



Privacy Practices

Section: Individual Served & Program Policies
Regarding: Privacy Practices
Effective Date: November 1, 2014
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PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION MAY BE USED AND DISCLOSED AND HOW TO OBTAIN PHI ACCESS.

PLEASE REVIEW IT CAREFULLY.

Day Solutions is required by law to provide this notice for review, to ensure individuals enrolled in the Day Solutions program understand how we may use or share protected health information from a designated record set. The designated record set includes financial and health information referred to in this Notice as "Protected Health Information" ("PHI") or simply "health information." We are required to adhere to the terms outlined in this Notice. For any questions regarding this Notice, please contact Day Solutions Privacy Officer.

UNDERSTANDING HEALTH RECORDS AND INFORMATION

Each time an individual is admitted to Day Solutions, a record is made containing health and financial information. Typically, this record contains information about condition, treatment provided and payment for the treatment. We may use and/or disclose this information to:

- plan care and treatment
- communicate with other health professionals involved in day to day care
- document care received
- educate health professionals
- provide information for medical research
- provide information to public health officials
- evaluate and improve care
- obtain payment for care

Understanding health record contents and how health information is used will help to:

- ensure accuracy
- better understand who may access health information



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- make informed decisions when authorizing disclosure to others

HOW WE MAY USE AND DISCLOSE PROTECTED HEALTH INFORMATION

The following categories describe the ways that we use and disclose health information. Not every use or disclosure in a category will be listed, however, all of the ways we are permitted to use and disclose information will fall into one of the categories.

- **For Treatment.** We may use or disclose health information to provide treatment. We may disclose health information to direct care staff, nurses, therapists or other Day Solutions personnel who are involved in providing daily care at Day Solutions. For example, Day Solutions' Facility Supervisor will complete weekly education with direct care staff regarding plans of care and target goals. We may also disclose health information to people outside Day Solutions who may be involved in providing medical care after a consumer's departure from Day Solutions. This may include family members, or in-home health care workers, or other.
- **For Payment.** We may use and disclose health information for the treatment and services received at Day Solutions, to an insurance company, or a third party. For example, in order to be paid, we may need to share information with your health plan or the Missouri Department of Mental Health about services provide. We may also report information to a service coordinator about a proposed treatment plan, to obtain prior approval, or to determine whether a treatment plan will be covered.
- **For Health Care Operations.** We may use and disclose health information for our day-to-day health care operations. This is necessary to ensure that all consumers receive quality care. For example, we may use health information for quality assessment, improvement activities, and for developing and evaluating clinical protocols. We may also combine health information about consumers to help determine additional services to be offered, what services to discontinue, and whether certain new treatments are effective. Health information may be used by Day Solutions for business development and planning, cost management analyses, insurance claims management, risk management activities, and in developing and testing information systems and programs. We may also use and disclose information for professional review, performance evaluation, and for training programs. Other aspects of health care operations that may require use and disclosure of health information include accreditation, certification, licensing and credentialing activities, review and auditing, including compliance reviews, medical reviews, legal services and compliance programs. Health information may be used and disclosed for the business management and general activities of Day Solutions including resolution of internal grievances, customer service, and due diligence in connection with the sale or transfer of Day Solutions. In limited circumstances, we may disclose health information to another entity subject to HIPAA for its own health care operations. We may remove personal identifying information so that the general



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health information may be used to study health care and health care delivery without exposing consumer identities.

OTHER ALLOWABLE USES OF HEALTH INFORMATION

- **Providers and agencies.** To coordinate care, Health information may be shared with the following providers or agencies:
 - Regional Center Staff
 - Health and Human Services Staff
 - DMH Surveyors
 - Consumer's physician and dentist
 - RN consultant or other consultants as identified
 - Social Security or Medicaid representatives for eligibility of benefits determination.
- **Treatment alternatives.** We may use and disclose health information to recommend treatment options, or alternatives, that may be beneficial.
- **Services and reminders.** We may contact individuals to provide appointment reminders or report scheduling adjustments.
- **Individuals involved in care or payment for care.** We may disclose health information to a friend, or family member, involved in day to day care. We may also give information to someone who provides financial assistance for the cost of care. Additionally, we may disclose health information to an entity providing disaster relief efforts so that appropriate family members, and care providers, can be notified about an individual's condition, status and location.
- **To avoid a serious threat to health or safety.** We may use and disclose health information to prevent a serious threat to individual safety, the health and safety of the public, or another person.
- **Organ and tissue donation.** If an individual is an organ donor, we may disclose health information to organizations that handle organ procurement to facilitate donation and transplantation.
- **Research.** Under certain circumstances, we may use and disclose health information for research purposes. All research projects, however, are subject to a special approval process. This process evaluates proposed research projects and its use of health information, in order to appropriately balance research needs with consumer privacy. Before we use or disclose health information for research, all projects will have been subject to the research approval process.



