THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Where this applies
This notice applies to Grand Itasca Clinic & Hospital and its HomeCare services.

To provide appropriate and consistent care, it is often necessary to share your information within the Grand Itasca Clinic & Hospital entities.

Grand Itasca Clinic & Hospital’s duties
By law, Grand Itasca Clinic & Hospital must keep protected health information private. The federal government defines protected health information as any information, whether oral, electronic or paper, which is created or received by Grand Itasca and relates to a patient’s health care or payment for the provision of health care. This includes the results of tests and notes written by doctors and nurses, as well as your name, address and telephone number.

Grand Itasca will follow the rules of its privacy notice currently in effect.

How Grand Itasca fulfills these duties
- Grand Itasca makes every effort to maintain the confidentiality of medical information.
- Grand Itasca takes necessary precautions against inappropriate use or disclosure of medical information.

A word about federal and state law
Federal and state laws require Grand Itasca to protect your medical information, and federal law requires Grand Itasca to describe to you how we handle that information. When state and federal privacy laws differ, and Minnesota law is more protective of your information or provides you with greater access to your information, then state law will override federal law.

Part I: Treatment, Payment and Health Care Operations
This section describes the most common uses of protected health information. These apply to virtually all Grand Itasca patients.

There are three common ways Grand Itasca will use medical information. They include treatment, billing and health care operations. Grand Itasca may also release information, where appropriate, to other related Grand Itasca entities.

“Protected health information” means any information, whether oral, electronic or paper, which is created or received by Grand Itasca and relates to a patient’s health care or payment for the provision of health care. This includes not only the results of tests and notes written by doctors and nurses, but also certain demographic information (such as your name, address and telephone number) that is related to your health records.

Treatment
Grand Itasca will use and disclose protected health information to provide, coordinate or manage your care. This includes communication and consultation between health care providers—doctors, nurses, technicians and other members of your medical team. For example, following orthopedic surgery, your doctor may refer you for rehabilitation. Information will be shared to ensure continuity of care.

Minnesota law requires Grand Itasca to obtain your written consent to disclose your medical information outside of Grand Itasca or related entities for treatment. You would not need to provide consent in cases of medical emergency, within related health care entities when necessary for current treatment or to third parties who requested or paid for independent medical exams.

Payment
Grand Itasca uses protected health information to create bills and collect from insurance companies, Medicare and other payers. This includes providing information such as dates of service, symptoms and diagnosis to your insurance company to show that Grand Itasca provided medical services to you.

Minnesota law requires your written consent to disclose information outside of Grand Itasca for payment. This consent will continue to be collected at registration.
Health-care operations
Grand Itasca uses protected health information for internal activities to monitor and improve patient care, license staff to care for patients, prepare for state and federal regulatory reviews, manage health care operations and improve health care services. Here are some examples:
• To reduce the infection rate after a surgery, it would be necessary to look at medical records to determine the rate of infections that occurred.
• To be licensed to do a certain procedure, a doctor may be required to show that he or she has successfully completed a number of procedures under the supervision of another physician.
• A Federal Drug Administration inspector may review patient records in a laboratory to ensure that accurate and complete records are maintained for patient safety.

Minnesota law requires specific written consent to disclose information for health care operations to others outside Grand Itasca. This includes things like sharing information with your insurance company for billing.

Patient contacts
At times, Grand Itasca accesses information, such as name, address and general medical condition, to contact you to:
• Provide appointment reminders
• Provide information about treatment alternatives or other information that may be of interest to you.
• Disclose health-related benefits or services that may be of interest to you.

Philanthropy
Grand Itasca may contact you to raise funds to sustain the Grand Itasca mission. When conducting fundraising activities, Grand Itasca may access only your basic demographic information (such as name and address) and the dates you were treated at Grand Itasca. You may receive letters or other publications asking you to consider making a tax-deductible contribution to Grand Itasca.

Grand Itasca does not engage in telephone solicitations, nor does Grand Itasca sell or rent patients’ names or addresses to any organization outside of Grand Itasca Foundation.

Current patient list
Grand Itasca will use your name, location in the facility, condition (in general terms, such as “good”, “fair”) and religious affiliations (should you choose to provide one) in current patient lists. For example, a relative may wish to visit you in the hospital and would need to know your hospital room number. A family member meeting you for an appointment may have forgotten which floor your appointment is on. You can also choose to be excluded from these lists. This information is only shared with those asking about you by name or with members of the clergy. Clergy members will also receive information about your religious affiliation if it is known.

