

Ascension St. Vincent Joint 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.

Our Commitment

We are committed to maintaining the privacy and confidentiality of your health information. This Notice describes your rights concerning your health information and how we may use and disclose (share) your information.

Who Follows This Notice

This Notice is followed by all employees (associates), medical staff, trainees, students, volunteers, contractors, vendors, agents, and workforce members of Ascension St. Vincent hospitals, ambulatory care centers, pharmacies, laboratories, physician practices, and other Ascension health care providers. Some locations may act as an Affiliated Covered Entity (ACE) for purposes of complying with the HIPAA Rules. Ascension St. Vincent also participates in an Organized Healthcare Arrangement with other Ascension locations and may use and share your information between each other for treatment, payment, and health care operations relating to these arrangements and as permitted by the HIPAA Rules. For a complete list of locations, please contact the Ascension St. Vincent Privacy Officer ("Privacy Officer") as described in this Notice.

How We May Use and Share Your Information

This Notice describes the different ways we may use and disclose (share) your health information and when we need your authorization to do so. We may contact you by phone, email, or text message at the number or address you give us. Usually we will use encrypted methods to communicate electronically with you, but some communications may be sent unencrypted, such as text messages, and by providing us with your mobile number or email you are agreeing to receive messages in that manner.

Most often we use and share your information for treatment, payment, and health care operations purposes. This means we may use and share your information, for example:

- with other health care providers who are treating you or with a pharmacy for filling your prescription.
- with your insurance plan or other payor to collect payment for health care services or to get prior approval for services or medications.
- to support our business, improve your care, educate our professionals, and evaluate provider performance.
- with our business associates, who provide services for or on our behalf, such as a billing service, who help us with our business operations. All of our business associates are required to protect the privacy and security of your health information just as we do.

We may also use or share your health information to contact you for the following reasons:

- to notify you about possible alternative treatment options, new services, opportunities to participate in research, opportunities to provide us feedback on our services, and other health-related benefits or services.
- to notify you about your care and upcoming services including appointments, refill reminders, or similar care related notifications.
- for Ascension fundraising purposes. You have the right to opt out of receiving fundraising communications by replying as noted in the communication or by contacting the Privacy Officer.

We are also allowed, and sometimes required by law, to use or share your information with certain recipients for the reasons listed below. We may have to meet certain requirements before we can use or share your information for these purposes. Some examples of each include:

- Public health and safety: reporting communicable diseases, births, or deaths; reporting abuse, neglect, or domestic violence; reporting adverse reactions to medications; avoiding a serious threat to health or safety
- Law enforcement: to identify or find a suspect, fugitive, or missing person; to report a crime at the facility
- Judicial and administrative proceedings: responding to a court or administrative order, such as a subpoena
- Workers' compensation and other government requests: workers' compensation claims or hearings; health oversight agencies for activities authorized by law; special government functions (military, national security)
- Disaster relief: sharing your location and general condition for the purpose of notifying your family or friends and agencies chartered by law to assist in emergency situations
- Comply with the law: to the Department of Health and Human Services to see if we are complying with the federal privacy law
- Research: preparing for a research study; analyzing records as part of a project approved by an Institutional Review Board (IRB) and are low risk to your privacy; studies involving only decedents' information
- Incidental to a permitted use or disclosure: calling your name in a waiting area for an appointment and others may hear your name called. We make reasonable efforts to limit these incidental uses or disclosures.
- To a funeral director, coroner, or medical examiner as needed to do their jobs
- To organizations that handle organ, tissue, or eye donations and transplantations as needed to do their jobs

We also participate in various health information exchanges, or HIEs, for the sharing of your information electronically for your care and other purposes allowed by the HIPAA Rules or required by law. Other participants of a HIE are also required to protect your information. You have the right to opt-out of your information being accessible in a HIE for all non-required by law purposes by contacting the Privacy Officer as described in this Notice.

In the following cases, we may use or share your information unless you object or if you specifically give us permission. If you are not able to give us your permission, for example if you are unconscious, we may share your information if we believe it is in your best interest.

