



**RURAL HEALTH, Inc.**  
*We specialize in you*

## NOTICE OF 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

Starting April 13, 2003, Rural Health, Inc. (RHI) is required to maintain the privacy of your protected health information as a result of the Health Insurance Portability and Accountability Act (HIPAA). Your “protected health information” means health information, including demographic information (for example, your name, address, and phone number) collected from you and created or received by the physician, another health care provider, a health plan, or a health care clearinghouse.

RHI must follow this Notice until it is replaced. This notice explains how RHI can use or share your health information. It also explains your rights. RHI reserves the right to change the terms of this Notice at any time. If RHI changes this Notice, a copy of the current Notice will be posted in a prominent location. We will provide you with any revised notice of Privacy Practices when you ask. To get a copy of RHI’s Notice of Privacy Practices, you may access our website at [www.ruralhealthinc.org](http://www.ruralhealthinc.org), call any office and request a revised copy be sent to you in the mail, or you may ask for one at the time of your next appointment.

### Purposes for which RHI may use or disclose your personal health information without your authorization:

- Health Care Treatment Purposes, For example, RHI may disclose our personal health information to your doctor, at the doctor’s request, for treatment by your doctor.
- Payment. For example, RHI may use or disclose your personal health information to provide eligibility information to your doctor when you receive treatment, to pay for claims for covered health care services, or to recover costs from other medical insurance.
- Health Care Operations. For example, RHI or its contractors may use or disclose your personal health information (1) to conduct quality assessment and improvement activities; (2) to review applications for services; (3) to engage in care coordination or case management; (4) to manage, plan or develop RHI’s services and budget; (5) to coordinate services with another public benefit program; or (6) to cooperate with state and federal auditors.
- Health Services. RHI or its contractors may contact you, for example to give you information about treatment alternatives or other health-related benefits and services that may be of interest to you.
- As Required by Law. For example, RHI is required by law to allow the United States Department of Health and Human Services to audit RHI records. RHI may disclose your personal health information necessary to comply with workers’ compensation or other laws. RHI may also be required to disclose personal health information about abuse, neglect, or domestic violence to governmental or social services agencies.
- For other Reasons:
  - To comply with legal proceedings, such as a court or administrative order or subpoena.
  - To law enforcement officials or to correctional institutions for limited law enforcement and health and safety purposes.
  - With your written authorization, to a family member, friend or other person, to help you with your health care or payment for your health care.
  - To your personal representative appointed by you or designated by law.
  - For research purposes in limited circumstances and where the information will be protected by the researchers
  - To a coroner, medical examiner, or funeral director to identify a deceased person or to arrange payment benefits.
  - To an organ procurement organization, in limited circumstances.
  - To avert a serious threat to your health or safety or health or safety of others.
  - To a governmental agency authorized to oversee government health care programs.
  - To federal officials for lawful national security purposes.
  - To public health authorities for public health purposes.

- To appropriate military authorities, if you are a member of the armed forces.

Uses and disclosures with your permission. RHI will not use or disclose your personal health information for any other purposes unless you give RHI your written authorization to do so. In most cases, you may revoke your written authorization at any time, unless RHI has relied upon your authorization for a continuing disclosure, for example, for a research study. Your revocation will be effective from the date RHI receives the revocation forward, for all your personal health information that RHI maintains. Authorization and Revocation forms are available at all RHI offices.

Your Rights. You may make a written request to RHI to do one or more of the following concerning your personal health information that RHI maintains:

- To put additional restrictions on RHI's use and disclosure of your personal health information. RHI does not have to agree with your request.
- To have RHI communicate with you in confidence about your personal health information by a different means or at a different location than RHIS is currently doing. Your request must be in writing specifying the alternative means or location to communicate with you.
- To see and get copies of your personal health information, except for psychotherapy notes or information for use in a civil, criminal or administrative action or proceeding (this is a federal law). You may be charged a fee for copies.
- To correct your personal health information. In some cases, RHI does not have to agree to your request.
- To receive a list of disclosures of your personal health information that RHI and its contractors made for certain purposes for the last six years, but not for disclosures made before April 14, 2003.

If you want to exercise any of these rights described in this Notice, please contact the RHI Privacy Officer at the address below. RHI will give you the necessary information and forms for you to complete and return to RHI.

Complaints. If you believe your privacy rights have been violated by RHI, you have the right to complain to RHI or to the Secretary of the U.S. Department of Health and Human Services. You may file a complaint with RHI at the address where you receive services. RHI will not retaliate against you if you choose to file a complaint with RHI or with the U.S. Department of Health and Human Services.

Privacy Officer. To request additional copies of this Notice or to receive more information about RHI's privacy practices, your rights or to file a complaint, please contact the Privacy Officer at the following address:

RHI Privacy Office  
Rural Health, Inc.  
513 North Main Street  
Anna, Illinois 62906  
Phone 618-833-4471