Individuals Involved in care and notification
Under federal regulations, Grand Itasca may disclose relevant protected health information to a family member or friend involved with your care, or handling your bills. If family or friends are present while care is being provided, Grand Itasca will assume your companions may hear the discussion, unless you state otherwise. Federal regulations allow Grand Itasca to share limited protected health information to notify a family member or legal representative of your location, condition or death.

Minnesota law requires your written consent to share health information in most situations to family members or friends except in the case of an emergency.

Medical research
Medical research is vital to the advancement of medical science. Federal regulations permit use of protected health information in medical research, with either your authorization or when the research study at Grand Itasca is reviewed and approved by an Institutional Review Board before any medical research study begins. In some situations, limited information may be used before approval of the research study to allow a researcher to determine whether enough patients exist to make a study scientifically valid.

Minnesota law generally requires a written consent before Grand Itasca can disclose any medical information about you for medical research to an outside researcher. Grand Itasca will obtain your
consent or refusal to participate in any research study, or will make a good faith effort to obtain your consent or refusal, before releasing any identifiable information about you for research purposes.

**Part II: Other Potential External Disclosures**

This section outlines less common circumstances that apply to some patients. Federal and/or state law requires or permits Grand Itasca to provide protected health information outside the organization in the following situations:

**To avert a serious threat of harm**

Grand Itasca uses and discloses protected health information to alert those able to lessen or prevent the threat of a serious threat to the health or safety of a patient, another person or the public.

*Minnesota law* allows disclosures under limited circumstances in which Grand Itasca professionals have a “duty to warn.”

**Organ and tissue donation**

If Grand Itasca professionals determine that a patient might be a candidate for organ or tissue donation, Grand Itasca may release protected health information to organizations that handle organ procurement, or organ, eye tissue donation banks, or other health care organizations as needed to make organ or tissue donation and transplantation possible.

**Military and veterans**

Under federal regulations, if a patient is a member of the United States Armed Forces, Grand Itasca is permitted to release protected health information as required by military authorities. Grand Itasca also may release protected health information about foreign military personnel to the appropriate foreign military authority. When the military organization is sponsoring the medical evaluation, the patient’s medical information is shared with both the patient and the sponsoring organization. Patients being evaluated on behalf of the military are aware of these arrangements.

*Minnesota law* generally requires your consent in order to make such disclosures unless another federal law requires the disclosure.

**Workers’ compensation**

If you are seen for a workers’ compensation claim, federal rules permit the release of information related to your claim, as permitted or required by state law.

*Minnesota law* permits disclosure of information related to a workers’ compensation claim without consent to those parties that are involved in the claim.

**Public health purposes**

Grand Itasca may disclose protected health information for public health purposes. The following are some examples of releases that are allowed for public health purposes:

- To prevent or control disease or injury
- To report births and deaths
- To report maltreatment of a child or vulnerable adult
- To report to the federal government adverse reactions to medication or safety problems with FDA-regulated products
- To notify people of product recalls
- To notify a person exposed to certain types of disease or those at risk for contracting or spreading a disease
- To report vital statistics

*Minnesota law* requires reporting suspected cases of, carriers of, or deaths from specific diseases to appropriate government agencies. This includes reporting unusual or unexpected cases caused by infectious agents; diseases acquired outside of the United States and considered rare; non-compliance with treatment for tuberculosis or other infectious diseases; sexually transmitted diseases; and certain newborn metabolic diseases.

**Media relations activities**

Grand Itasca may share extremely limited information about patients who are seen as a result of an incident documented in a public record. In these cases, if the media contacts Grand Itasca with a patient’s name, Grand Itasca may provide the patient’s condition in general terms (such as “fair”).

**Health oversight activities**

Grand Itasca must disclose protected health information to health care oversight agencies, where required by law. Oversight activities can include licensure, accreditation, audits and investigations. It is standard practice for regulatory agencies such as the
Joint Commission on Accreditation of Healthcare Organizations to review a sample of medical records to assure the quality of care provided.

**Minnesota law** requires that patient-identifying information be removed from most disclosures for health-oversight activities, unless you have provided written consent for access to your protected health information.