- With your family, friends, or others involved in your care or payment for your care. For example, we may provide an update to your family on your status when you are recovering from surgery.
- For a facility directory and chaplaincy services.

In the following situations, we will only use or share your health information if you give us written permission. You can take back this permission at any time (except to the extent that we have relied on it) by contacting the Privacy Officer.

- for marketing purposes (as defined by the HIPAA Rules).
- for the sale of your information or for payments from third parties.
- certain sharing of psychotherapy notes.
- any other reasons not described in this Notice.

Our use and disclosure of certain sensitive information may also be further restricted by other federal or state laws. This includes information related to alcohol and substance abuse, genetics, mental health, and HIV/AIDS.

Your Rights

When it comes to your health information, you have certain rights. You may:

- **Access, inspect, and copy information** that we use to make decisions about your care. You have the right to inspect and obtain a paper or electronic copy. If you request a copy of the information, we may charge you a reasonable fee. We will provide a copy or a summary within 30 days (or sooner in accordance with state law) and let you know about any delay.
- **Request confidential communications.** You can ask us to communicate with you in a certain way. We will say “yes” to all reasonable requests.
- **Request a restriction.** You can ask us to limit what we use or share for treatment, payment, and healthcare operations. We are not required to agree to your request and we may say “no”. When you pay for services out-of-pocket, in full, and ask us not to share the information with your insurance plan, we will say “yes” unless a law requires us to disclose that information.
- **Request an amendment.** You can ask us to amend (make changes) to your health information if it is inaccurate or incomplete. We may say “no” to your request, but we will tell you why in writing within 60 days.
- **Get a list of who we have shared your information with.** You can ask for a list (accounting) of the times we shared your information and why up to the six years prior to your request. Not all disclosures (sharing) will be included in this list, such as those made for treatment, payment, or health care operations. We will provide one accounting free of charge, but may charge a reasonable, cost-based fee if you ask for another one within 12 months.
- **Get a copy of this Notice.** You can ask us to give you a copy (paper or electronic) of this Notice at any time or view a copy on our website at <https://healthcare.ascension.org/npp>.
- **Choose someone to act for you.** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. In some circumstances, a minor child may be able to make decisions or exercise their rights themselves.
- **File a complaint.** You can file a complaint if you feel your rights have been violated. You can contact the Privacy Officer or the U. S. Department of Health and Human Services Office for Civil Rights. You will not be penalized, discriminated against, retaliated against, or intimidated for filing a complaint.

Our Responsibilities

- We are required by law to maintain the privacy and security of your health information.
- We will notify you if a breach occurs that may have compromised the privacy or security of your identifiable health information.
- We must follow the practices described in this Notice and provide you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.
- We reserve the right to change the terms of this Notice and the changes will apply to all information we have about you.

Questions or Complaints

If you have a question or wish to exercise your rights described in this Notice, please contact the Ascension St. Vincent Privacy Officer at 250 W. 96th Street, Suite 425, Indianapolis, IN 46260, by phone at 888-395-9888, or by email at compliance.indiana@ascension.org. Most requests to exercise your rights must be made in writing. To file a complaint with the Office for Civil Rights, write to 200 Independence Avenue, S.W., Washington, D.C. 20201, call 877-696-6775, or visit www.hhs.gov/ocr/privacy/hipaa/complaints/.

This Notice is effective as of 1/1/2023.

Endoscopy Center

Patient Bill of Rights

- The patient has the right to considerate, respectful, dignified care.
- The patient has the right to obtain from his/her physician complete current information concerning his/her diagnosis, treatment and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person in his/her behalf. He/she has the right to know, by name, the physician responsible for his/her care.
- The patient has the right to receive from his/her physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to know the name of the person responsible for the procedures and/or treatment.
- The patient has the right to refuse treatment and/or to change physicians and to be informed of the medical consequences of his/her action.
- The patient has the right to every consideration of his/her privacy concerning his/her own medical care program. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. Those not directly involved in his/her care must have the permission of the patient to be present.
- The patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential.
- The patient has the right to expect that within its capacity, the Center will provide evaluation, service and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another facility only after he/she has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.
- The patient has the right to obtain information as to any relationship of this facility to other health care and educational institutions insofar as his/her care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by names, which are treating him.
- The patient has the right to be advised if the Center proposes to engage in or perform human experimentation affecting his/her care or treatment. The patient has the right to refuse to participate in such research projects.

