

1. to carry out treatment, payment or health care operations;
2. to individuals about their own PHI;
3. prior to the compliance date; or,
4. based on your written authorization.

If the accounting cannot be provided within 60 days, an additional 30 days is allowed if you are given a written statement of the reasons for the delay and the date by which the accounting will be provided.

If you request more than one accounting within a 12-month period, Boston Mountain will charge a reasonable, cost-based fee for each subsequent accounting.

The Right to Receive a Paper Copy of This Notice Upon Request

To obtain a paper copy of this Notice contact the following officer: Nicole DePriest, Corporate Compliance Officer.

The Right to Be Notified of a Breach of Unsecured PHI

Boston Mountain is required by law to notify you following a breach of any Unsecured PHI.

A Note About Personal Representatives

You may exercise your rights through a personal representative. Your personal representative will be required to produce evidence of his/her authority to act on your behalf before that person will be given access to your PHI or allowed to take any action for you. Proof of such authority may take one of the following forms:

- a power of attorney for health care purposes, notarized by a notary public;
- a court order of appointment of the person as the conservator or guardian of the individual; or
- an individual who is the parent of a minor child.

Boston Mountain retains discretion to deny access to your PHI to a personal representative to provide protection to those vulnerable people who depend on others to exercise their rights under these rules and who may be subject to abuse or neglect. This also applies to personal representatives of minors.

SECTION III – BOSTON MOUNTAIN’S DUTIES

Boston Mountain is required by law to maintain the privacy of PHI and to provide individuals (participants and beneficiaries) with notice of its legal duties and privacy practices.

This notice is effective beginning 09-12-2013 and Boston Mountain is required to comply with the terms of this notice. However, Boston Mountain reserves the right to change its privacy practices and to apply the changes to any PHI received or maintained by Boston Mountain prior to that date. If a privacy practice is changed, a revised version of this notice will be provided to individuals for whom Boston Mountain still maintains PHI. Boston Mountain will provide updated Notice of Privacy Practices through regular mail at current contact information on file.

Any revised version of this notice will be distributed within 60 days of the effective date of any material change to the uses or disclosures, the individual’s rights, the duties of Boston Mountain or other privacy practices stated in this notice.

Minimum Necessary Standard

When using or disclosing PHI or when requesting PHI from another Covered Entity, Boston Mountain will make reasonable efforts not to use, disclose or request more than the minimum amount of PHI necessary to accomplish the intended purpose of the use, disclosure or request, taking into consideration practical and technological limitations.

However, the minimum necessary standard will not apply in the following situations:

- disclosures to or requests by a health care provider for treatment;
- uses or disclosures made to the individual;
- disclosures made to the Secretary of the U.S. Department of Health and Human Services;
- uses or disclosures that are required by law; and
- uses or disclosures that are required for Boston Mountain’s compliance with legal regulations.

This notice does not apply to information that has been de-identified. De-identified information is information that does not identify an individual and with respect to which there is a reasonable basis to believe that the information can be used to identify an individual is not individually identifiable health information.

Boston Mountain Rural Health Center, Inc.
EFFECTIVE DATE: September 12, 2013 Revised 9.13.24

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.

If you have any questions regarding this notice, the subjects addressed in it, or if you believe your privacy rights have been violated, you may contact the following officer: Nicole DePriest, Compliance Officer at 2265 HWY 65 N. Marshall, AR 72650, Ph-(870)448-4101, or nicoledepriest@bmrhc.net

Boston Mountain Rural Health Center, Inc. (“Boston Mountain”) is required by law to maintain the privacy of Protected Health Information (“PHI”) and to provide individuals with notice of our legal duties and privacy practices with respect to PHI. PHI is information that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services. This Notice of Privacy Practices (“Notice”) describes how we may use and disclose PHI to carry out treatment, payment or health care operations and for other specified purposes that are permitted or required by law. This Notice also describes your rights with respect to PHI about you.

Boston Mountain is required to follow the terms of this Notice. We will not use or disclose PHI about you without your written authorization, except as described in this Notice. We reserve the right to change this Notice and to make the new Notice effective for all PHI we maintain. Upon request, we will provide any revised Notice to you.

You may file a complaint with the Secretary of the U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue S.W., Washington, D.C. 20201.

Boston Mountain will not retaliate against you for filing a complaint.

Definitions

Treatment is the provision, coordination or management of health care and related services. It also includes but is not limited to consultations and referrals between one or more of your providers.

Payment includes but is not limited to actions to make coverage determinations and payment (including billing, claims management, subrogation, plan reimbursement, reviews for medical necessity and appropriateness of care and utilization review and preauthorizations).

