

NOTICE OF PRIVACY PRACTICES

Effective date: April 14, 2004; last revised August 9, 2023

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.

OUR DUTIES REGARDING YOUR CHILD'S HEALTH INFORMATION

Central Institute for the Deaf (CID) respects the confidentiality of your child's health information and recognizes that information about your child's health is personal. We are required by law to protect the privacy of protected health information and to inform you of our legal duties and your rights regarding such information. This Notice explains how, when and why we typically use and disclose health information and your privacy rights regarding your health information. Our uses and disclosures of health information are referred to in this Notice as "Privacy Practices." We are required to comply with this Notice. This Notice is effective April 14, 2004.

HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

We use and disclose your child's protected health information in a variety of circumstances and for different reasons. Many of these uses and disclosures require your prior authorization. There are situations, however, in which we may use and disclose your child's health information without your authorization. Many of these uses and disclosures will occur with treatment, for payment of health services or for our health care operations. There are additional

situations, however, where the law permits or requires us to use and disclose your health information without your authorization. Specifically, we may use and disclose your child's protected health information as follows:

For Treatment, Payment and Health Care Operations

- a) For your child's treatment. - We may use and/or disclose your child's protected health information to physicians, speech therapists, other healthcare personnel, other health professional students, parent educators, other early intervention team members and other educators who are involved in your child's care and who will provide medical treatment and/or educational services. For example, we may disclose audiologic information to a parent educator in order to coordinate the provision of developmental and speech therapy services.
- b) For payment of health services that your child receives – We may use and/or disclose protected health information to bill and receive payment for the health services that your child receives from us. For example, we may provide your child's health information to our Finance office to prepare a bill or statement to send to your insurance company, including Medicaid or another group or individual that may be responsible for payment of your health services.
- c) For our health care operations – We perform many activities to help assess and improve the services we provide. Such activities include, among others, participating in training programs or education, performing quality reviews, conducting patient opinion surveys, developing clinical guidelines and protocols, engaging in case management and care coordination, business management, insurance or legal compliance reviews or participating in accreditation surveys.

These activities are referred to as "health care operations." We may use and/or disclose health information for purposes of any of these health care operations.

For example, we may use health information to assess the scope of our services or to determine if additional health services are needed. In determining what services are needed, we may disclose health information to physicians, medical or other health or business professionals for review, consultation, comparison and planning. If we use or disclose health information in this manner, we may try to remove any information that identifies your child to protect your child's health information. Additionally, we may disclose health information to auditors, accountants, attorneys, government regulators, or other consultants to assess and/or ensure compliance with laws or to represent us before regulatory or other governing authorities or judicial bodies.

- d) For another provider's treatment, payment or health care operations – The law also permits us to disclose protected health information to another health care provider involved with your treatment to enable that provider to treat you and get paid for those services as well as for that provider's health care operations activities involving quality reviews, assessments or compliance audits.
- e) Special circumstances when we may disclose health information related to treatment, payment or health care operations – After removing direct identifying information (such as your name, address, and social security number) from the health information, we may use your child's health information for research, public health

activities or other health care operations (such as business planning). While only limited identifying information will be used, we will also obtain certain assurances from the recipient of such health information that they will safeguard the information and only use and disclose the information for limited purposes.

Additionally, we may disclose health information to outside organizations or providers in order for them to provide services to your child on our behalf. We will also seek written assurances from these providers to safeguard the health information that they receive.

For Permitted or Required by Law Activities

There are situations where we may use and/or disclose health information without first obtaining your written authorization for purposes other than for treatment, payment, or health care operations. Except for the specific situations where the law requires us to use and disclose information (such as reports of abuse or neglect to social services), we have listed all these permitted uses and disclosures in this section.

- a) For public health activities – We may use or disclose health information to a public health authority that is authorized by law to collect or receive information in order to report, among other things, communicable diseases and child abuse, or to the F.D.A. to report medical device or product related events. In certain limited situations, we may also disclose health information to notify a person exposed to a communicable disease.
- b) For health oversight activities – We may disclose health information to a health oversight agency that includes, among others,

