

Notice For Organized Healthcare Arrangement Joint Notice of Health Information Privacy Practices

**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.**

Effective Date: 4/14/03

Understanding Your Health Record/Information

This notice describes the practices of the Seton Family of Hospitals ("Seton")¹ and that of any physician² with staff privileges with respect to your protected health information created while you are a patient at Seton. Seton physicians with staff privileges and personnel authorized to have access to your medical chart are subject to this notice. In addition, Seton and physicians with staff privileges may share medical information with each other for treatment, payment or healthcare operations described in this notice.

We create a record of the care and services you receive at Seton. We understand that medical information about you and your health is personal. We are committed to protecting medical information about you. This notice applies to all of the records of your care within Seton.

This notice will tell you about the ways in which we may use and disclose medical information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of medical information.

Your Health Information Rights

Although your health record is the physical property of Seton, the information belongs to you. You have the right to:

- Inspect and request a copy of your health record as provided by law
- Request communications of your health information by alternative means or at alternative locations. We will accommodate reasonable requests.
- Request a restriction on certain uses and disclosures of your information for treatment, payment, healthcare operations and as to disclosures permitted to persons, including family members involved with your care and as provided by law. However, we are not required by law to agree to a requested restriction.
- Request that we amend your health record as provided by law. We will notify you if we are unable to grant your request to amend your health record.
- Obtain an accounting of certain disclosures of your health information as provided by law
- Obtain a paper copy of this notice of information practices upon request from the Network Privacy Officer at

1345 Philomena Street, Suite 410.3, Austin, Texas 78723

A copy of this notice may also be obtained from the Seton Web site at www.seton.net.

You may exercise your rights set forth in this notice, by providing a written request to the Health Information Management department at the facility/location where you were seen.

Our Responsibilities

In addition to the responsibilities set forth above, we are also required to:

- Maintain the privacy of your health information
- Provide you with a notice as to our legal duties and privacy practices with respect to information we maintain about you
- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction on certain uses and disclosures
- We reserve the right to change our practices and to make the new provisions effective for all protected

health information we maintain, including information created or received before the change. Should our information practices change we are not required to notify you, but we will have the revised notice available for you to request at any Seton site and on the Seton Web site, www.seton.net.

- We will not use or disclose your health information without your written authorization, except as described in this notice or permitted by law

Examples of Disclosures of Health Information for Treatment, Payment and Healthcare Operations and as Otherwise Allowed by Law

The following categories describe different ways that we use and disclose medical information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information should fall within one of the categories:

TREATMENT

For example: We may disclose medical information about you to doctors, nurses, technicians, medical students or other personnel who are involved in taking care of you within Seton. We may share medical information about you in order to coordinate different treatments, such as prescriptions, lab work and X-rays. We may also provide your physician or a subsequent healthcare provider with copies of various reports to assist in treating you once you are discharged from care at Seton.

PAYMENT

For example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures and supplies used.

HEALTHCARE OPERATIONS

For example: We may use the information in your health record to assess the care and outcome in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the health care and services we provide.

Your health information will also be used as otherwise allowed by law. The following are some examples of how we may use and disclose medical information about you.

BUSINESS ASSOCIATES: There are some services provided in our organization through contacts with business associates. Examples include certain laboratory tests and copy services. To protect your health information, however, we require business associates to take the appropriate measures to safeguard your information.

DIRECTORY: Unless you notify us that you object, we will use your name, location in the facility and general condition for directory purposes while you are a patient at Seton. This information may be provided to people who ask for you by name.

NOTIFICATION: We may use or disclose information to notify or assist in notifying a family member, personal representative or another person responsible for your care of your location and general condition.

RESEARCH: We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the

research proposal and established protocols to ensure the privacy of your health information.

FUNERAL DIRECTORS: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

ORGAN PROCUREMENT ORGANIZATIONS: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs for the purpose of tissue donation and transplant.

COMMUNICATIONS FOR TREATMENT AND HEALTH-CARE OPERATIONS: We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

MARKETING: We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits, goods and services provided by Seton that may be of interest to you.

FUND-RAISING: We may contact you as part of a fund-raising effort.

FOOD AND DRUG ADMINISTRATION (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, medications, devices, supplements, product and product defects or post marketing surveillance information to enable product recalls, repairs or replacement.

