

BOLINGBROOK FIRE DEPARTMENT 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 ~

Purpose of this Notice: The Bolingbrook Fire Department is required by law to maintain the privacy of certain confidential healthcare information, known as Protected Health Information (“PHI” or “health information”), and to provide patients with a notice of our legal duties and privacy practices with respect to PHI. We are also required by law to notify individuals that they would be notified if a breach of privacy regarding PHI has occurs. This Notice describes how the Bolingbrook Fire Department is permitted to use and disclose PHI, a patient’s legal rights, and the Bolingbrook Fire Department’s privacy practices.

Permitted Uses and Disclosures of PHI: The Bolingbrook Fire Department may use and/or disclose PHI for the purposes of treatment, payment, and healthcare operations, in most cases without a patient’s written permission. Examples of Bolingbrook Fire Department’s use of PHI:

- *For Treatment:* Treatment includes the provision, coordination, or management of health care and related services by one or more health care providers. Therefore, this includes the use of information that we obtain pertaining to a patient’s medical condition and treatment provided by the Bolingbrook Fire Department and other medical personnel. It also includes information that the Bolingbrook Fire Department discloses to other healthcare personnel to whom the Bolingbrook Fire Department transfers patient care and includes disclosure via radio or telephone to the hospital or dispatch center, as well as providing the hospital with a copy of the written record created.
- *For Payment:* This includes any activities the Bolingbrook Fire Department must undertake in order to obtain payment or be reimbursed for the provision of health care. This would include use and disclosure for billing, claims management, collection activities, review of coverage, and other review activities related to payment and/or reimbursement from an insurance company or a third party.
- *For Healthcare Operations:* This includes quality assurance activities, licensing and training programs, appropriate internal investigations, processing grievances, and complaints. We may use and disclose health information about you in order to become more effective and to assure patients receive quality care. We may also use health information about all or many of our patients to help us decide what additional services we should offer, how we can become more efficient, or whether certain new treatments are effective.

Permitted Use and Disclosure of PHI Under Special Circumstances: The law sets forth several circumstances under which the Bolingbrook Fire Department may use or disclose PHI without your written authorization and without being required to allow you an opportunity to agree or object to such use and disclosure. Each of these special circumstances have applicable legal requirements and limitations but are explained by way of overview and example below:

- *Required by Law:* We will disclose health information about you when required to do so by federal, state, or local law.
- *Public Health Risks:* We may disclose health information about you for public health reasons in order to prevent or control disease, injury, or disability; or report births, deaths, suspected abuse or neglect, non-accidental physical injuries, reactions to medications or problems with products.
- *Victims of abuse, neglect, or domestic violence:* In addition to reports of potential child abuse and/or neglect, we may disclose the PHI about a person whom we believe may be a victim of abuse, neglect, or domestic violence. If PHI is disclosed for this purpose, it will be disclosed to the extent required or authorized by law or to the extent authorized by the patient. We would promptly inform the patient if PHI has been disclosed for this purpose.
- *Health Oversight Activities:* We may disclose health information to a health oversight agency for audits, investigations, inspections, or licensing purposes. These disclosures may be necessary for certain state and federal agencies to monitor the healthcare system, government programs, and compliance with civil rights laws.
- *Lawsuits and Disputes:* If you are involved in a lawsuit or a dispute, we may disclose health information about you in response to a court or administrative order. Subject to all applicable legal requirements, we may also disclose health information about you in response to a subpoena.
- *Law Enforcement:* We 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, subject to all applicable legal requirements. Under certain circumstances outlined by law, we may also disclose PHI to law enforcement officials for the purpose of identifying or locating a suspect, fugitive, material witness, or missing person.
- *Coroners, Medical Examiners, and Funeral Directors:* We may release health information to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death.
- *Organ and Tissue Donation:* If you are an organ donor, we may release health information to organizations that handle organ procurement or organ, eye, or tissue transplantation or to an organ donation bank, as necessary to facilitate such donation and transplantation.
- *Research:* We may use and disclose health information about you for research projects that are subject to a special approval process. We will ask you for your permission if the researcher will have access to your name, address, or other information that reveals who you are, or will be involved in your care.
- *To Avert a Serious Threat to Health or Safety:* We may use and disclose health information about you when necessary to prevent or lessen a serious threat to your health and safety or the health and safety of the public or another person.
- *Military, Veterans, National Security and Intelligence:* If you are or were a member of the armed forces, or part of the national security or intelligence communities, we may be required by military command or other government authorities to release health information about you. We may also release information about foreign military personnel to the appropriate foreign military authority. We may also release health information to a correctional institution or law enforcement official about an inmate or a person in custody if certain requirements under the law are met.
- *Workers’ Compensation:* We may disclose health information as authorized by and to the extent necessary to comply with laws relating to workers’ compensation or similar programs which provide benefits for work-related injuries or illness.
- *Information Not Personally Identifiable:* We may use or disclose health information about you in a way that does not personally identify you or reveal who you are.

Use and Disclosure of PHI After Asking for your Consent or Giving You an Opportunity to Object:

- *Friends and Family:* We may disclose health information about you to your family members or friends if we obtain your verbal agreement to do so or if we give you an opportunity to object to such a disclosure and you do not raise an objection. We may also disclose health information to your family or friends if we can infer from the circumstances, based on our professional judgment that you would not object. In situations where you are not capable of giving consent (because you are not present, because of your incapacity, or because of medical emergency), we may, using our professional judgment, determine that a disclosure to your family member or friend is in your best interest. In that situation, we will disclose only health information relevant to the person’s involvement in your care.

Other Use and Disclosure of PHI Requiring Authorization: Any other use or disclosure of PHI, other than those listed above will only be made with a patient's written authorization. You may revoke your authorization at any time, in writing. The revocation becomes effective upon receipt, except to the extent that the Bolingbrook Fire Department has used or disclosed health information in reliance on an authorization provided prior to receipt of any revocation of that authorization.

If we have HIV or substance abuse information about you, we cannot release that information without a special signed, written authorization from you which is different than the Authorization mentioned above. In order to disclose these types of records for purposes of treatment, payment or healthcare operations, we will have to have both your signed consent and a special written Authorization that complies with the law governing HIV or substance abuse records.

Patient's Rights: As a patient, you have a number of rights with respect to the protection of your PHI, including:

The right to access – Patients have a right to access, inspect, and copy most of the health information. The Bolingbrook Fire Department shall provide a patient access to this information within 30 days of a request. We may also charge a reasonable fee to copy any health information. In limited circumstances, we may deny access to health information. Forms to request access to PHI are available in the Fire Department Administration Office at 375 West Briarcliff Road, Bolingbrook, IL 60440. If you are denied access to your health information, you may ask that the denial be reviewed. If such a review is required by law, we will select a licensed healthcare professional to review your request and our denial. The person conducting the review will not be the person who denied your request, and we will comply with the outcome of the review.

The right to amend PHI – Patients have the right to request an amendment to written health information that the Bolingbrook Fire Department may have about them. The Bolingbrook Fire Department will respond to a request for information within 60 days. The Fire Department is permitted by law to deny a request to amend health information in certain circumstances.

The right to request an accounting of use and disclosure of PHI – Patients may request an account of certain disclosures of health information that the Bolingbrook Fire Department has made in the last six years prior to the date of request. The Fire Department is not required to give an accounting of information used or disclosed for purposes of treatment, payment, or healthcare operations and for certain other purposes outlined in the law.

The right to request restriction to the uses and disclosures of PHI – Patients have the right to request a restriction of the use and disclosure of health information about them, in other words, to request that the use or disclosure that is otherwise allowed by law not occur. The Bolingbrook Fire Department is not required to agree to all restriction requests. However, if we agree to your request, we must follow the agreed-upon restrictions (except if the information is necessary for emergency treatment). You may cancel the restrictions at any time. In addition, we may cancel a restriction at any time as long as we notify you of the cancellation and continue to apply the restriction to health information created or received before the cancellation.

The Bolingbrook Fire Department must agree to your request to restrict the disclosure of PHI about you to your health plan/health insurer if the following three criteria are met: 1) the disclosure you seek to restrict would be for payment; 2) the PHI that is subject to the restriction request pertains solely to a health care item or services for which you or another person on your behalf (other than a health plan/health insurer) has already paid for in full; and 3) the disclosure of the PHI is not otherwise required by law.

The right to request confidential communications: You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. We will not ask the reason for your request. We will accommodate all reasonable requests. Your request must be specific as to how or where you wish to be contacted.

The right to notification if a breach of your PHI occurs: You also have the right to be notified in the event of a breach of health information about you. If a breach of your health information occurs and if that information is unsecured (not encrypted), we will notify you promptly with a brief description of what happened and a description of the health information that was involved.

The right to a paper copy of this notice: 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 it electronically, you are still entitled to a paper copy. If we maintain a website, we will prominently post a copy of this Notice on our website.

Legal rights and complaints – Patients have the right to complain to the Bolingbrook Fire Department, or to the Secretary of the United States Department of Health and Human Services, if they believe their privacy rights have been violated. Patients will not be retaliated against in any way for filing a complaint with the Bolingbrook Fire Department or to another entity.

Revisions to the Notice – The Bolingbrook Fire Department reserves the right to change the terms of this Notice at any time, and the changes will be effective immediately and will apply to all protected health information that the Fire Department maintains. The Bolingbrook Fire Department is required to abide by the terms of the Privacy Notice currently in effect. Individuals will be provided copies of revised Notices upon request and upon the first date that service is provided after the revision to the Notice, or as soon as reasonably practical after an emergency treatment situation.

To file a comment, complaint, question, or request within the Bolingbrook Fire Department, contact:

Emergency Medical Services Director
Bolingbrook Fire Department
375 West Briarcliff Road
Bolingbrook, IL 60440

Telephone: 630-226-8540
Fax: 630-226-8549

Effective: November 6, 2013
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