

EDUCATIONAL OVERVIEW OF OUR PATIENT PRIVACY COMMITMENT FOR OUR MEDICAL STAFF/PROVIDERS

As you are aware, the Health Insurance Portability & Accountability Act (HIPAA) of 1996 went into effect April 14, 2003 and has greatly impacted how we protect the privacy and security of the patient health information. To comply with the HIPAA Privacy Rule, Saint Clare's Hospital is required develop and implement a Privacy/HIPAA compliance program that honors our commitment to patient privacy while ensuring that patient protected health information (PHI) is available to promote high quality care and treatment of our patients. We have created several documents to support our program, and these include:

- **Notice of Privacy Practices:** Our Notice of Privacy Practices informs our patients of how we use and disclose their PHI, their privacy rights with regard to their PHI, and our obligations to them concerning the use and disclosure of their PHI.
- **Privacy Rights Policies:** Under HIPAA, our patients were granted new privacy rights that required supporting policies. The new rights are:
 - Right to receive the Notice of Privacy Practices
 - Right to access, inspect, and receive a copy of their health information
 - Right to request an amendment of their PHI if they feel the information is incomplete or inaccurate
 - Right to request a reasonable alternative means or location for receipt of PHI
 - Right to request restrictions on certain disclosures of PHI
 - Right to request an accounting of disclosures of PHI
- **Other Privacy & Security Policies:** In assessing our risk issues with regard to HIPAA, it was clear that we needed to develop a number of policies related to the privacy and security of PHI. These policies range from security and access issues to how we disclose information on minors or to the media. These policies are available to you upon request. Additionally, we would be happy to share our information with your practices for further review and consideration. Some of the privacy policies and documents that we have either refined or developed that may impact you are as follows.
 - Authorization Form – Compliant to Both HIPAA and Wisconsin Privacy Regulations
 - Policy – Clergy and the Release of Protected Health Information
 - Policy – Destruction and Disposal of Protected Health Information
 - Policy – Responding to Privacy Related Complaints
 - Policy – Faxing of Protected Health Information

As a member of our medical staff, you have committed yourself to supporting our privacy policies and practices. We sincerely appreciate your support and believe that our combined efforts will not only ensure the privacy and security of PHI, but will also promote the sharing of critical information to maintain our quality of patient care.

We have available a variety of resources and educational tools to help further your understanding of the privacy and security of PHI. If we can provide further information for you, your colleagues, or your staff, please do not hesitate to contact us. Listed below are key individuals who will be happy to help you in any way.

SCH Privacy Officer	Shirley J. Bailey	baileys@smhosp.org	715-346-5291
SCH Compliance Officer	William J. Hinner	hinnerb@smhosp.org	715-346-5078
MHC Privacy Director	Nancy Davis	davisn@ministryhealth.org	920-746-1613

We appreciate your efforts in helping us meet our commitment to protect and secure patient information. Please do not hesitate to contact us with your questions, concerns, or suggestions for improving our practices. A copy of our Notice of Privacy Practices is attached for your review.