HEALTH OVERSIGHT ACTIVITIES: We may disclose your health information to a health oversight agency for activities authorized by law. These oversight activities might include audits, investigations, inspections and licensure. These activities are necessary for the government to monitor the healthcare system, government benefit programs and compliance with civil rights laws.

WORKER'S COMPENSATION: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs established by law.

PUBLIC HEALTH: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury or disability.

ABUSE, NEGLECT OR DOMESTIC VIOLENCE: As required by law, we may disclose health information to a governmental authority authorized by law to receive reports of abuse, neglect or domestic violence.

JUDICIAL, ADMINISTRATIVE AND LAW ENFORCEMENT PURPOSES: Consistent with applicable law, we may disclose health information about you for judicial, administrative and law enforcement purposes. This may include disclosures to avert a serious threat to you or a third party's health or safety as well as victims of crime or criminal conduct at the Covered Entity.

TO AVERT A SERIOUS THREAT TO HEALTH OR SAFETY: We may use and disclose your health information when we believe it is necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent or lessen the threat or to law enforcement authorities in particular circumstances.

NATIONAL SECURITY AND INTELLIGENCE ACTIVITIES: We may release your health information to authorized federal officials for lawful intelligence, counterintelligence and other national security activities authorized by law.

PROTECTIVE SERVICES FOR THE PRESIDENT AND OTHERS: We may disclose your health information to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state or for the conduct of special investigations.

CUSTODIAL SITUATIONS: If you are an inmate in a correctional institution and if the correctional institution or law enforcement authority makes certain representations to us, we may disclose your health information to a correctional institution or law enforcement official.

REQUIRED OR ALLOWED BY LAW: We will disclose medical information about you when required or allowed to do so by federal, state or local law.

OTHER USES OF YOUR HEALTH INFORMATION: Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with your written permission. If you give us permission to use or disclose your medical information, you may cancel that permission, in writing, at any time. If you cancel your permission, we will no longer use or disclose medical information about you for the reasons covered by your written authorization. We are unable to take back any disclosures we have already made with your permission.

For More Information or to Report a Problem

If you have questions regarding your privacy rights and would like additional information, you may contact the Seton Family of Hospitals Privacy Office at 512-324-3280.

If you believe your privacy rights have been violated, you may file a written complaint with the Seton Family of Hospitals Network Privacy Officer,
1345 Philomena Street, Suite 410.3
Austin, Texas 78723 or with the Secretary of Health and Human Services. There will be no retaliation for filing a complaint.

¹ Seton is an Organized Healthcare Arrangement including but not limited to: (1) Seton Medical Center Austin, Seton Northwest, Seton Southwest, Brackenridge Hospital and Dell Children's Medical Center of Central Texas, Seton Shoal Creek, Seton Highland Lakes, Seton Edgar B Davis, Seton Medical Center Williamson, (the "Seton Hospitals"); (2) Seton Kozemetsky, Seton McCarthy and Seton Topfer Community Health Centers, Seton Edgar B. Davis, Lockhart Center for Healthcare, Seton Lockhart, Seton Highland Lakes, and The Clinic at Brackenridge; (3) Call Center; (4) Seton Mobile Mammography; (5) insure•a•kid; (6) Seton Outpatient Diabetes Education; (7) Seton Pflugerville, Seton Cedar Park; (8) Specially for Children; (9) Seton Highland Lakes Home Health and Hospice Care; (10) the Skippy Program; (11) Children's Hospital Foundation of Austin and Seton Fund; (12) Seton Medical Group; (13) UTMB Austin Program, Austin Academic Medicine Associates, Capital Obstetrics and Gynecology Associates, Capital Gastroenterology and Associates, Seton Healthcare Associates, Southwest Pediatric Associates and Austin Medical Specialty Group (14) Seton Physician Hospital Network

² I understand that the physicians participating in my care at Seton, including the physicians in the Emergency Department, are not employees or agents of Seton and are not acting for or on behalf of Seton. They are either Independent Physicians who are engaged in the private practice of medicine who have been granted privileges to use this facility for the care of their patients or licensed physicians who are engaged in a Post Graduate Medical Education Program. I understand that all medical decisions regarding my care and treatment at Seton are made by such physicians and not by Seton.
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