

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Waikiki Health respects your privacy. We understand that your personal health information is very sensitive. We will not disclose your information to others unless you tell us to do so, or unless the law authorizes or requires us to do so.

The law protects the privacy of health information we create and obtain in providing our care and services to you. For example, your protected health information (PHI) includes your symptoms, test results, diagnoses, treatment, health information from other providers, and billing and payment information relating to these services. Federal and state law allows us to use and disclose your protected health information (PHI) for purposes of treatment, and health care operations. State law requires us to get your authorization to disclose this information for payment purposes.

Examples of Use and Disclosures of Protected Health Information

For treatment:

- Information obtained by a nurse, physician, or other member of our health care team will be recorded in your medical record and used to help decide what care may be right for you.
- We may also provide information to others providing you care. This will help them stay informed about your care.

For payment:

- We request payment from your health insurance plan, which includes Medicare and Medicaid. Health plans need information from us about your medical care. Information provided to health plans may include your diagnoses, procedures performed, or recommended care.

For health care operations:

- We use your medical records to assess quality and improve services.
- We may use and disclose medical records to review the qualifications and performance of our health care providers and to train our staff.
- We may contact you to remind you about appointments and give you information about treatment alternatives or other health-related benefits and services.
- We may contact you to raise funds.

- We may use and disclose your information to conduct or arrange for services including
 - medical quality review by your health plan.
 - Accounting, legal, risk management and insurance services; o Audit functions, including fraud and abuse detection and compliance programs.

Your Health Information Rights

- The health and billing records we create, and store is the property of Waikiki Health. The protected health information in it, however, generally belongs to you. You have a right to:
- Receive, read and ask questions about this notice.
- Ask us to restrict certain uses and disclosures. You must deliver this request in writing to us. We are not required to grant the request, but we will comply with any request granted.
- Request and receive from us a paper copy of the most current Notice of Privacy Practices.
- Request that you be allowed to see and get a copy of your protected health information. You may make this request in writing. We have a form available for this type of request.
- Have us review a denial of access to your health information—except in certain circumstances.
- Ask us to change your health information. You may give us this request in writing. You may write a statement of disagreement if your request is denied. Your statement of disagreement will be stored in your medical record and included with any release of your records.
- When you request, we will give you a list of disclosures of your health information. The list will not include disclosures to third party payors. You may receive this information without charge every 12 months. We will notify you of the cost involved if you request this information more than once in 12 months.
- Ask that your health information be given to you by another means or at another location. Please sign, date and give us your request in writing.
- Cancel prior authorization to use or disclose health information by giving us a written revocation. Your revocation does not affect information that has already been released. It also does not affect any action taken before we have it. Sometimes, you cannot cancel an authorization if its purpose was to obtain insurance.
- To request removal of your name from Waikiki Health's mailing list, please call 808-537-8403.

Waikiki Health Responsibilities

Waikiki Health is required to:

- Keep your protected health information private.
- Give you this notice.
- Follow the terms of this notice.

We reserve the right to modify our practices concerning the protected health information we maintain. In the event of any changes, we will update this notice accordingly. To obtain the most recent copy of this notice, you may call or visit any Waikiki Health site to pick up a copy.

To Ask for Help or Report a Problem

If you have additional questions, require further information, or need to report any issues regarding the handling of your protected health information, you may contact our Compliance Officer at compliance@waikikihealth.org.

If you believe your privacy rights have been violated, you may discuss your concerns with any staff member. You may also submit a written complaint to the U.S. Secretary of Health and Human Services.

We respect your right to file a complaint with us or with the U.S. Secretary of Health and Human Services. If you complain, you will not suffer retribution or a loss of health care or services as a result.

Other Disclosures and Uses of Protected Health Information

Notification of Family and Others

- Unless you object, we may release health information about you to a friend or family member *who is involved with your medical care*. We may also give information to someone who helps pay for your care. We may tell your family or friends your condition and that you are in a hospital.

We may use and disclose your protected health information (PHI) without your authorization as follows:

- **With medical researchers** – if the research has been approved and the researcher has a policy to protect the privacy of your health information. We may also share information with medical researchers preparing to conduct a research project.
- **For Public Health and Safety purposes as allowed or required by law** –
 - To prevent or reduce a serious, imminent threat to the health or safety of a person or the public.
 - To public health or legal authorities
 - o To protect public health and safety
 - o To prevent or control disease, injury, or disability
 - o To report vital statistics such as births or deaths
- **To report suspected Abuse or Neglect** – to public authorities as required by law. **For Health and Safety oversight activities.** For example, we may share health information with the Department of Health.

- **For Disaster Relief Purposes.** For example, we may share health information with disaster relief agencies to assist in notification of your condition to family or others.
- **To Funeral Directors/Coroners** – consistent with applicable law to allow them to carry out their duties.
- **To Organ Procurement Organizations (tissue donation and transplant)** – or to persons who obtain, store, or transplant organs.
- **To the Food and Drug Administration (FDA)** – relating to problems with food, supplements, and products.
- **To comply with workers’ compensation laws** – if you make a workers’ compensation claim.
- **For Work-Related Conditions that could affect Employee Health.** For example, an employer may ask us to assess health risks related to a particular job.
- **To Correctional Institutions** – if you are in jail or prison, as necessary for your health and the health and safety of others.
- **For Law Enforcement purposes** – such as when we receive a subpoena, court order, or other legal process, or you are the victim of a crime.
- **To the Military Authorities of U. S. and Foreign Military Personnel.** For example, the law may require us to provide information necessary to a military mission.
- **During Judicial/Administrative Proceedings** – at your request, or as directed by a subpoena or court order.
- **For Specialized Government Functions.** For example, we may share information for national security purposes.

