

It is legally required through the HIPAA Act that Front Porch post the following document on its web site.

## NOTICE OF PRIVACY PRACTICES FOR HEALTH INFORMATION

**“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.”**

**GENERAL INFORMATION:** During the course of providing services and care to you, Front Porch gathers, creates, and retains certain personal information about you that identifies who you are and relates to your past, present, or future physical or mental condition, the provision of health care to you, and payment for your health care services. This personal information is characterized as your “*protected health information.*” This Notice of Privacy Practices describes how Front Porch maintains the confidentiality of your protected health information, and informs you about the possible uses and disclosures of such information. It also informs you about your rights with respect to your protected health information. Front Porch may, in its discretion, use or disclose your protected health as a:

- ◆ Source for documenting assessment, planning care and treatment, recording informed consent, recording progress, ongoing assessment of health status/progress/needs
- ◆ Means of communicating among health professionals who evaluate you and/or provide care and treatment; copies are provided for continuity of care to consultants, hospitals, emergency room or other Health Facility where you might be transferred
- ◆ Source to support billing for services and to meet the requirements of third party payers
- ◆ Legal document supporting the care, services and treatment provided
- ◆ A resource during surveys by the state, federal and other review agencies
- ◆ A tool with which we can assess and continually work to improve care
- ◆ A source to be used by students and a tool in educating health professionals

**Understanding what is in your record and how your health information is used will assist you to: ENSURE ACCURACY, BETTER UNDERSTAND who, what, when, where and why others may need access to your health information, MAKE INFORMED DECISIONS when authorizing disclosure to others.**

**USE AND DISCLOSURE WITH YOUR AUTHORIZATION:** Front Porch will require a written authorization from you before it uses or discloses your protected health information, unless a particular use or disclosure is expressly permitted or required by law without your authorization. Front Porch has prepared an authorization form for you to use that authorizes Front Porch to use or disclose your protected health information for the purposes set forth in the form. You are not required to sign the form as a condition of obtaining treatment or having your care paid for. If you sign an authorization, you may revoke it at any time by written notice.

**YOUR RIGHTS:** The health record is the physical property of the Unit that compiled it. The information belongs to you. **YOU HAVE THE RIGHT TO:**

- Request restriction on certain uses and disclosures of your information provided by 45CFR 164.522
- Inspect and copy your health record as provided for in 45 CFR 164.524
- Amend your health record as provided in 45 CFR 164.528
- Request alternate means of communication to obtain your health information 45 CFR 164.522(b)
- Request an accounting of disclosures of Protected Health Information 45 CFR 164.528
- Receive the notice electronically and/or to obtain a paper copy of the notice upon request 164.520(b)(1)(iv)(f)
- Revoke authorization to use or disclose health information except to the extent that action has already been taken 45 CFR 164.508(b)(5)

**Report a problem - or if you have a question, or desire additional information, you may call the facility contact person at the facility phone number.**

**File a complaint** if you think your privacy rights have been violated. If you are not satisfied with the response to your concern, file a written or oral complaint with the Administrator. If your response is still a concern you may file a complaint with the corporate compliance and privacy officer, Terry Bluemer, at 818-729-8139.

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You are also notified that you may file a complaint with the Secretary of Health and Human Services, Office for Civil Rights:

U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, D.C. 20201  
(202) 619-0257  
1-877-696-6775 (toll free)  
<http://www.hhs.gov/ocr>

### PROVIDER RESPONSIBILITY

Front Porch is responsible to:

- Maintain the privacy of your health information, to use and disclose information only with your consent or authorization, unless there are exceptions described in this notice or otherwise allowed by related laws, rules and regulations
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect, maintain, use, and disclose about you
- Abide by this notice
- Provide any amendment record along with other documents when information is disclosed
- Notify you if we are unable to agree to requested restriction/s
- Accommodate reasonable requests you may have to communicate health information by alternate means or at alternative locations
- Use or disclose your health information

Front Porch reserves the right to change our privacy practices and to make new practices known to you through our routine methods of communications to the latest address/contact provided.