	an agency of the federal or state government that is authorized by law to monitor the health care system.		compare your information to clinical trial requirements.		given to family or friends. Unless you tell us otherwise prior to a discussion or if your situation appears to permit us, we may disclose to a family member, other relative or close personal friend health information concerning your child’s care, including information concerning the payment for your care.	a family member or friend. We are not required to agree to your request. Additionally, any restriction that we may approve will not affect the use or disclosure that we are legally required or permitted to make under the law, including our facility directory.
c)	<u>For judicial and administrative proceedings</u> – We may disclose health information in response to a subpoena or order of a court or administrative tribunal.	f)	<u>To avoid harm to a person or for public safety</u> – We may use and disclose health information if we believe that the disclosure is necessary to prevent or lessen a serious threat or harm to the public or the health and safety of another person.		<u>All other uses and disclosures require your prior written authorization</u>	<u>Requesting confidential communications</u>
d)	<u>For law enforcement activities</u> – We may disclose limited health information in response to a law enforcement official’s request for information to identify or locate a victim, a suspect, a fugitive, a material witness or a missing person (including individuals who have died) or for reporting a crime that has occurred on our premises or that may have caused a need for emergency services.	g)	<u>For appointment reminders and to inform you of health-related products or services</u> – We may use or disclose your health information to contact you for appointments or other scheduled services, or to provide you with information about treatment alternatives or other health-related products and services.		For situations not generally described in our Notice, we will ask for your written authorization before we use or disclose your health information. You may revoke that authorization, in writing, at any time to stop future disclosures of your information. Information previously disclosed, however, will not be requested to be returned nor will your revocation affect any action that we have already taken. In addition, if we collected the information in connection with a research study, we are permitted to use and disclose that information to the extent it is necessary to protect the integrity of the research study.	You may request and receive reasonable changes in the manner or the location where we may contact you for appointment reminders, lab results or other related information. You must make your request in writing and specify the alternate method or location where you wish to be contacted and how you will handle payment for your health services. We will accommodate your reasonable request, but in determining whether your request is reasonable, we may consider the administrative difficulty it may impose on us.
e)	<u>For purposes of research</u> – We may conduct and/or participate in medical, social, and other types of research. Most research projects are subject to a special approval process to evaluate the proposed research project and its use of health information before we use or disclose health information. In certain circumstances, however, we may disclose health information to people preparing to conduct a research project to help them determine whether a research project can be carried out or will be useful, so long as the health information they review does not leave our premises. Additionally, because we are committed to advancing science and medicine, and as a part of your child’s treatment, our clinicians may offer you information about clinical research trials. To determine whether you are a candidate for certain clinical trials, our clinicians and research personnel may occasionally review your medical records and	h)	<u>For fund-raising purposes</u> – We may use or disclose demographic information, including the dates you received health care from us, to contact you to raise funds for us to continue or expand our health care activities. If you do not wish to be contacted as part of our fund-raising efforts, please contact the Contact Person listed at the end of this Notice.		<u>YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION</u>	<u>Inspecting and obtaining copies of your health information</u>
			<u>When your preferences will guide our use or disclosure</u>		This portion of our Notice describes your individual privacy rights regarding your health information and how you may exercise those rights. To exercise any of these rights, please send a written request to the Contact person listed at the end of this Notice.	You may ask to look at and obtain a copy of your health information. You must make your request in writing. We may charge a fee for copying or preparing a summary of requested health information. We will respond to your request for health information within 30 days of receiving your request unless your health information is not readily accessible or the information is maintained in an off-site storage location.
			While the law permits certain uses and disclosures without your authorization, the law also provides you with an opportunity to inform us of your preference, in certain limited situations, concerning the use or disclosure of your health information. For these limited uses and disclosures, we may simply ask and you may simply tell us your preference concerning the use or disclosure of your health information. These limited situations include the information, if any,		<u>Requesting restrictions of certain uses and disclosures of health information</u>	<u>Requesting a change in your health information</u>
					You may request, in writing, a restriction on how we use or disclose your protected health information for your child’s treatment, for payment of your health care services, or for activities related to our health care operations. You may also request a restriction on what health information we may disclose to someone who is involved in your child’s care, such as	You may request, in writing, a change or addition to your health information. The law limits your ability to change or add to your health information. These limitations include whether we created or include the health information within our medical records or if we believe that the health information is accurate and complete without any changes. Under no

circumstances will we erase or otherwise delete original documentation in your health information.

Requesting an accounting of disclosures of your health information

You may ask, in writing, for an accounting of certain types of disclosures of your health information. The law excludes from an accounting many of the typical disclosures, such as those made to care for you, to pay for your health services, or where you provided your written authorization to the disclosure. Generally, we will respond to your request within 60 days of receiving your request unless we need additional time.

Notification Following a Breach of Unsecured Protected Health Information

We will notify you within a reasonable time not to exceed 60 days, in writing, if a breach occurs that may have compromised the privacy or security of your protected health information.

Obtaining a notice of our privacy practices

We provide you with our Notice to explain and inform you of our Privacy Practices. You may also take a copy of this Notice with you. Even if you have requested this Notice electronically, you may request a paper copy at any time.

Changes to this Notice

We reserve the right to change this Notice concerning our Privacy Practices affecting all the health information that we now maintain, as well as information that we may receive in the future. We will provide you with the revised Notice by making it available to you upon request and by posting it at our service site.

Complaints

We welcome an opportunity to address any concerns that you may have regarding the privacy of your child's health information. If you believe that the privacy of your child's health information has been violated, you may file a complaint with the Contact Person listed below. You also may file a complaint with the Secretary of the U.S. Department of Health and Human Services.

YOU WILL NOT BE PENALIZED OR RETALIATED AGAINST FOR FILING A COMPLAINT.

Contact person

You may contact the Privacy Officer at the telephone number or address listed below. To look at or obtain a copy of your child's health information, you may contact the CID provider (such as the audiologist or speech-language pathologist) currently providing treatment. If you cannot contact the CID provider, you may contact the CID Privacy Officer at the telephone number or address listed below:

Privacy Officer, CID - Central Institute for the Deaf,
825 South Taylor Avenue, St. Louis, MO 63110.
Telephone 314-977-0234; Fax 314-977-0023