**Lawsuits and other judicial proceedings**

Grand Itasca must disclose protected health information in response to a valid court or administrative order.

**Minnesota law** permits disclosures in response to a valid Minnesota court order, but requires written consent from the patient to release information in response to court orders from other states, subpoenas (except grand jury subpoenas) and discovery requests. In these cases, if the patient does not consent to the release, Grand Itasca will not release the information unless the person requesting the information provides a court order that is valid in Minnesota.

**Law enforcement activities**

Grand Itasca may disclose protected health information to law enforcement officials:
- In response to a court order or valid warrant
- To identify a suspect, fugitive or missing person
- About the victim of a crime under certain limited circumstance
- About a death believed to be a result of criminal conduct
- About a crime committed on Grand Itasca premises
- In emergency circumstances when necessary to maintain safety and security of Grand Itasca personnel and patients

**Minnesota law** generally does not allow the release of information from the health record without a valid court order or warrant. Minnesota allows the release of information to law enforcement in limited situations when a serious, specific threat of harm has been communicated to certain types of health care professionals. Grand Itasca may disclose information that is not in the health record when a crime has occurred on Grand Itasca property or in certain types of emergencies. In addition, health professionals must report certain types of wounds, such as gunshot and burns. In most cases, reports will include only the fact of injury, but additional disclosures would require patient consent or a court order.

**Coroners, medical examiners and funeral directors**

Grand Itasca may release protected health information to a coroner or medical examiner when necessary to identify the deceased or determine the cause of death, or as otherwise authorized by law. Release of information to a funeral director may occur when necessary to handle arrangements after death.

**Minnesota law** requires written authorization signed by a family or legal representative to release medical information to funeral directors.

**Minnesota law** requires reports of certain types of deaths to a coroner or medical examiner, and in those cases Grand Itasca must disclose health records upon the request of the coroner or medical examiner. Funeral directors are required to collect fact of death and certain demographic information. Grand Itasca will disclose this information to those in charge of the disposition of a body. Any additional disclosures from the health record will require consent from a surviving spouse, parent, person appointed by the patient in writing, or the patient’s legally authorized representative.

**National security activities**

Grand Itasca may release protected health information to authorized federal officials for intelligence, counterintelligence or other national security activities authorized by law. Grand Itasca may disclose protected health information to authorized federal officials so they may provide protection to the President or other authorized individuals.

**Minnesota law** generally does not permit this type of disclosure without written consent, or unless otherwise required by federal law.

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**Part III: Patients’ Rights With Respect to Protected Health Information**

**Right to inspect and copy**

You have the right to inspect and to request a copy of information maintained in Grand Itasca’s records about you. This includes medical and billing records maintained and used by Grand Itasca to make decisions about your care. In certain situations, where providing access may be detrimental to your health,
Grand Itasca is permitted by state and federal law to withhold access.

To obtain or inspect a copy of your medical information, submit a written request to the Privacy Officer at Grand Itasca Clinic & Hospital. Grand Itasca may charge a reasonable, cost-based fee to cover the expense of providing the copies.

Most patients have full access to inspect and receive a copy of the full medical record. On rare occasions, Grand Itasca may deny a request to inspect and receive a copy of some information in the medical record. This may occur if, in the professional judgment of your physician, the information could cause a threat to you or others. In these cases, Grand Itasca may supply the information to an appropriate third party who may then release the information to the patient.

If you are denied access to information, you may request a review of the denial. Another licensed health care professional who was not involved in the original decision within Grand Itasca will independently review both the original request and denial. Grand Itasca will comply with the outcome of the independent review. Contact the Privacy Officer at Grand Itasca for more information.

**Right to request amendment**

You have the right to request that protected health information or information in Grand Itasca’s record be amended. To request an amendment, submit a written request to the Privacy Officer at Grand Itasca. The request must include a reason to support the amendment. Grand Itasca may deny a request for amendment based upon any of the following circumstances:

- The request is not in writing or does not include a supporting reason;
- The information you want to change was not created by Grand Itasca, and the originator of the information is not available to make the amendment;
- The information is not part of the designated medical record; or
- The information in the record is accurate and complete.

