

# NOTICE OF PRIVACY PRACTICES

## THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU AS AN EMPLOYEE MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION

PLEASE REVIEW IT CAREFULLY

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Effective April 14, 2003, Broward Children's Center is required by law to take reasonable steps to ensure the privacy of your personally identifiable health information from your personnel medical file and to inform you about:

- The Plan's uses and disclosures of Protected Health Information (PHI);
- Your privacy rights with respect to your PHI; \*the Plan's duties with respect to your PHI; \* your right to file a complaint with the Plan and to the Secretary of the U.S. Department of Health and Human Services; and
- The person or office to contact for further information about the Plan's privacy practices.

The term "Protected Health Information" (PHI) includes all employee identifiable health information transmitted or maintained by the BCC, regardless of form (oral, written, electronic).

### SECTION 1. NOTICE OF PHI USES & DISCLOSURES

Upon your request, BCC is required to give you access to certain PHI in order to inspect and copy it.

#### Uses & disclosures to carry out payment & health care operations:

- a. BCC and its business associates will use PHI without your consent, authorization or opportunity to agree or object for health care operations.
- b. Payment includes but is not limited to actions to make coverage determinations and payment (including billing, claims management, subrogation, plan reimbursement)
- c. Health care operations include but are not limited to premium rating and other insurance activities relating to creating or renewing insurance contracts. It also includes disease management, conducting or arranging for auditing functions including fraud and abuse compliance programs, business planning and development, business management and general administrative activities.

#### Uses and disclosures that require your consent

If you decline to provide consent for the use of your PHI for treatment, payment and health care operations you will not be enrolled in the Insurance Plan.

#### Uses and disclosures for which consent authorization or opportunity to object is not required

Use and disclosure of your PHI is allowed without your consent, authorization or request under the following circumstances:

- a. When required by law.
- b. When permitted for purposes of public health activities if you have been exposed to a communicable disease or are at risk of spreading a disease or condition, if authorized by law.

**Uses and disclosures for which consent authorization or opportunity to object is not required**

- c. When authorized by law to report information about abuse, neglect or domestic violence to public authorities if there exists a reasonable belief that you may be a victim of abuse, neglect or domestic violence. In such case, BCC will promptly inform you that such a disclosure has been or will be made unless that notice would cause a risk of serious harm.
- d. BCC may disclose your PHI to a public health oversight agency for oversight activities authorized by law. This includes use of disclosures in civil, administrative or criminal investigations; inspections, licensure or disciplinary actions.
- e. BCC may disclose your PHI when required for judicial or administrative proceedings. For example, your PHI may be disclosed in response to a subpoena or discovery request provided certain conditions are met. One of those conditions is that satisfactory assurance must be given to BCC that the requesting party has made a good faith attempt to provide written notice to you, and the notice provided sufficient information about the proceeding to permit you to raise an objection and no objections were raised or were resolved in favor of disclosure by the court or tribunal.
- f. When authorized by and to the extent necessary to comply with Workers' compensation or other similar programs established by law.

**SECTION 2. RIGHTS OF INDIVIDUALS**

**Right to Request Restrictions on PHI uses and Disclosures**

You may request BCC to restrict uses and disclosures of your PHI for payments or health care operations. However, BCC is not required to agree to your request.

BCC will accommodate reasonable requests to receive communications of PHI by alternative means or at alternative locations.

You or your personal representative will be required to complete a form to request restrictions on uses and disclosures of your PHI.

Such requests should be made to the following officer: Maureen O'Keeffe, Privacy/Compliance Officer, 200 SE 19<sup>th</sup> Avenue, Pompano Beach, Fl. 33060 954-941-1228 X113

**Right to Inspect and Copy PHI**

You have a right to inspect and obtain a copy of your PHI contained in your employee medical records for as long as BCC maintains the PHI.

**Medical Records** includes records and billing records about employees maintained for enrollment, payment, billing maintained for a health plan.

The requested information will be provided within 30 days if the information is maintained on site or within 60 days if the information is maintained offsite. A single 30 day extension is allowed if BCC is unable to comply with the deadline.

You or your personal representative will be required to complete a form to request access to the PHI in your medical records. Requests for access to PHI should be made to the following office: Privacy/Compliance Officer, Maureen O'Keeffe, 954-941-1228 ext. 113, 200 SE 19<sup>th</sup> Avenue, Pompano Beach, Fl. 33060

### **Right to Inspect and Copy PHI**

If access is denied, you or your personal representative will be provided with a written denial setting forth the basis for the denial.

### **A Note About Personal Representative**

You may exercise your right through a personal representative. Your personal representative will be required to produce evidence of his/her authority to act on your behalf before that person will be given access to your PHI or allowed to take any action for you. Proof of such authority may take one of the following forms:

- A power of attorney for health care purposes, notarized by a Notary public;
- A court order of appointment of the person as the conservator or Guardian of the individual; or

### **BCC's Duties**

BCC required by law to maintain the privacy of PHI and to provide individuals (participants and beneficiaries) with notice of its legal duties and privacy practices.

This notice is effective April 14, 2003 and BCC is required to comply with the terms of this notice. However, BCC reserves the right to change its privacy practices and to apply the changes to any PHI received or maintained by BCC prior to that date. If a privacy practice is changed, a revised version of this notice will be provided to all past and present participants and beneficiaries for whom BCC still maintains PHI by 1<sup>st</sup> Class Mail.

### **Minimum Necessary Standard**

BCC may use or disclose "summary health information" to insurance companies for obtaining premium bids or modifying, amending or terminating the group health plan, which summarizes the claims history, claims expense or type of claims experienced by individuals for whom BCC has been covered under a group health plan; and from which identifying information has been deleted in accordance with HIPAA.

### **Your Right to File a Complaint With BCC or the HHS Secretary**

If you believe that your privacy rights have been violated, you may complain to BCC in care of the following officer: Privacy/Compliance Officer, Maureen O'Keeffe, 200 SE 19<sup>th</sup> Avenue, Pompano Beach, Fl. 33060, 954-941-1228 ext. 113. You may file a complaint with the Secretary of the U.S. Department of Health and Human Services, Hubert H. Humphrey Building 200 Independence Avenue S.W. Washington, D. C. 20201.

BCC will not retaliate against you for filing a complaint.

### **Whom to Contact at BCC for More Information**

If you have any questions regarding this notice or the subjects addressed in it, you may contact the following officer: Maureen O'Keeffe, Privacy/Compliance Officer, 200 SE 19<sup>th</sup> Avenue, Pompano Beach, Fl. 33060, 954-941-1228 ext. 113

### **Conclusion**

PHI use and disclosure by BCC is regulated by a federal law known as HIPAA (the Health Insurance Portability and Accountability Act). You may find these rules at 45 Code of Federal Regulations Parts 160 and 164. This notice attempts to summarize the regulations. The regulations will supersede any discrepancy between the information in this notice and the regulations.