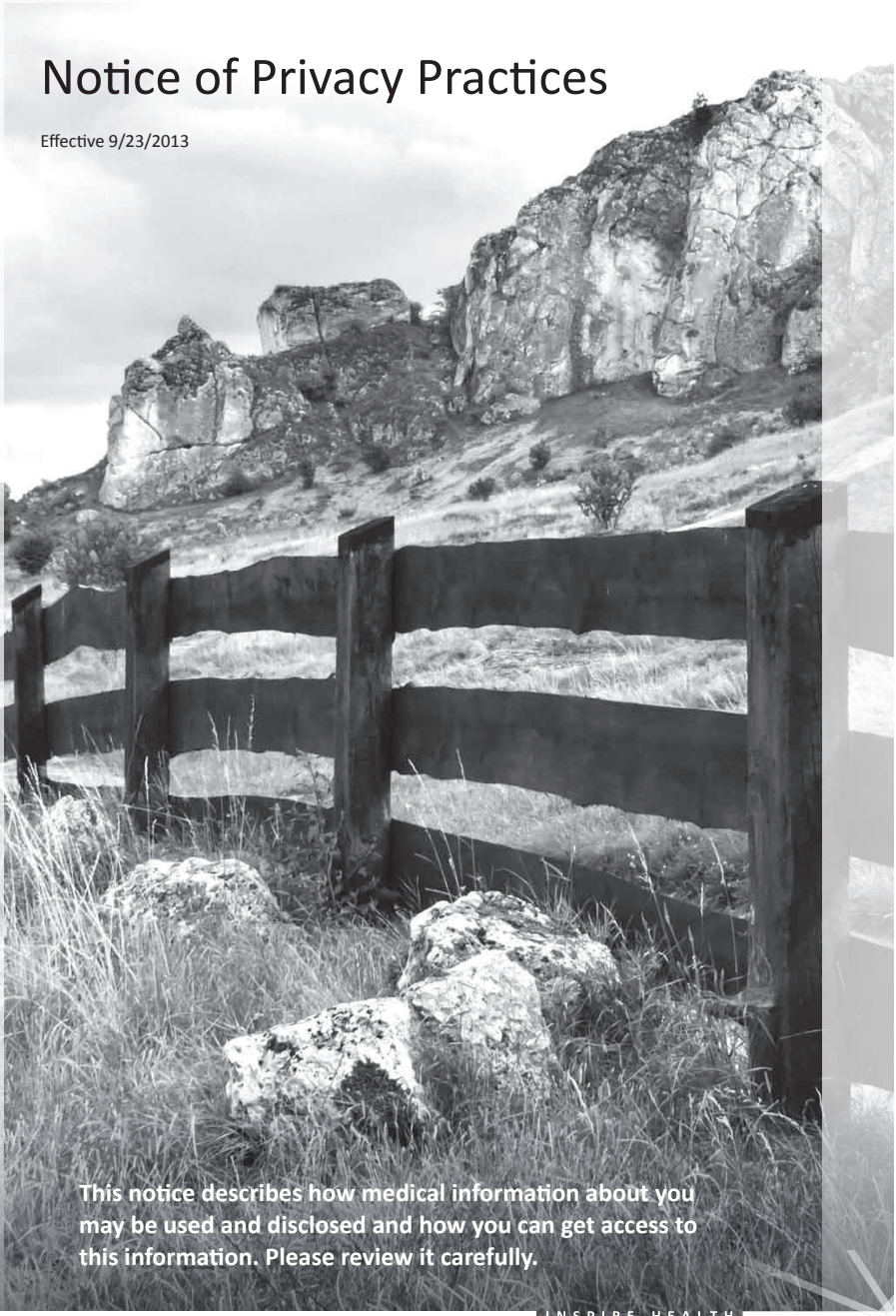
Notice of Privacy Practices

Effective 9/23/2013



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.

INSPIRE HEALTH

www.centura.org

Centura Health

Your personal medical information is private

Centura Health understands how important your personal medical information is to you. We know you are concerned with how that information might be used, the way in which it is disclosed and how you can access that information. That is why we've put this document in your hands. It's why the "Privacy Practices" outlined here are so important and why we want to pledge our commitment, at the outset, to respect your personal medical information.

Our pledge to you

We understand that your medical information is personal and confidential. We create a medical record of the care you receive because it's our legal obligation, but more importantly because we want to provide you with quality care. Please know we are committed to protecting your personal medical information from any use for which it was not intended.

If you have any questions regarding the contents of this Notice of Privacy Practices, please contact the facility main number, ask for the designated privacy officer or call the Centura Health Integrity Helpline at 1-888-424-2458.

In short, the law requires us to:

- Keep your medical information private.
- Notify you of our legal duties and privacy practices with respect to your medical information.
- Follow the terms of the most current notice.

What this notice is all about

The information in this document applies to all of your medical records. Please understand that a non-Centura Health doctor may have different policies or notices regarding the use and disclosure of the medical information created in his or her office. This notice will tell you about the specific ways Centura Health and our facilities may use and disclose your medical information. This notice also describes your rights and the duties we have regarding the use and disclosure of your medical information.

Adhering to privacy practices

The U.S. Department of Health and Human Services sponsored the Health Insurance Portability and Accountability Act (HIPAA). HIPAA dictates the medical information privacy practices that health care organizations and their

partners are obligated to follow. Centura Health provides health care to our patients, residents, and clients in partnership with many physicians and other professionals and organizations. This notice describes Centura Health practices and that of:

- Any health care professional who treats you at any of our locations.
- All departments and units of our organization.
- All employed associates, staff or volunteers of our organization. This includes staff at our sponsor organizations with which we may share information.
- Any business associate or partner with whom we share health information.

Be assured that all these individuals and organizations understand that the privacy of your medical information is important, and will be following HIPAA guidelines to ensure that your information is used only as it is intended.

How your personal medical information can be used and disclosed

The following is a list of ways in which your personal medical information can be used and disclosed as allowed under HIPAA provisions. Be assured that we will use your information in the most discreet manner.

Disclosure for health care related purposes

We may use and disclose your medical information for health care related purposes including:

- Treatment, such as sending your medical information to a specialist as part of a referral.
- Obtaining payment for treatment, such as sending billing information to your insurance company or Medicare.
- Supporting our health care operations, such as comparing patient data to improve treatment methods.
- Communication with business partners so they may help us to do our jobs. These business partners are required by contract and by law to comply with the provisions of HIPAA and protect your rights as we do.

Centura Health, the members of its medical staff, and other affiliated health care providers participate in an Organized Health Care Arrangement (OCHA). Participation in an OCHA allows covered entities to, among other things, exchange protected health information with other OCHA participants to provide patient care in a more effective and efficient manner.

Additionally, Centura Health participates in a health information exchange (HIE) network. HIE provides a way to securely and electronically share patients' clinical information with other physicians and other health care providers participating in the HIE network to provide safer, more timely, efficient, and higher quality care.

Disclosure to other organizations

Subject to certain requirements, we may give out your medical information to other organizations without prior authorization for:

- Public health purposes
- Research studies
- Organ donation
- Emergencies
- Abuse or neglect reporting
- Funeral arrangements
- Workers' compensation purposes
- Health oversight audits or inspections

Disclosure to legal agencies

We also disclose medical information when required by law in response to:

- Requests from law enforcement agencies in specific circumstances
- Valid judicial or administrative orders
- The government, if you are in the military or a veteran
- National security and intelligence activities
- Protective services for the President and others

Disclosure for contact with you

We also may use your medical information for contact with you, for:

- Appointment reminders
- Possible treatment options and alternatives
- Health-related benefits or services that may be of interest to you

Disclosure for fundraising purposes

We may use your name, address, age, date of birth, gender, dates of service, department of service, treating physician, outcome information, and health insurance status:

- To raise funds for Centura Health or one of our facilities
- To raise funds for one of our institutionally related foundations

Please know that our institutionally related foundations are required by law to comply with HIPAA regulations and state confidentiality laws. If you do not wish to be contacted for these efforts please notify the facility according to instructions contained in the materials you may receive.

Disclosure when you are a patient or resident

If admitted as a patient or resident, we may list the following information in our facility directory, unless you tell us otherwise:

- Your name
- Your location in the facility
- Your general condition (good, fair, etc.)
- Your religious affiliation

We will release all but your religious affiliation to anyone who asks about you by name. Your religious affiliation may be disclosed only to a clergy member, even if they do not ask for you by name.