**Denial of a requested amendment**

If Grand Itasca denies your request for an amendment, Grand Itasca will give you a written explanation of the denial. If you still disagree with the explanation provided, you can submit your written disagreement to the privacy officer at Grand Itasca, or you can ask that your request for amendment and explanation of the denial be included in any future disclosure of the pertinent protected health information. If you submit a statement of disagreement, Grand Itasca may write a rebuttal to your statement of disagreement that will be included in your record.

**Right to a list of certain disclosures**

You can ask Grand Itasca for a list of where Grand Itasca has shared your protected health information. This list would provide you with a summary of all disclosures Grand Itasca has made that you would not otherwise expect or already know about. The list would **not** include any of the following disclosures:

- for treatment, payment and health care operations
- made directly to you (the patient)
- that you have specifically authorized
- provided from facility directories
- made for national security or intelligence purposes
- made to correctional institutions or law enforcement having custody of the patient
- that took place before April 14, 2003

To get a copy of the list, submit a written request to the Privacy Officer at Grand Itasca. Your request must include a start date and an end date (beginning no earlier than April 14, 2003, when the rules go into effect and cannot be longer than six years). The first list within a 12-month period is free. For more lists, Grand Itasca may charge for the costs of providing the list.

**Right to request restrictions**

You can ask Grand Itasca to restrict the use or disclosure of protected health information about you. Your request must be in writing and submitted to the Privacy Officer at Grand Itasca.

Grand Itasca will carefully consider all requests.

**Right to request alternate methods of communication**

You have a right to request that Grand Itasca communicate with you in various ways (such as a letter or phone) or at a certain location. For example, you may ask that contact occur only at home or only at your place of business. In this situation, you may
submit a written request to the Privacy Officer at Grand Itasca specifying the communication method or alternate location being requested.

Grand Itasca will accommodate reasonable requests. However, if the request could result in Grand Itasca not being able to collect for services, Grand Itasca reserves the right to require you to provide additional information about how payment for services will be handled.

An authorization
Except as described above or specifically required or permitted by law, Grand Itasca will not use or disclose your protected information without a specific authorization from you. At times, Grand Itasca may ask you to provide a specific written permission to allow Grand Itasca to use or disclose medical information about you.
- An authorization is your signed, written permission to release medical information. You may be asked to sign the same authorization form periodically as required by state or federal law.
- An authorization may be revoked in writing at any time. Written revocation of authorization must be submitted to the Privacy Officer at Grand Itasca.

Complaints
If you want to file a concern or complaint about Grand Itasca’s use or disclosure of protected health information, you can provide the written complaint or concern to the Privacy Officer at Grand Itasca Clinic & Hospital, 1601 Golf Course Road, Grand Rapids, MN 55744 or the Department of Health and Human Services Office for Civil Rights.

Grand Itasca honors your right to file a concern or complaint. Grand Itasca would not, nor could it legally or ethically, take action against you for filing a concern or complaint. Grand Itasca reserves the right, however, to take necessary and appropriate action to maintain an environment that serves the best interests of its patients and providers.

For more information about any of Grand Itasca’s privacy practices, contact the privacy officer at Grand Itasca Clinic & Hospital.

Key Information about this notice
- The effective date of this notice is January 10, 2006.
- Additional paper copies of this notice will be provided upon request.
- Grand Itasca reserves the right to change the terms of this notice in accordance with the HIPAA rules or other laws or Grand Itasca policies and make the new notice provisions effective for all protected health information maintained by Grand Itasca. Grant Itasca will follow the terms and conditions of the Notice that is currently in effect.
- When the notice is revised, it will be available upon request at Grand Itasca Clinic & Hospital, at www.granditasca.org or by mail. It will also be posted at Grand Itasca physical locations.

Glossary
Authorization is your signed, written permission, specific to a narrow, defined purpose, such as for a medical research authorization. You may be asked to sign the same authorization form each year, if required by state law. You may revoke your authorization in writing at any time.

Health Insurance Portability and Accountability Act (HIPAA) is a federal law designed to protect patients’ medical information. Health care organizations in the United States need to fully comply with HIPAA regulations by April 14, 2003.

Protected health information means any information whether oral, electronic, or paper, which is created or received by Grand Itasca and relates to a patient’s health care or payment for the provision of health care.

Need more information?
If you have any questions, or would like to discuss this in more detail, please contact Grand Itasca’s Privacy Officer at (218) 999-1510. More information is available also at Grand Itasca’s website at www.granditasca.org.