### EXAMPLES OF DISCLOSURE FOR TREATMENT, PAYMENT AND HEALTH OPERATIONS WITHOUT YOUR AUTHORIZATION

**Front Porch may, in its discretion, use or disclose your protected health information without your written authorization in the following circumstances:**

***We will use your information for treatment.*** Information obtained by the physician/s, nursing, social, administrative staff or other providers of service will be recorded in your manual and/or computerized record. This information is used to plan your treatment and services as well as to document progress, events, plans of care, observations and evaluation of care and treatment, information for consultants, diagnostic services or for other providers or transfer to another Health Facility.

***We will use your health information for payment.*** A bill may be sent to a third party such as Medicare, MediCal (Medicaid), Health Maintenance Organizations (HMO), and Insurance Companies or **to you**. At least some health information may be provided to the payee that identifies your demographic information, the diagnosis and additional health information to support the billing.

***We will use your health information for health care operations.*** Front Porch and Front Porch and staff may use the health/medical record information as needed to carry out the regular operations and the respective clinical needs of the treatment staff including: Collecting and reporting for the Minimum Data Set and monitoring our quality of services and care.

***Business Associates:*** Front Porch may contract with certain individuals or entities to provide services on its behalf. Examples include data processing, legal or quality assurance services. Front Porch may disclose your protected health information to a business associate, as necessary, to allow the business associate to perform its functions on our behalf.

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**Resident Location:** Resident location will be provided (unless there is an opposing designation in writing) to those individuals who are determined to be legally authorized to obtain the information, i.e. responsible party; emergency contact, and in case of conservatorship application, the attorney representing the client.

**Notification and Communication:** Front Porch may use or disclose health information to notify or assist in notifying representatives identified as a responsible party/emergency contact. The latest available address will be utilized. It is understood the information may be provided via telephone, including voice mail message, email, fax, and written. Front Porch may notify the responsible representatives of the appointments, special meetings to discuss care and treatment, at other times related to the condition/status of the resident, or death. Front Porch is not responsible for assuring the information is retained private once it is provided through agreed upon communication methods or when submitted to the name/s of the responsible party/emergency contact.

**Research:** Disclosure of health information for the purposes of research shall only be made after documented approval for the research. Names of the individual will not be included unless there is a specific authorization.

**Funeral Directors and Coroner's Office:** In the event it is necessary we may disclose the health information to funeral directors and coroner's office consistent with applicable laws as required for them to carry out their duties.

**Workers Compensation and Employee Actions:** Information may be disclosed to the extent only as required to carry out the required activities. The privacy of the resident/patient will be protected within the legal parameters of State of California.

**Law Enforcement:** Disclosure of health information will be provided to the extent necessary to carry out the health and safety of the individual, i.e., general description of the person's applicable health condition, special marks, clothing type, other identification data, and information as required by law, based on the situation.

**Licensing and Accreditation:** Front Porch may disclose protected health information to any government or private agency, such as the California Department of Health Services, and the California Department of Social Services so that the agency may carry out its oversight responsibilities.

**Community Special Directory:** Front Porch maintains a Special Directory of residents to allow staff to provide certain basic information to members of the clergy or to other persons who ask for residents by name. Unless you notify Front Porch that you object the directory will include certain limited information about you such as your name, telephone number and address.

**Disaster Relief:** Front Porch may disclose your protected health information to a public or private entity authorized to assist in disaster relief efforts.

**Fundraising:** Front Porch may use certain protected health information to contact you in an effort to raise money for Front Porch operations. Front Porch may disclose protected health information to related foundations that it uses to raise funds for its own benefit. Front Porch will disclose only your name, address and phone number.

**Members of Workforce:** It is the policy of Front Porch to allow members of its workforce to share residents' protected health information with one another to the extent necessary to permit them to perform their legitimate functions. At the same time, Front Porch will work with its workforce to ensure that there are no communications that will violate the rights of its residents to have confidentiality maintained.

Effective date: 4.13.03