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- **Workers' compensation.** We may disclose health information for workers' compensation, or similar programs which provide benefits for work-related injuries or illness.
- **Coroners, medical examiners and funeral directors.** We may disclose medical information to a coroner or medical examiner. This may be necessary to identify a deceased person or determine the cause of death. We may also disclose medical information to funeral directors as necessary to carry out their duties.
- **National security and intelligence activities.** We may disclose health information to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.
- **Correctional Institution:** Should a consumer become an inmate of a correctional institution, we may disclose to the institution, or its agents, health information necessary for the consumers safety, or the health and safety of others.
- **Mandated reporting.** Federal and state laws may require or permit Day Solutions to disclose certain health information related to the following:
 - *Public Health Risks*
 - *Health Oversight Agencies*
 - *Judicial and Administrative Proceedings*
 - *Suspected Abuse, Neglect or Domestic Violence*
 - *Law Enforcement*

OTHER USES OF HEALTH INFORMATION

Other uses and disclosures of health information not covered by this notice, or the laws that apply to Day Solutions, will be made only with written permission. Once permission to use, or disclose, health information is provided, it may be revoked, in writing, at any time. If permission is revoked, we will no longer use or disclose health information, other than when required by law. We are unable to take back any previously made disclosures, and are required to retain our records of care provided.

YOUR RIGHTS REGARDING HEALTH INFORMATION ABOUT YOU

Although health records are the property of Day Solutions, the information belongs to the individuals concerned. Each individual has the following rights regarding their personal health information:

- **Right to inspect and copy.** With some exceptions, individuals have the right to review and copy health information.



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- *Written requests must be submitted to the Day Solutions Privacy Officer. We may charge a fee for the costs of copying, mailing or other supplies associated with your request.*
- **Right to Amend.** If health information in a record is incorrect or incomplete, an amendment of the information may be requested. You have this right for as long as the information is kept by, or for, Day Solutions.
 - *Written requests, and a reason for the request, must be submitted to the Day Solutions Privacy Officer.*

Day Solutions reserves the right to deny amendment requests if the request is not in writing, or does not include a reason to support the request. Additionally, we may deny requests if it is discovered that the information was:

- not created by us, unless the person or entity that created the information is no longer available to make the amendment;
 - not part of the health information kept by or for Day Solutions; or
 - accurate and complete.
- **Right to an accounting of disclosures.** Each individual has the right to request an "accounting of disclosures". This is a list of certain health information disclosures we made, other than for purposes of treatment, payment, or health care operations.
 - *Written requests must be submitted to the Day Solutions Privacy Officer. Requests must state a time period, which must begin after November 2014, and may not exceed six years from the date the request is submitted. Requests for information must provide a preferred method of transmission (electronic or paper). We may charge you for the costs of providing the list. Individuals will be notified, in advance, of the cost associated with the request and reserve the right to withdraw, or modify the request prior to any costs being incurred.*
 - **Right to request restrictions.** Individuals have the right to request a restriction, or limitation, on the health information we use or disclose. For example, you may request that we limit the disclosed health information to someone who is involved in day to day care, or the payment of care, or ask that we not use or disclose information about a specific surgery to a family member or friend.
 - *Written requests must be submitted to the Day Solutions Privacy Officer. Requests must specifically include (1) what information to limit; (2) whether to limit our use, disclosure or both; and (3) to whom the limitations apply. **We are not required to agree to all requests.** If we do agree, we will comply with the request unless the information requested is necessary to provide emergency treatment.*



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- **Right to request alternate communications.** Individuals have the right to request that we communicate about medical matters in a confidential manner, or at a specific location. For example, you may ask that we only contact you via mail to a post office box.
 - *Written requests must be submitted to the Day Solutions Privacy Officer. Reason for this request is not necessary, but must specify how, or where, the individual prefers to be contacted. Every effort will be made to accommodate reasonable requests.*
- **Right to a paper copy of this notice.** All individuals have the right to a paper copy of this Notice of Privacy Practices, even if it has been agreed to receive the notice electronically.
 - *Written requests must be submitted to the Day Solutions Privacy Officer, or a copy of this notice may be printed from our website, www.daysolutions.net.*

CHANGES TO THIS NOTICE

We reserve the right to change this Notice. We reserve the right to make the revised, or changed, notice effective for health information already in our possession, as well as any information we receive in the future. We will post a copy of the current notice in the Day Solutions facility, and on the website. The notice will specify the effective date on the first page. In addition, if material changes are made to this notice, the notice will contain an effective date for the revisions and copies can be obtained by contacting Day Solutions administration.

COMPLAINTS

If you believe a privacy rights violation has occurred, you may file a complaint with Day Solutions, or with the Secretary of the Department of Health and Human Services. All complaints must be submitted in writing. **No individuals will be penalized for filing a complaint.**

ADDITIONAL INFORMATION

Any information regarding the individual shall be considered confidential. It is the responsibility of all employees of this agency to ensure personal information against loss, tampering, or use by unauthorized persons.

Under no circumstances will individual personal records be accessible to persons not authorized as per this policy. Access to records will not be permitted without specific consent of the person being supported or legal guardian.



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All consumer and staff records and information will stay at the agency for a minimum of seven years.

All consumers and their guardians will review and sign Day Solutions' Notice of Privacy Practices.