

NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION

“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.”

This Notice of Privacy Practices for Iowa Home Care, LLC is being given to you in compliance with the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA). This law defines our medical practice as a covered entity and all of your individually-identifiable health information as protected health information. This information may be in any form (oral, written or electronic). We are required by law to maintain the privacy of your protected health information and to provide you with notice of our legal duties and privacy practices with respect to this information. **Any significant change in our privacy practices will be posted at our office and provided to you via mail. Our Administrators are the designated Privacy Officers.**

Iowa Home Care will take all reasonable precautions to protect the confidentiality of your protected health information. We may use and disclose your medical information for the following purpose: treatment, payment and health care operations.

Treatment means providing, coordinating and managing your health care and related services by one or more health care providers. This includes creating and maintaining a written medical record, sending a letter to a referring physician or giving information to a hospital where you receive care. We may contact you to provide information regarding your services or health-related services you may be interested in. This contact may be by phone, e-mail, letter or postcard.

Payment Operations are those activities necessary for obtaining reimbursement for our services from you or a third party, such as Medicare, Medicaid or your insurance company. Confirming insurance coverage, obtaining authorizations, sending bills or statements and utilization review are examples of such activities. Our bills and statement contain information about the care we have rendered and your diagnosis.

Health Care Operations include the business aspects of running a medical practice, such as conducting quality assessment and improvement activities, cost-management analysis and auditing functions.

Except for medical emergencies or when required by law, your protected health information will not be disclosed to other people, including health care workers not concurrently involved with your care, nor your family (other than legal guardians), relatives or friends without authorization from you. Allowing other to be present while we provide services is assumed to be acceptance and authorization to discuss your medical information in their presence unless you inform us otherwise. The agency may be identifiable to the community as we provide services to you, such as parking a vehicle in or around your driveway (the vehicle may or may not have the company name on it), carrying a bag with the name of the agency into your home or wearing a name tag into the home. These are also assumed to be authorized unless you specify otherwise. Unintentional disclosure of protected health information is possible within our office during our daily operations.

You have the following rights with regard to your Protected Health Information:

- The right to receive a paper copy of this Notice of Privacy Practices.
- The right to review your protected health information. The physical medical record is the property of Iowa Home Care. The information in the medical record will be given to you upon request.
- The right to amend your protected health information and have such amendment become a part of your permanent record.

Effective Date of this Notice: April 13, 2003