Endoscopy Center

Patient Bill of Rights

- The patient has the right to expect reasonable continuity of care. He/she has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that this facility will provide a mechanism whereby he/she is informed by his/her physician or a delegate of the physician of the patient's continuing health care requirements following discharge.
- The patient has the right to examine and receive an explanation of his/her bill regardless of source of payment.
- The patient has the right to file a complaint to the following:

Carmel Ambulatory Surgery Center
Executive Director
13421 Old Meridian Street, Suite 100
Carmel, IN 46032
317-706-1600

Indiana Department of Health
Director of Acute Care
2 N Meridian
Indianapolis, IN 46204
317-233-1325

Medicare Beneficiary Ombudsman

<http://www.cms.hhs.gov/ombudman/resources.asp>

Patient Responsibility

It is the patient's responsibility to fully participate in decisions involving his/her own health care and to accept the consequences of these decisions if complications occur.

The patient is expected to follow up on his/her doctor's instructions, take medications when prescribed, and ask questions concerning his/her own health care that he/she feels is necessary.

The patient is expected to provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.

Provide a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours, if required by his/her provider.

Inform his/her provider about any living will, medical power of attorney, or other directive that could affect his/her care. (The Advance Directives will be temporarily suspended while the patient is in the facility.)

The patient accepts personal financial responsibility for any charges not covered by his/her insurance.

The patient is expected to be respectful of all health care providers and staff, as well as other patients.

Endoscopy Center has physician ownership.



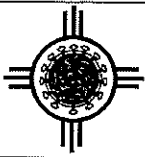
ADVANCE DIRECTIVES

Patients are expected to be in general good health and/or in stable health condition prior to surgery with an expectation they will be released after their procedure. In the event of a medical emergency, based on organization conscience, resuscitation will be attempted prior to transferring patient to a hospital. Should a copy of the patient's Advance Directive be provided to us, this will be sent with the patient to the hospital.

If you have any questions please do not hesitate to discuss them with the Endoscopy Center Staff.

STATEMENT OF OWNERSHIP

The Endoscopy Center has Physician Ownership.



HIV TESTING

WHAT IS HIV TESTING?

HIV testing tells you if you are infected with the Human Immunodeficiency Virus (HIV) which causes AIDS. Most of these tests look for "antibodies" to HIV. Antibodies are proteins produced by the immune system to fight a specific germ. Other types of HIV test look for signs that the virus itself is in the blood.

When people already know they are infected with HIV they might get other "HIV" tests. These measure how quickly the virus is multiplying (a viral load test, see fact sheet 125) or the strength of your immune system (a CD4 count, see fact sheet 124).

HOW DO I GET TESTED?

You can arrange for HIV testing at any Public Health office, or at your doctor's office. Test results are usually available within two weeks. In the US, call the National AIDS Hotline, (800) 342-2437.

The most common HIV test is a blood test. Newer tests can detect HIV antibodies in mouth fluid (not the same as saliva), a scraping from inside the cheek, or urine. "Rapid" HIV test results are available within 10 to 30 minutes after a sample is taken. In November 2010 the FDA approved the INSTI test, which gives results within 60 seconds. **A positive result on any HIV test should be confirmed with a second test.**

Home test kits: You can't test yourself for HIV at home. The "Home Access" test kit is only designed to collect a sample of your blood. You send the sample to a laboratory where it is tested for HIV.

WHO SHOULD GET TESTED?

