

JUDSON
NOTICE OF PRIVACY PRACTICES

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.

Judson respects the privacy of your Protected Health Information (“PHI”). Judson is required by law to maintain the privacy of your PHI and to provide you with notice of its legal duties and privacy practices with regards to your PHI. This Notice informs you about the possible uses and disclosures of your PHI. It also describes your rights and Judson’s obligations regarding your PHI.

I. JUDSON MAY USE AND DISCLOSE YOUR PHI FOR TREATMENT, PAYMENT AND HEALTH CARE OPERATIONS.

a. For Treatment. Judson may use and disclose your PHI in providing you with treatment. Treatment is the provision, coordination or management of health care and related services. Judson may disclose your PHI to Judson and non-Judson personnel who may be involved in your care, such as physicians, nurses, nurse aides, and rehabilitation staff. For example, a nurse caring for you will report any change in your condition to your physician. Judson also may disclose PHI to individuals who will be involved in your care after you leave the facility.

b. For Payment. Judson may use and disclose your PHI to bill and receive payment for the treatment and services you receive at the facility. For billing and payment purposes, Judson may disclose your PHI to your representative, an insurance or managed care company, Medicare, Medicaid or another third party payor. For example, Judson may contact Medicare or your health plan to confirm your coverage or to request prior approval for a proposed treatment or service.

c. For Health Care Operations. Judson may use and disclose your PHI for facility operations. These uses and disclosures are necessary to manage Judson and to monitor our quality of care. Operations include quality assessment and improvement, reviewing the competence or qualifications of health care professionals, underwriting, conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs, business planning, management, and administrative activities. For example, we may use PHI to evaluate Judson’s services, including the performance of our staff.

II. JUDSON MAY USE AND DISCLOSE PHI ABOUT YOU FOR OTHER SPECIFIC PURPOSES.

a. As Require by Law. Judson may disclose your PHI when required by law.

b. Public Health Activities. When required, Judson may disclose your PHI for public health activities, including reporting to a public health agency or other government authority for preventing or controlling disease, injury or disability.

c. Reporting Victims of Abuse, Neglect or Domestic Violence. If Judson believes you have been a victim of abuse, neglect or domestic violence, Judson may use and disclose your PHI to notify a government authority if required or authorized by law, or if you agree to the report.

d. Health Oversight Activities. Judson may disclose your PHI to a public health oversight agency for oversight activities authorized by law. These may include, for example, audits, investigations, inspections and licensure actions or other legal proceedings.

e. Judicial and Administrative Proceedings. Judson may disclose your PHI in response to a court or administrative order. Judson may disclose information in response to a subpoena, discovery request, or other lawful process, if the party seeking the information has made reasonable efforts to give you notice of the request, or has made reasonable efforts to obtain a qualified order protecting the information.

f. Law Enforcement. Judson may disclose your PHI for certain law enforcement purposes, when required by law, and when otherwise authorized. For example, Judson may disclose your PHI to comply with a court order, warrant, subpoena, summons, investigative demand or similar legal process.

g. Coroners, Medical Examiners, Funeral Directors, Procurement Organizations. Judson may release your PHI to a coroner, medical examiner, funeral director or, if you are an organ, eye or tissue donor, to an organization involved in the donation of organs and tissue.

h. Research. Judson may allow your PHI to be used or disclosed for research purposes provided that the researcher adheres to certain privacy protections and if the privacy aspects of the research have been reviewed and approved by the researcher's special Privacy Board or Institutional Review Board established in accordance with federal law and such Board determines your authorization is not necessary.

i. To Avert a Serious Threat to Health or Safety. To the extent authorized or required by law, Judson may use and disclose PHI when necessary to prevent a serious threat to your health or safety or the health or safety of the public or another person.

j. Specialized Government Functions. Judson may disclose your PHI for certain government functions such as to federal officials for national security and intelligence activities.

k. Workers' Compensation. Judson may use or disclose your PHI to comply with laws relating to workers' compensation or similar programs.

l. Fundraising Activities. Judson, or its related foundation, Judson Foundation, may contact you in an effort to raise money for the facility and its operations.

m. Appointment Reminders. Judson may use or disclose PHI to remind you about appointments.

n. Treatment Alternatives. Judson may use or disclose PHI to inform you about treatment alternatives that may be of interest to you.

o. Health related Benefits and Services. Judson may use or disclose PHI to inform you about health related benefits and services that may be of interest to you.

p. Facility Directory. Unless you object orally or in writing, Judson will include certain limited information about you in our facility directory. This information may include your name, your address and your location in the facility. Our directory does not include specific medical information about you. Judson may release information in our directory, to people who ask for you by name.

q. Individuals Involved in Your Care or Payment for Your Care. Unless you object, Judson may disclose your PHI to a family member or close personal friend, including clergy, who is involved in your care.

