

Bethany Life Communities	Date Written: 2-24-2003	Date Revised: 5-1-2009
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Policy Statement

Each resident will receive a notice of the uses and disclosures of his/her protected health information (PHI) that may be made by or on behalf of Bethany Life Communities, and the resident's right and Bethany Life Communities' legal duties with respect to the resident's PHI.

Policy Interpretation and Implementation

1. Upon admission to Bethany Life Communities, residents will be provided with a copy of our Privacy Notice relative to protected health information.
2. Privacy notices are provided in an easy to read language and contain, as a minimum, the following elements:
 - a. A statement indicating how medical information about the resident may be used and disclosed and how the resident can obtain access to such information;
 - b. A description, including at least one example, of the types of uses and disclosures that Bethany Life Communities is permitted to make for purposes of treatment, payment and healthcare operations, which sufficient detail to place an individual on notice of the uses and disclosures permitted or required;
 - c. A description of each of the other purposes for which Bethany Life Communities is permitted or required to use or disclose PHI without the resident's consent or authorization, with sufficient detail to place an individual on notice of the uses and disclosures permitted or required;
 - d. A statement that other uses or disclosures will be made only with the resident's written authorization, and that the authorization may be revoked in accordance with the policy on authorization;
 - e. A statement of the resident's rights with respect to his/her PHI, and a brief description of how the resident may exercise those rights, including:
 - i. The right to request restrictions on certain uses/disclosures of PHI, and the fact that Bethany Life Communities does not have to agree to such restrictions;
 - ii. The right to receive confidential communications of PHI;
 - iii. The right to inspect and copy PHI;
 - iv. The right to amend PHI;
 - v. The right to receive an accounting of disclosures of PHI; and
 - vi. The right to receive a paper copy of the privacy notice.
 - f. A statement of Bethany Life Communities' duties with respect to PHI, including statements:
 - i. That Bethany Life Communities is required by law to maintain the privacy of PHI and to provide residents with notice of its legal duties and privacy policies;

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- ii. That Bethany Life Communities is required to abide by the terms of its current effective privacy notice; and
 - iii. That Bethany Life Communities reserves the right to change the terms of the notice and make the new notice provisions effective for all PHI maintained, along with a description of how Bethany Life Communities will provide residents with the revised notice.
 - g. A statement that residents may complain to Bethany Life Communities and to the Secretary of the United States Department of Health and Human Services about privacy rights violations, including a brief statement about how a complaint may be filed and an assurance that the resident will not be retaliated against for filing a complaint;
 - h. The name, or title, and telephone number of Bethany Life Communities' HIPAA Compliance Officer to contact for further information;
 - i. The name, telephone number and address of the person designated by Bethany Life Communities to receive complaints regarding Bethany Life Communities' privacy practices; and
 - j. The effective date of the notice, which may not be earlier than the date printed or published.
3. A copy of privacy notices issued to residents will be retained for a period of not less than six (6) years from the later of the date of creation or the last effective date.
 4. A copy of Bethany Life Communities' Privacy Notice will be posted in the lobby and an electronic copy will be posted on the Bethany Life Communities' web page. The HIPAA Compliance Officer is responsible for prompt distribution of changes to Bethany Life Communities' privacy notice or policies and procedures.
 5. Oral review of privacy notices will be made by the HIPAA Compliance Officer when such request is made by the resident.
 6. Residents will be required to sign a written acknowledgement of receipt of our Privacy Notice. Should a resident or representative refuse to sign the acknowledgment, a notation must be entered into the resident's medical record of Bethany Life Communities' effort to obtain the signature and the reason why the acknowledgment was not obtained.