Other Uses and Disclosures of Protected Health Information

Uses and disclosures not made in this notice will be made only as allowed or required by law or with your written authorization.

Reproductive Healthcare Privacy

Prohibition

The Final Rule strengthens privacy protections by prohibiting the use or disclosure of protected health information (PHI) by a covered health care provider, health plan, or health care clearinghouse—or their business associate—for either of the following activities:

- 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 health care, where such health care is lawful under the circumstances in which it is provided.
- The identification of any person for the purpose of conducting such investigation or imposing such liability.

Under the Final Rule, the prohibition applies where a covered health care provider, health plan, or health care clearinghouse ([covered entities](#)) or [business associate](#) (collectively, “regulated entities”) has reasonably determined that one or more of the following conditions exists:

- Reproductive health care is lawful under the law of the state in which such health care is provided under the circumstances in which it is provided.
 - For example, if a resident of one state traveled to another state to receive reproductive health care, such as an abortion, that is lawful in the state where such health care was provided.
- The reproductive health care is protected, required, or authorized by Federal law, including the U.S. Constitution, regardless of the state in which such health care is provided.
 - For example, if use of reproductive health care, such as contraception, is protected by the Constitution.
- The reproductive health care was provided by a person other than the covered health care provider, health plan, or health care clearinghouse (or business associates) that receives the request for PHI and the presumption described below applies.

The Final Rule continues to permit covered health care providers, health plans, or health care clearinghouses (or business associates) to use or disclose PHI for purposes otherwise permitted under the Privacy Rule where the request for the use or disclosure of PHI is not made to investigate or impose liability on any person for the mere act of seeking, obtaining, providing, or facilitating reproductive health care. For example:

- A covered health care provider could continue to use or disclose PHI to defend themselves in an investigation or proceeding related to professional misconduct or negligence where the alleged professional misconduct or negligence involved the provision of reproductive health care.
- A covered health care provider, health plan, or health care clearinghouse (or business associates) could continue to use or disclose PHI to defend any person in a criminal, civil, or administrative proceeding where liability could be imposed on that person for providing reproductive health care.
- A covered health care provider, health plan, or clearinghouse (or their business associates) could continue to use or disclose PHI to an Inspector General where the PHI is sought to conduct an audit for health oversight purposes.

Presumption

The Final Rule includes a presumption that the reproductive health care provided by a person other than the covered health care provider, health plan, or health care clearinghouse (or business associates) receiving the request was lawful. In such cases, reproductive health care is presumed to be lawful under the circumstances in which it was provided unless one of the following conditions are met:

- The covered health care provider, health plan, or clearinghouse (or business associates) has actual knowledge that reproductive health care was not lawful under the circumstances in which it was provided.
 - For example, an individual discloses to their doctor that they obtained reproductive health care from an unlicensed person and the doctor knows that the specific reproductive health care must be provided by a licensed health care provider.
- The covered health care provider, health plan, or health care clearinghouse (or business associates) receives information from the person making the request for the use or disclosure of PHI that demonstrates a substantial factual basis that the reproductive health care was not lawful under the circumstances in which it was provided.
 - For example, a law enforcement official provides a health plan with evidence that the information being requested is reproductive health care that was provided by an unlicensed person where the law requires that such health care be provided by a licensed health care provider.

Attestation

To implement the prohibition, the Final Rule requires a covered health care provider, health plan, or health care clearinghouse (or business associates), when it receives a request for PHI potentially related to reproductive health care, to obtain a signed attestation that the use or disclosure is not for a prohibited purpose. This attestation requirement applies when the request is for PHI for any of the following:

- Health oversight activities.¹
- Judicial and administrative proceedings.²
- Law enforcement purposes.³
- Disclosures to coroners and medical examiners.⁴

The requirement to obtain a signed attestation gives a covered health care provider, health plan, or health care clearinghouse (or business associates) a way of obtaining written representations from people requesting PHI that their requests are not for a prohibited purpose. Additionally, it puts people making requests for the use or disclosure of PHI on notice of the potential criminal penalties for those who knowingly and in violation of HIPAA obtain individually identifiable health information (IIHI) relating to an individual or disclose IIHI to another person. We intend to publish model attestation language before the compliance date of this Final Rule.

Disclosures to Law Enforcement

The Privacy Rule permits uses or disclosures of PHI without an individual’s authorization only where such uses or disclosures are expressly permitted or required by the Privacy Rule. As explained in [OCR guidance](#), the Privacy Rule permits, but does not require, certain disclosures to law enforcement and others, subject to specific conditions. Thus, covered health care providers, health plans, and health care clearinghouses (and business associates), including their workforce members, are only permitted to disclose PHI for law enforcement purposes where they suspect an individual of obtaining reproductive health care (lawful or otherwise) if the covered entity or

business associate is required by law to do so and all applicable conditions are met. Accordingly, under the Final Rule, such disclosure is only permitted where all three of the following conditions are met:

- The disclosure is not subject to prohibition.
- The disclosure is required by law.
- The disclosure meets all applicable conditions of the Privacy Rule permission to use or disclose PHI as required by law.

How to file a complaint

If you believe that a HIPAA covered entity or its business associate violated your (or someone else's) health information privacy rights or committed another violation of the Privacy, Security, or Breach Notification Rules, you may file a complaint with the HHS Office for Civil Rights at: <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>

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