Health care operations include but are not limited to quality assessment and improvement, reviewing competence or qualifications of health care professionals, underwriting, premium rating and other insurance activities relating to creating or renewing insurance contracts. It also includes disease management, case management, conducting or arranging for medical review, legal services and auditing functions including fraud and abuse compliance programs, business planning and development, business management and general administrative activities.

SECTION I – NOTICE OF PHI USES AND DISCLOSURES

Required PHI Uses and Disclosures.

Upon your request, Boston Mountain is required to give you access to certain PHI in order to inspect and copy it.

Use and disclosure of your PHI may be required by the Secretary of the Department of Health and Human Services to investigate or determine Boston Mountain’s compliance with applicable privacy regulations.

Uses and disclosures to carry out treatment, payment, and health care operations.

In order to carry out treatment, payment, and healthcare operations, Boston Mountain and its business associates may use PHI without your consent, authorization or opportunity to agree or object.

Boston Mountain may share information created or obtained with other healthcare providers or healthcare entities such as your health plan or insurer as permitted by law through Health Information Exchanges (HIEs) in which we participate. Exchange of health information can provide faster access, better care coordination, and can assist providers in making more informed healthcare decisions. You have the right to opt out of HIE participation by requesting a HIE Patient Opt-Out form from the front desk.

Uses and disclosures that require your written authorization.

Your written authorization will be obtained for uses and disclosures of PHI for marketing purposes and disclosures that constitute a sale of PHI.

Boston Mountain will not share any substance abuse treatment records without your written consent, except in certain limited circumstances. We may only disclose your substances abuse treatment records, or testimony relaying the content of such records, in a civil, administrative, criminal, or legislative proceeding against you if we have your specific written consent or a court order. Records will only be used or disclosed based on a court order after notice and an opportunity to be heard is provided to you, the patient, or the holder of the record, where required by law. Additionally, a court order authorizing use or disclosure must be accompanied by a subpoena or other similar legal mandate compelling disclosure before the record is used or disclosed.

With your consent, we may use or disclose your substance abuse treatment counseling notes, except in the limited circumstances as provided by 42 C.F.R. 2.31(b). For instance, with your consent, we may disclose your substance abuse treatment counseling notes to another treating provider.

Uses and disclosures that require that you be given an opportunity to agree or disagree prior to the use or release

Disclosure of your PHI to family members, other relatives and your close personal friends is allowed if:

- the information is directly relevant to the family or friend's involvement with your care or payment for that care; and
- you have either agreed to the disclosure or have been given an opportunity to object and have not objected.

Uses and disclosures for which consent, authorization or opportunity to object is not required.

Use and disclosure of your PHI is allowed without your consent, authorization or request under the following circumstances:

1. When required by law.
2. When permitted for purposes of public health activities, including when necessary to report product defects, to permit product recalls and to conduct post-marketing surveillance. PHI may also be used or disclosed if you have been exposed to a communicable disease or are at risk of spreading a disease or condition, if authorized by law.
3. Boston Mountain may disclose your PHI to a public health oversight agency for oversight activities authorized by law. This includes uses or disclosures in civil, administrative or criminal investigations; inspections; licensure or disciplinary actions (for example, to investigate complaints against providers); and other activities necessary for appropriate oversight of government benefit programs (for example, to investigate Medicare or Medicaid fraud). Boston Mountain may disclose your PHI when required for judicial or administrative proceedings. For example, your PHI may be disclosed in response to a subpoena or discovery request provided certain conditions are met. One of those conditions is that satisfactory assurances must be given to Boston Mountain that the requesting party has made a good faith attempt to provide written notice to you, and the notice provided sufficient information about the proceeding to permit you to raise an objection and no objections were raised or were resolved in favor of disclosure by the court or tribunal.
4. When required for law enforcement purposes.
5. For law enforcement purposes, including for the purpose of identifying or locating a suspect, fugitive, material witness or missing person. Also, when disclosing information about an individual who is or is suspected to be a victim of a crime but only if the individual agrees to the disclosure or the Covered Entity is unable to obtain the individual's agreement because of emergency circumstances. Furthermore, the law enforcement official must represent that the information is not intended to be used against the individual, the immediate law enforcement activity would be materially and adversely affected by waiting to obtain the individual's agreement and disclosure is in the best interest of the individual as determined by the exercise of Boston Mountain's best judgment.
6. When required to be given to a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death or other duties as authorized by law. Also, disclosure is permitted to funeral directors, consistent with applicable law, as necessary to carry out their duties with respect to the decedent.
7. Boston Mountain may use or disclose PHI for research, subject to conditions.
8. When consistent with applicable law and standards of ethical conduct if Boston Mountain, in good faith, believes the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public and the disclosure is to a

person reasonably able to prevent or lessen the threat, including the target of the threat.