Many people are infected with HIV but don't know it. You might not feel sick or have any health problems. But you can still pass HIV to other people. **Anyone who is sexually active should get tested regularly for HIV.**

WHEN SHOULD I GET TESTED?

If you are infected with HIV, it usually takes from three weeks to two months for your immune system to produce HIV antibodies. During this "window period" you can test "negative" for HIV even if you are infected. If you think you were exposed to HIV, you should wait for two months before being tested. You can also test right away and then again after two or three months. If you are infected, you can transmit HIV to others during the window period even if you test negative.

About 5% of people take longer than two months to produce antibodies. Testing at 3

and 6 months after possible exposure will detect almost all HIV infections. However, **there are no guarantees** as to when an individual will produce enough antibodies to be detected by an HIV test. **If you have any unexplained symptoms, talk with your health care provider and consider re-testing for HIV.**

DO ANY TESTS WORK SOONER AFTER INFECTION?

Viral load tests detect pieces of HIV genetic material. They show up before the immune system manufactures antibodies. There is also "nucleic acid testing." It is similar to viral load testing. Blood banks use it to screen donated blood.

The viral load or nucleic acid tests are generally not used to see if someone has been infected with HIV because they are much more expensive than an antibody test. They also have a slightly higher error rate.

In 2010 the FDA approved a new blood test that detects both antibodies to HIV and HIV antigens (pieces of the virus.) This test will produce results faster than an antibody test.

WHAT DOES IT MEAN IF I TEST POSITIVE?

A positive test result means that you have HIV antibodies, and are infected with HIV. This can be a very difficult time. Be sure to get information and help. See Fact sheet 201, "How Do I Start?"

Testing positive does **not** mean that you have AIDS (See Fact Sheet 101, What is AIDS?) Many people who test positive stay healthy for several years, even if they don't start taking medication right away.

If you test negative six months after you think you were exposed to HIV and if there is no chance you were exposed to HIV since then, you are not infected with HIV. Continue to protect yourself from HIV infection (See Fact Sheet 103, Stopping the Spread of HIV).

ARE THE TEST RESULTS CONFIDENTIAL?

You can be tested **anonymously** in many places. You do not have to give your name when you are tested at a public health office, or when you receive the test results. You can be tested anonymously for HIV as many times as you want.

If you get a positive HIV test that is not anonymous, or if you get any medical services for HIV infection, your HIV infection may be

reported to the Department of Health and counted in statistical reports.

HOW ACCURATE ARE THE TESTS?

Antibody test results for HIV are accurate more than 99.5% of the time. Before you get the results, the test has usually been done two or more times. The first test is called an "EIA" or "ELISA" test. Before a positive ELISA test result is reported, it is confirmed by another test called a "Western Blot". This is why home test kits cannot tell you if you have HIV infection. The sample you collect must be tested by a laboratory.

Some special cases can give false or unclear results:

- **Children born to HIV-positive mothers** may have false positive antibody test results for several months because mothers pass many types of infection-fighting antibodies to their newborn children. Even if the children are not infected, they have HIV antibodies and will test positive for about 18 months. Other tests, such as a viral load test, must be used.
- **People who were recently infected** may test negative during the window period if they get tested too soon after being infected with HIV.
- **Pregnant women** may have false or unclear test results due to changes in their immune system.

In rare cases, HIV test results can be unclear or "indeterminate." Another blood sample is taken for additional testing.

THE BOTTOM LINE

HIV testing generally looks for HIV antibodies in the blood, saliva or urine. The immune system produces these antibodies to fight HIV. It usually takes two to three months for them to show up. In rare cases, it can take longer than three months. During this "window period" you may not test positive for HIV even if you are infected. Normal HIV tests don't work for newborn children of HIV-infected mothers.

In many places, you can get tested anonymously for HIV. Once you test positive and start to receive health care for HIV infection, your name may be reported to the Department of Health. These records are kept confidential.

A positive test result does not mean that you have AIDS. If you test positive, you should learn more about HIV and decide how to take care of your health.

Revised December 3, 2010