INFORMATION THAT DO NOT REQUIRE YOUR CONSENT

USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION

UNDERSTANDING YOUR HEALTH RECORD/INFORMATION PROTECTION OF PROTECTED HEALTH INFORMATION (PHI)

St. Luke’s may also share your medical information without your permission for the following reasons:

Payment:
- To determine eligibility or coverage, and to file a claim.
- To process or effect payment from an insurance plan to St. Luke’s or another provider.
- To bill you or someone on your behalf and to receive payment from you or another source.
- To request payment from a responsible party.

Health Care Operations:
- To conduct quality assessments of the services provided by St. Luke’s or another entity.
- To perform billing activities.
- To conduct internal departmental reviews.
- To develop, review, and evaluate its performance, programs, and activities.
- To conduct market research.
- To conduct or arrange for health care operations.
- To determine if you are eligible for Medicare.

Right to a Copy of Your Notice of Privacy Practices

In the event of your death:
- To notify proper parties of your death and burial or funeral arrangements.
- To release PHI to organ/tissue donation organizations in the event of your death.
- To release PHI to your family members or friends who are involved in your care.
- To release PHI to a coroner or medical examiner.
- To release PHI to public safety officials.
- To release PHI to a person authorized to act on your behalf, as provided by law. This includes death benefit payments.
- To release PHI to a hospital as required by law in certain circumstances, such as organ donation.
- To release PHI in response to a court order or subpoena in a judicial or administrative proceeding.

You have the right to request an accounting of certain disclosures made by St. Luke’s in the past six years.

If you wish to file a complaint, you may contact St. Luke’s Hospital Privacy Officer at the following address:

St. Luke’s Hospital Privacy Officer
E-Mail: .........slhprivacyofficer@stlukes-stl.com
Mailing Address:
St. Luke’s Hospital Privacy Officer
P.O. Box 6669
St. Louis, MO 63166

You may request a paper copy of this notice by contacting St. Luke’s Privacy Officer at the address other than your home.

TO REPORT A PRIVACY CONCERN

St. Luke’s will not retaliate against you for filing a complaint. Changes to this notice will be posted at the bedside in every patient’s room, and they will be effective for any current health information about you and to information that may be obtained in the future. Changes to this notice will be posted on our website and available at the reception desk for your review.

St. Luke’s takes the privacy and security of your information very seriously. If you believe that your privacy rights have been violated please contact St. Luke’s Privacy Officer so we may investigate and take appropriate action.

You have the right to file a complaint by writing to the Department of Health and Human Services. St. Luke’s will not retaliate against you for filing a complaint. Changes to this notice will be posted on our website and available at the reception desk for your review.

If you believe that your privacy rights have been violated please contact St. Luke’s Privacy Officer so we may investigate and take appropriate action.

You have the right to file a complaint by writing to the Department of Health and Human Services. St. Luke’s will not retaliate against you for filing a complaint.

You have the right to request access to your PHI in written form, to inspect and copy your PHI, to request amendment of your PHI and to request to limit the uses and disclosures of your PHI.

You have the right to request that St. Luke’s permit alternative uses or disclosures of protected health information that would otherwise not be permitted by law. St. Luke’s will not retaliate against you for requesting such alternative uses or disclosures.

You have the right to request that St. Luke’s make a correction to your PHI if you believe it is incorrect or incomplete. St. Luke’s will not retaliate against you for requesting such corrections.

You have the right to request that St. Luke’s provide you with an accounting of certain disclosures made by St. Luke’s during the previous six years.

You have the right to request that St. Luke’s limit the uses and disclosures of your PHI that would otherwise not be permitted by law. St. Luke’s will not retaliate against you for requesting such limitations.

You have the right to request that St. Luke’s restrict the use or disclosure of your PHI to your health plan or to another payer. St. Luke’s will not retaliate against you for requesting such restrictions.

You have the right to request that St. Luke’s restrict the use or disclosure of your PHI to another person. St. Luke’s will not retaliate against you for requesting such restrictions.

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