9. When authorized by and to the extent necessary to comply with workers' compensation or other similar programs established by law.

Except as otherwise indicated in this notice, uses and disclosures will be made only with your written authorization subject to your right to revoke such authorization.

Uses and disclosure of reproductive healthcare records.

Under HIPAA, Boston Mountain is prohibited from using or disclosing PHI for either of the following purposes:

1. To conduct a criminal, civil, or administrative investigation into or impose criminal, civil, or administrative liability on any person for the mere act of seeking, obtaining, providing, or facilitating reproductive healthcare.
2. For the identification of any person for the purpose of conducting such investigations or imposing such liability.

This prohibition applies so long as we have reasonably determined that the reproductive healthcare is lawful under the circumstances in which it is provided. For example, the prohibition would apply if a resident of one state traveled to another state to receive reproductive healthcare, such as an abortion, that is lawful in the state where such healthcare was provided. It would also apply, for example, where the underlying reproductive healthcare continues to be protected by the United State Constitution, such as contraception, or is expressly required or authorized under federal law. Reproductive healthcare provided by an covered entity other than Boston Mountain is presumed lawful unless we have actual knowledge or factual information that it is not.

Under certain circumstances, if we receive a request for PHI that is potentially related to reproductive healthcare, we must obtain a signed attestation that the use or disclosure is not for one of the prohibited purposes described above. This requirement applies if the request is for health oversight activities, judicial and administrative proceedings, law enforcement purposes, or disclosure to coroners and medical examiners. For example, if a federal or state agency monitoring the healthcare system sought PHI from us that was potentially related to reproductive healthcare, we would be required to obtain a signed attestation from the agency that the use or disclosure was not for one of the prohibited purposes described above.

SECTION II – RIGHTS OF INDIVIDUALS

Right to Request Restrictions on PHI Uses and Disclosures

You may request Boston Mountain to restrict uses and disclosures of your PHI to carry out treatment, payment or health care operation, or to restrict uses and disclosures to family members, relatives, friends or other persons identified by you who are involved in your care or payment for your care. However, Boston Mountain is not required to agree to your request.

Boston Mountain will accommodate reasonable requests to receive communications of PHI by alternative means or at alternative locations.

You or your personal representative will be required to complete a form to request restrictions on uses and disclosures of your PHI.

Such requests should be made to the following officer: Nicole DePriest, Compliance Officer at 2265 HWY 65 N., Marshall, AR 72650, ph-(870) 448-4101, or nicoledepriest@bmrhc.net

Right to Inspect and Copy PHI

You have a right to inspect and obtain a copy of your PHI contained in a "designated record set" for as long as Boston Mountain maintains the PHI.

Protected Health Information (PHI) includes all individually identifiable health information transmitted or maintained by Boston Mountain, regardless of form.

Designated Records Set includes the medical records and billing records about individuals maintained by or for a covered health care provider; enrollment, payment, billing, claims adjudication and case or medical management record systems maintained by or for a health plan; or other information used in whole or in part by or for Boston Mountain to make decisions about individuals. Information used for quality control or peer review analyses and not used to make decisions about individuals is not in the designated record set.

The requested information will be provided within 30 days. A single 30-day extension is allowed if Boston Mountain is unable to comply with the deadline.

You or your personal representative will be required to complete a form to request access to the PHI in your designated record set. Requests for access to PHI should be made to the following officer: Nicole DePriest, Compliance Officer at 2265 HWY 65 N., Marshall, AR 72650, ph-(870) 448-4101, or nicoledepriest@bmrhc.net

If access is denied, you or your personal representative will be provided with a written denial setting forth the basis for the denial, a description of how you may exercise those review rights and a description of how you may complain to the Secretary of U.S. Department of Health and Human Services.

Right to Amend PHI

You have the right to request Boston Mountain to amend your PHI or a record about you in a designated record set for as long as the PHI is maintained in the designated record set.

Boston Mountain has 60 days after the request is made to act on the request. A single 30-day extension is allowed if Boston Mountain is unable to comply with the deadline. If the request is denied in whole or part, Boston Mountain must provide you with a written denial that explains the basis for the denial. You or your personal representative may then submit a written statement disagreeing with the denial and have that statement included with any future disclosures of your PHI.

Requests for amendment of PHI in a designated record set should be made to the following officer: Nicole DePriest, Corporate Compliance.

You or your personal representative will be required to complete a form to request amendment of the PHI in your designated record set.

The Right to Receive an Accounting of PHI Disclosures

At your request, Boston Mountain will also provide you with an accounting of disclosures by Boston Mountain of your PHI during the six years prior to the date of your request. However, such accounting need not include PHI disclosures made: