services, Inc.
- Walker Highview Hills, LLC

These entities, sites, and locations may share health information with each other for treatment, payment or health care operations purposes described in this notice.

#### **OUR PLEDGE REGARDING HEALTH INFORMATION:**

Walker understands that health information about you and your health care is personal. Walker is committed to protecting health information about you. This notice applies to all information and records related to your care that our facilities have received or created. Walker needs this record to provide you with quality care and to comply with certain legal requirements. This notice will tell you about the ways in which Walker may use or disclose health information about you. Walker also describes your rights to the health information Walker keeps about you and describe certain obligations Walker has regarding the use and disclosure of your health information.

Walker is required by law to:

- make sure that health information that identifies you is kept private;
- give you this notice of our legal duties and privacy practices with respect to health information about you; and
- follow the terms of the notice that is currently in effect.

#### **HOW WALKER MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU.**

You will be asked to sign a Consent allowing us to use and disclose your personal health information for purposes of treatment, payment and health care operations. The following categories describe different ways in which Walker may use and/or disclose health information. The ways Walker is permitted to use and disclose information should fall within one of the categories.

**For Treatment.** Walker may use health information about you to provide you with health care treatment or services. Walker may disclose health information about you to doctors, nurses, technicians, health students, or other personnel who are involved in taking care of you. They may work at our sites, at the hospital if you are hospitalized, or at a doctor's office, lab, pharmacy, or other health care provider to whom you may be referred to for consultation, to take x-rays, to perform lab tests, to have prescriptions filled, or for other treatment purposes. For example, a nurse caring for you will report any change in your condition to your physician. Walker may also disclose health information to individuals who will be involved in your care after you leave the facility.

**For Payment.** Walker may use and disclose health information about you so that the treatment and services you receive from us may be billed to and payment collected from you, an insurance or health managed care company, Medicare, Medicaid or another third party payor. For example, Walker may need to give your health plan information about your care so your health plan will pay us or reimburse you. Walker may also tell your health plan about a treatment you are going to receive to obtain prior approval or to determine whether your plan will cover the treatment.

**For Health Care Operations:** Walker may use and disclose health information about you for operations of our health care program. These uses and disclosures are necessary to run our program and make sure that all of our residents receive quality care. For example, Walker may use our health information to review our treatment and services and to evaluate the performance of our staff in caring for you. Walker may also combine health information about many residents to decide what additional services Walker should offer, what services are not needed, whether certain new treatments are effective, or to compare how Walker is doing with others and to see where Walker can make improvements. Walker may remove information that identifies you from this set of health information so others may use it to study health care delivery without learning who our specific residents are.

**Facility Directory:** Unless you object, Walker will include certain limited information about you in our facility directory. This information may include your name, your location in the facility, and your general condition and your religious affiliation. Our directory does not include specific medical information about you. Walker may release information in our directory, except for your religious affiliation, to people who ask for you by name. Walker may provide the directory information, including your religious affiliation, to a member of the clergy.

**Individuals Involved in Your Care or Payment of Your Care:** Unless you object, Walker may disclose your health information to a family member or close personal friend, including clergy, who is involved in your care. This communication may occur by fax, voice-mail, and/or email.

**Disaster Relief:** Walker may also disclose health information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location.

**Health-Related Services and Treatment Alternatives:** Walker may use and disclose health information to you about health-related services or recommend possible treatment options or alternatives that may be of interest to you. Over the past several years, Walker Methodist has built a strong relationship with various health care systems that provide medical care and services. During your stay at Walker Methodist, you or your family may be contacted by one of these providers to learn more about its health care options. These organizations are not part of the Walker Methodist family of services, and you have no obligation to utilize what they have to offer. Please let us know if you do not wish us to send you information, or if you wish to have us use a different address when mailing this information to you. Walker will disclose to you any business relationship it may have with any of these providers.

**Fundraising Activities:** Walker may use health information about you to contact you in an effort to raise money for our not-for-profit operations. Walker may disclose health information to a foundation related to our operations so that the foundation may contact you in raising money for our operations. Walker only will release contact information, such as name, address, and phone number and the dates you received treatment or services from us. Please let us know if you do not want us to contact you for such fundraising efforts.

**Research:** Walker may allow health information of residents from our facility to be used or disclosed for research purposes provided that the research adheres to certain privacy protections. Your health information may be used for research purposes only if the privacy aspect of the research has been reviewed and approved by a special Privacy Board or Institutional Review Board, if the researcher is collecting information in preparing a research proposal, if the research occurs after your death, or if you authorized the use or disclosure.

**Organ and Tissue Donation:** If you are an organ donor, Walker may release health information to organizations that handle organ, eye, or tissue procurement, transplantation, or donation to an organ bank, as necessary to facilitate organ or tissue donation and transplantation.

**As Required by Law:** Walker will disclose health information about you when required to do so by federal, state or local law.

**To Avert a Serious Threat to Health or Safety:** Walker may use and disclose health information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

**Military and Veterans:** If you are a member of the armed forces or separated/discharged from military services, Walker may release health information about you as required by military command authorities or the Department of Veterans Affairs as may be applicable. Walker may also release health information about foreign military personnel to the appropriate foreign military authorities.

**Workers Compensation:** Walker may release health information about you for worker's compensation or similar programs. These programs provide benefits for work-related injuries or illness.

**Public Health Risks:** Walker may disclose health information about you for public health activities. These activities generally include the following:

- to prevent or control disease, injury or disability;
- to report births and deaths;
- to report child abuse or neglect;
- to report reactions to medications or problems with products;
- to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition;
- to notify the appropriate government authority if we believe a resident has been the victim of abuse, neglect, or domestic violence. Walker will make this disclosure when required or authorized by law.

**Health Oversight Activities:** Walker may disclose health information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure activities. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.

**Lawsuits and Disputes:** If you are involved in a lawsuit or a dispute, Walker may disclose health information about you in response to a court or administrative order. Walker may also disclose health information about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

**Law Enforcement:** Walker may release health information if asked to do so by a law enforcement official:

- in response to a court order, subpoena, warrant, summons or similar process;
- to identify or locate a suspect, fugitive, material witness, or missing person;
- about the victim of a crime if, under certain limited circumstances, Walker is unable to obtain the person's agreement;
- about a death Walker believes may be the result of a criminal conduct;
- about criminal conduct at our facility; and
- in emergency circumstances to report a crime, the location of the crime or victims, or the identity, description, or location of the person who committed the crime.

**Coroners, Health Examiners, and Funeral Directors:** Walker may release health information to a coroner or health examiner. This may be necessary, for example, to identify a deceased person or to determine the cause of death. Walker may also release health information about residents to funeral directors as necessary to carry out their duties.

**National Security and Intelligence Activities:** Walker may release health information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

**Protective Services for the President and Others:** Walker may disclose health information about you to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state, or conduct special investigations.

**Inmates:** If you are an inmate of a correctional institution or under the custody of a law enforcement official, Walker may release health information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

### **YOUR RIGHTS REGARDING HEALTH INFORMATION ABOUT YOU.**

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

**Right to Access/Inspect and Copy:** You have the right to request in writing your medical or billing records or other written information that may be used to make decisions about your care. This does not include psychotherapy notes. We must allow you to inspect your records within 24 hours of your request. If you request copies of your records, we must provide you with copies within 2 (two) working days of that request. Walker may charge a reasonable fee for copying and mailing your requested information. Contact the site administrator/director.

Walker may deny your request to inspect or receive copies in certain limited circumstances. If you are denied access to health information, in some cases you will have a right to request review of the denial. This review would be performed by a licensed health care professional, designated by the facility, who did not participate in the decision to deny.

**Right to Amend:** If you feel that health information Walker has about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as Walker keeps the information. Your request must be made in writing to the site administrator/director and must state the reason for the requested amendment.

Walker may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, Walker may deny your request if you ask us to amend information that:

- was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- is not part of the health information maintained by or for the facility;
- is not part of the information which you would be permitted to inspect or copy; or
- is already accurate and complete, as determined by the facility.

Any amendment Walker makes to your health information will be disclosed to those with whom Walker disclosed information as previously specified.

If Walker denies your request for amendment, Walker will give you a written denial including the reasons for the denial and the right to submit a written statement disagreeing with the denial.

**Right to an Accounting of Disclosures:** You have the right to request a list accounting for any disclosures of your health information Walker has made, except for uses and disclosures for treatment, payment, and health care operation, as previously described.

To request this list of disclosures, submit your request in writing to the site administrator/director. Your request must state a time period which may not be longer than six years and may not include dates before April 14, 2003. An accounting will include, if requested the disclosure date, the name of the person or entity that received the information and address, if known, a brief description of the information disclosed, a brief statement of the purpose of the disclosure or a copy of the authorization or request, or certain summary information concerning multiple similar disclosures. The first list you request within a 12 month period will be free. For additional lists, we may charge you for the cost of providing the list. Walker will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred. Walker will mail you a list of disclosures in paper form within 30 days of your request, or notify you if Walker is unable to supply the list within that time period and by what date we can supply the list; but this date will not exceed a total of 60 days from the date you made the request.

**Right to Request Restrictions:** You have the right to request a restriction or limitation on the health information Walker uses or discloses about you for treatment, payment, or health care operations. You also have the right to restrict the health information Walker discloses about you to a family member, friend, or other person involved in your care or the payment of your care.

*Walker is not required to agree to your request for restrictions if it is not feasible for us to ensure our compliance or believe it will negatively impact the care we may provide you.* If Walker does agree, Walker will comply with your request unless the information is needed to provide you emergency treatment. To request a restriction, you must make your request in writing. In your request, you must tell us what information you want to limit and to whom you want the limits to apply.

**Right to Request Confidential Communications.** You have the right to request that Walker communicate with you about health matters in a certain way or at a certain location. For example, you can ask that Walker only contact you at work or by mail to a post office box.

To request confidential communication, you must make your request in writing to the site administrator/director. Walker will not ask the reason for your request. Walker will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

**Right to a Paper Copy of This Notice:** You have the right to obtain a paper copy of this notice at any time. To obtain a copy, please request it from the Corporate Compliance Officer, Corporate Compliance Department. You may also obtain a copy of this notice at our website, [www.walkermethodist.org](http://www.walkermethodist.org).

### **CHANGES TO THIS NOTICE**

Walker reserves the right to change this notice. Walker reserves the right to make the revised or changed notice effective for health information Walker already has about you as well as any information Walker may receive in the future. Walker will post a copy of the current notice in our facility. The notice will contain on the first page, the effective date. In addition, each time you register for treatment or health care services, Walker 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 Department of Health and Human Services. To file a complaint with us, contact the Corporate Compliance and Privacy Officer. Complaints may be submitted in writing to:

Corporate Compliance Department  
Walker Methodist  
3737 Bryant Ave. So.  
Minneapolis, MN. 55409  
612-827-8360

Or

Region V, Office of Civil Rights,  
U.S. Department of Health and Human Services  
233 N. Michigan Ave. Suite 240  
Chicago, ILL. 60601  
Phone 312-886-2359  
Fax - 312-886-1807  
TDD 312-353-5693

**You will not be retaliated against for filing a complaint.**

### **OTHER USES OF HEALTH INFORMATION.**

Other uses and disclosures of health information not covered by this notice or laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, Walker will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that Walker is unable to take back any disclosures Walker has already made with your permission, and that Walker is required to retain our records of the care that Walker provided to you.