



# Life Foundation

FIGHTING AIDS IN HAWAII AND THE PACIFIC

## **CONSUMER NOTICE OF PRIVACY PRACTICES & RIGHTS**

Effective July 1, 2007

**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.**

Aloha! Life Foundation takes your privacy as a major concern to our organization and surpasses in some areas the legal standards to maintain and protect your protected health information also known as "PHI". We also have extensive security measures in place to ensure proper that safe guards protect physical and electronic access to your records. The following information is an orientation and overview how your information is used, your rights, how to file a complaint regarding our privacy practice, and how to obtain more information regarding Protected Health Information (PHI).

- If you or your representative have any questions regarding Life Foundation's privacy practices please call or write us at:

**Life Foundation  
Attn: Compliance Officer  
677 Ala Moana Blvd. Suite 226  
Honolulu, HI. 96813**

**Life Foundation Telephone Inquires: (808) 521-2437  
(ask to speak with either your case manager or the compliance officer)**

Life Foundation is required under Healthcare Insurance Portability and Accountability Act (HIPAA) to maintain the privacy and security of your protected health information. The information presented here is important to you so please review it carefully and ask questions.

Life Foundation follows the privacy practices outlined in this orientation and reserves the right to revise, change and make new privacy practices for all protected health information as required by law. Any and all changes to our privacy practices will be posted on the organizations website for you to view by going to [www.lifefoundation.org](http://www.lifefoundation.org) or will be mailed to you as required by HIPAA.

### **How we may use and share your PHI:**

Life Foundation may use and share your PHI with or without your consent. As such it is important that you are informed about how information is used. Here are some examples of when Life Foundation will use your information without your consent:

- Treatment – Life Foundation may use your information to assist with treatment planning activities with the providers caring for you.
- Payment – Life Foundation may use your information to obtain payment for services rendered, obtain authorization to care for you, to pay for services provided to you by another organization.

- Health Care Operations – Life Foundation may use and share your PHI when needed to operate our organization. For example we may use your information to evaluate the quality of care you got from us, or to satisfy auditing requirements by the State or Federal Government.

Additionally, Life Foundation may share or use your PHI for:

Life Foundation may use or share information with a health oversight agency for activities allowable by law. Typical activities include: Auditing Purposes, Investigation, Inspection of Records, Licensure, Accreditation, Disciplinary Actions, Criminal Proceedings, or Other Activities.

Life Foundation may use or share information with Public Health Agencies for activities such as: Drug Recalls/Warnings, Medical Products Warnings/Recalls, and Disease Control & Prevention. Additionally there are instances where we can share information and are required by law to report any instances of abuse, neglect, domestic violence, harm to self etc.

Life Foundation is required to follow the Law as it relates to Judicial and Administrative Hearings. Your information may be shared with Judicial and Administrative actions imposed on the organization. Additionally, Life Foundation may be required to share your information for law enforcement purposes.

We may have to share your information with authorized persons to carry out their jobs as required by law, such as; coroners, medical examiners, funeral directors.

There are other instances where we may share your information and comply with administrative rules. For example we may share information if required with organ donation center and disease registries, for research purposes with someone authorized to conduct research.

As mentioned earlier we may share your information to avoid a serious threat to your or someone else or for specialized government functions such as national security.

We try to help all our clients obtain good care and benefit fully from all the services the organization has to offer. Your information may be used for:

- Educational/Informational Purposes - Life Foundation publishes regular client newsletters, educational flyers, and other brochures on how to stay healthy and you may receive these in the mail unless you specifically request that we not send this information. Please make sure you tell your case manager if you would rather obtain these in person.
- Phone Calls and Appoint Reminders - Life Foundation recognizes that our clients have full lives and are busy productive community members; as such we often try to reach you on the phone or remind you about your appointments by sending cards/letters. If this is not okay you need to tell us and let's figure out together a way that best respects you based on your preferences.

### **Here are your rights regarding your health information and privacy:**

Life Foundation wants you to be fully informed about your rights. If you don't understand something please ask us to explain. These are your rights under the HIPAA rule and our privacy practices:

1. You have the right to request restrictions on uses/disclosures – As our consumer you have the right to request to restrictions on how we use your health information (some of which has been outlined above). Please keep in mind that Life Foundation is not legally bound to agree to your specific request. If you provide us with a request to restrict how we use your information we will always respond in writing to you.

2. You have the right to receive confidential communications— You have the right to request that information be shared with you in confidential manner. For example you can request of us to send information to a different address or contact you in a different manner. If you request this, we will do all that we can to comply with your request, but keep in mind that Life Foundation does not have to follow your request if it deemed not reasonable for us to do so.
3. You have the right to request that you inspect and copy your PHI—you can see your PHI and copy it as well. Life Foundation strongly encourages consumer involvement and believes your interest in PHI will lead to a better understanding of your clinical situation and lead to a more informed consumer. However, please keep in mind that there are instances where we may not comply with your request. Generally, this is results when someone indicates that doing so would be harmful to you. If you request copies of information we will provide those for you and tell you about any costs associated with the production of those documents in advance. If we deny allowing you to inspect your health information we will tell you why in writing.
4. You have the right to an account of disclosures made—Life Foundation tracks disclosures made regarding your specific health information. You have the right to ask for an accounting of that, except for those disclosure made for Treatment, Payment and Health Operations (TPO) reasons. HIPAA requires us to track this information and we will only have information since July 1, 2007 and beyond as this is the date HIPAA rules were required by Life Foundation. We will respond to your request in writing within sixty days. Life Foundation will give you one accounting per year free of charge when you request it. Please keep in mind we will charge you for additional requests and will notify you of the costs in advance.
5. You will be provided a copy of these rights at your orientation to program services. You may also obtain a copy of your rights under HIPAA by going to the Life Foundation website at [www.lifefoundation.org](http://www.lifefoundation.org)

**If you have a complaint about our privacy practice or need any additional information, we want to hear from you:**

If you think your rights have been violated in any way, we are committed to investigating that fully. We will need your help in resolving your complaint so we ask that you either send a written complaint to us or if you need assistance feel free to go to the compliance officer or any staff member to help you file your complaint. Complaints are taken very seriously and help us to become a better organization. **It is important to note that Life Foundation will not take any action against you for filing a complaint.** You can file your complaint by addressing it to:

Life Foundation  
 Attn: Compliance Officer  
 677 Ala Moana Blvd. Suite: 226  
 Honolulu, HI 96813  
 Telephone Number: (808) 521-2437

**Or you may file a complaint directly to:**  
 The United States Department of Health and Human Services

**Thank you for selecting Life Foundation as your provider.  
 We look forward to helping you in any way we can.**

I acknowledge receipt of Life Foundation's Notice of Privacy Practices and Rights.

Signature of client: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of authorized representative: \_\_\_\_\_ Date: \_\_\_\_\_

\* Note: Copies of the Notice of Privacy Practices and Rights can be downloaded from our website, [www.lifefoundation.org](http://www.lifefoundation.org).