Disclosure to friends, family and others

We may disclose medical information about you to:

- A friend or family member who is involved in your medical care
- Someone who helps pay for your care
- Disaster relief authorities to notify your family of your location and condition

Disclosure in special circumstances

Most uses and disclosures of psychotherapy notes, uses and disclosures of your medical information for marketing purposes, and disclosures that constitute a sale of your medical information require authorization. In any other situation not covered by this notice, we will ask for your written authorization before using or disclosing your medical information. If you chose to authorize use or disclosure you can later revoke that authorization by notifying us in writing of your decision.

Your Rights

Can you see a copy of your medical information?

In most cases, you have the right to review and obtain a copy of the medical information we use to make decisions about your care by submitting a written request. If you request a paper copy or electronic copy, we may charge a fee for the cost of copying, electronically scanning, for 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.

What if your medical records are inaccurate?

If you believe that information in your record is incorrect or if important information is missing, you have the right to request correction of the records by submitting a request in writing along with your reason for requesting the amendment. We could deny your request to amend a record if the information was not created by us; if it is not part of the medical information we maintained; if it is not part of the information you would be permitted to review or copy; or if we determine that the record is accurate. You may appeal, in writing, a decision by us not to amend a record.

Can you know with whom we've shared your records?

You have the right to a list of those instances where we have disclosed your medical information, other than for treatment, payment, health care operations or where you specifically authorized a disclosure, by submitting a written request. The request must state the time period desired for the accounting, which must be less than a 6-year period and 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 our production cost. We will inform you of the cost before you incur any expenses.

Can you specify the way in which we communicate your medical records to you?

You have the right to request that your medical information be communicated to you in a confidential manner, such as sending mail to an address other than your home. Your request must specify how or where you wish to be contacted. We will attempt to honor all reasonable requests.

Can you request your medical information only be released with your permission?

You may request in writing that we not use or disclose your medical information

for treatment, payment and health care operations, or to persons involved in your care except when specifically authorized by you, or when required by law or in an emergency. All written requests must tell us (1) what information you want to limit; (2) whether you want to limit our use or disclosure; and (3) to whom you want the limits to apply. Unless your request is to restrict disclosing your medical information to your health plan for health care services for which you pay out of pocket in full, we will consider your request but are not legally required to agree to it. We will inform you of our decision on your request.

Will you be notified if there has been a breach of your medical information?

You have the right to, and will, be notified following a breach of your medical information in the event it has not been rendered unusable, unreadable, or indecipherable to unauthorized individuals.

If you've received this notice electronically, can you receive a paper copy?

You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice. You may view or print a copy of the notice at our website, www.centura.org.

Where can you express a concern?

If you are concerned that your privacy rights may have been violated or disagree with a decision we made about access to your records, you may contact the Centura Health Integrity Helpline at 1-888-424-2458. You also may send a written complaint to the U.S. Department of Health and Human Services Office for Civil Rights. Under no circumstance will you be penalized or retaliated against for filing a complaint.

Will the policies in this notice change?

We may change our policies at any time. Changes will apply to medical information we already hold, as well as new information after the change occurs. When we make a significant change to our policies, we will change this notice and post the current notice in our facility and on our website. The notice will contain the effective date. In addition, you will be offered a copy of the current notice each time you register at one of our facilities for treatment.

Our Mission

To extend the healing ministry of Christ by caring for those who are ill and by nurturing the health of the people in our communities.

Centura Health®

Avista Adventist Hospital
Castle Rock Adventist Hospital
Littleton Adventist Hospital
Mercy Regional Medical Center
Parker Adventist Hospital
Penrose-St. Francis Health Services
Porter Adventist Hospital
St. Anthony Hospital
St. Anthony North Hospital
St. Anthony North Medical Pavilion
St. Anthony Summit Medical Center
St. Catherine Hospital
St. Mary-Corwin Medical Center
St. Rose Ambulatory & Surgery Center
St. Thomas More Hospital
Centura Health at Home
Centura Senior Living Communities
Centura Health Physician Group (CHPG) Practices
Centura Laboratory Services
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