III. YOUR AUTHORIZATION IS REQUIRED FOR OTHER USES AND DISCLOSURES OF PHI.

All other uses or disclosures not otherwise described in this Notice or required or permitted by law will be made only with your written authorization. You may revoke your authorization to use or disclose PHI in

writing, at any time. If you revoke your authorization, Judson will no longer use or disclose your PHI for the purposes covered by the authorization, except where Judson has already relied on the authorization.

IV. YOUR RIGHTS REGARDING YOUR PHI.

You have the following rights regarding your PHI at Judson.

a. Right to Request Restrictions. You have the right to request restrictions on the use or disclosure of your PHI for treatment, payment or health care operations. You also have the right to restrict the PHI Judson discloses about you to a family member, friend or other person who is involved in your care or the payment for your care.

Judson is not required to agree to your requested restriction. If Judson does agree to accept your requested restriction, Judson will comply with your request except as needed to provide you emergency treatment.

b. Right to Request Confidential Communications. You have the right to request that Judson communicate with you concerning personal health matters in a certain manner or at a certain location. For example, you can request that we contact you only at a certain phone number. Judson will attempt to accommodate your reasonable requests.

c. Right of Access to PHI. You have the right to inspect and obtain a copy of your medical or billing records or other written information that may be used to make decisions about your care, subject to some limited exceptions. Your request to inspect or copy can be made orally or in writing. Judson will allow you to inspect your records within 24 hours of your request. If you request copies, Judson will provide you copies within 2 working days of that request. Judson may charge a reasonable fee for our costs in copying and mailing your requested information.

Judson may deny your request to inspect or receive copies in certain limited circumstances. If you are denied access to PHI, 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.

d. Right to Request Amendment. You have the right to request Judson to amend any PHI maintained by Judson in your medical or billing records for as long as the information is kept by or for Judson. You must make your request in writing and must state the reason for the requested amendment.

Judson may deny your request for amendment if the information:

- was not created by Judson, unless the originator of the information is no longer available to act on your request;
- is not part of the medical and billing records used by Judson to make decisions about you;
- is not part of the information to which you have a right of access; or
- is already accurate and complete, as determined by Judson.

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

e. Right to an Accounting of Disclosures. You have the right to request an accounting of certain disclosures of your PHI by Judson made within the six years prior to the date on which you made your request. This is a listing of certain disclosures of your PHI made by Judson or by others on Judson's behalf, but does not include disclosures for treatment, payment and health care operations or certain other exceptions.

To request an accounting of disclosures, you must submit a request in writing, stating a time period that is within six years from the date of your request. An accounting will include: 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 accounting provided within a 12-month period will be free; for further requests, Judson may charge you a fee for our costs.

f. Right to a Paper Copy of This Notice. You have the right to obtain a paper copy of this Notice, even if you have agreed to receive this Notice electronically. You may request a copy of this Notice at any time. You may also obtain a copy of this Notice at our website, www.judsonretirement.org.

V. COMPLAINTS.

If you believe that your privacy rights have been violated, you may file a complaint in writing with Judson or with the Office of Civil Rights in the U.S. Department of Health and Human Services. To file a complaint with Judson, contact Roy Call, Privacy Officer, 2181 Ambleside Drive, Cleveland, Ohio 44106, (216) 721-1234.

VI. CHANGES TO THIS NOTICE.

Judson will promptly revise and distribute this Notice whenever there is a material change to the uses or disclosures of PHI, your individual rights, Judson's legal duties, or other privacy practices stated in this Notice. Judson reserves the right to change this Notice and to make the revised or new Notice provisions effective for all PHI already received and maintained by Judson as well as for all PHI Judson receives in the future. A copy of the current Notice will be posted in the facility. In addition, we will provide a copy of the revised Notice to all Residents.

VII. FOR FURTHER INFORMATION.

If you have any questions about this Notice or would like further information concerning your privacy rights, please contact Roy Call, Privacy Officer, 2181 Ambleside Drive, Cleveland, Ohio 44106, (216) 721-1234.

Effective Date: _____