

2. Your Rights As a patient, you have certain rights related to your personal health information. The following information explains how you may exercise these rights.

A. You have the right to inspect and copy your personal health information. This means you may inspect and obtain a copy of personal health information about you that is contained in a designated record set for as long as we maintain the personal health information. A “designated record set” contains medical and billing records and any other records that is used for making decisions about you. You must submit a written request to the Privacy Officer to inspect or copy your personal health information. We have the right to charge you a reasonable fee for a copy of your medical record.

Under law, however, you may not inspect or copy the following records: (1) psychotherapy notes that are maintained separately from your medical record; (2) information compiled in reasonable anticipation of, or use in, a civil, criminal, or administrative action or proceeding; and (3) personal health information that is subject to law that prohibits access to personal health information. Depending on the circumstances, a decision to deny access may be reviewable. In some circumstances, you may have a right to have this decision reviewed. Please contact the Privacy Officer if you have questions about access to your medical record.

B. You have the right to request a restriction of your personal health information. This means you may ask us not to use or disclose any part of your personal health information for the purposes of treatment, payment or healthcare operations. You may also request that any part of your personal health information not be disclosed to family members or friends who may be involved in your care or for notification purposes as described in this Notice of Privacy Practices. Your request must state the specific restriction requested and to whom you want the restriction to apply.

We are not required to agree to a restriction that you may request, unless you request that we restrict disclosures to a health plan for payment or other healthcare operations purposes, the disclosure is not otherwise required by law, and the information pertains solely to a health care item or service you have fully paid for out of pocket. If we believe it is in your best interest to permit use and disclosure of your personal health information, your personal health information will not be restricted. If we agree to a restriction requested by you, we may not use or disclose your personal health information in violation of that restriction unless it is needed to provide emergency treatment. We may terminate its agreement to a restriction by providing you with written notice. Requests for restrictions must be submitted in writing to the Privacy Officer.

C. You have the right to request to receive confidential communications from us by alternative means or at an alternative location. We will accommodate reasonable requests to receive confidential communications of your personal health information. We may condition this accommodation by asking you for information as to how payment will be handled or to specify an alternative address or other method of contact. We will not request an explanation from you as to the basis for the request. Please make this request in writing to the Privacy Officer.

D. You may have the right to amend your personal health information. This means you may request an amendment of personal health information about you in a designated record set for as long as we maintain this information. In certain cases, we may deny your request for an amendment. If we deny your request for amendment, you have the right to file a statement of disagreement with us and we may prepare a response to your statement and will provide you with a copy of our response. Please contact the Privacy Officer to determine if you have questions about amending your medical record.

E. You have the right to receive an accounting of certain disclosures we have made, if any, of your personal health information. This right applies to disclosures for purposes other than treatment, payment or healthcare operations as described in this Notice of Privacy Practices. It excludes disclosures made prior to April 14, 2003 and disclosures we make after April 14, 2003 that are (1) pursuant to an authorization; (2) to you, (3) to family members or friends involved in your care, (4) incidental to other permitted disclosures, (5) for national security purposes, (6) for inmates to correctional institutions, (7) part of a limited data set that does not include any direct identifiers and that is subject to an agreement that protects the confidentiality of the personal health information, or (8) for notification purposes. You have the right to receive specific information regarding these disclosures that occur after April 14, 2003 for a period of up to six (6) years. You may request a shorter timeframe. The right to receive this information is subject to certain exceptions, restrictions and limitations.

F. You have the right to obtain a paper copy of this notice from us. Even if you have agreed to accept this notice electronically, we will furnish a copy of this Notice of Privacy Practices upon request. We will also notify you if there has been a breach of your personal health information in a way that would compromise the information.

3. Complaints. You may submit a complaint to us if you believe your privacy rights have been violated by us. You may file a complaint with us by notifying the individual identified above of your complaint. We will not retaliate against you for filing a complaint. You may contact us about the complaint process.

You also have the right to submit a complaint to the United States Secretary of Health and Human Services if you believe your privacy rights have been violated by us.

Notice of Privacy Practices

Acknowledgement and Consent

Our Notice of Privacy Practices provides information about how we may use and disclose protected health information about you. You have the right to review our notice before signing this form. By signing this form, you acknowledge receipt of this Notice of Privacy Practices.

By signing this form, you also consent to Kindred at Home's use and disclosure of your medical records and protected health information for purposes permitted by applicable state and federal law, including but not limited to treatment and payment.

Patient Name

Name of Personal Representative
(If Applicable)

Patient Signature

Signature of Personal Representative
(If Applicable)

Description of Personal
Representative's Authority
(If applicable):

Date

**STATE LAW ADDENDUM
Policy 2-012.B**

PURPOSE

To supplement Policy No. 2-015 (Uses and Disclosures of PHI) and the Notice of Privacy Practices regarding additional or more stringent state laws concerning use and disclosure of patient information.

POLICY

The Health Insurance Portability and Accountability Act and its associated regulations ("HIPAA") requires that the organization follow certain state law requirements concerning use and disclosure of PHI, to the extent such state law is more stringent than HIPAA's requirements. The state law requirements listed below shall apply and supersede a use and/or disclosure otherwise specified in Policy 2.015 (Uses and Disclosures of PHI) or the Notice of Privacy Practices.

Alabama

Alabama hospice licensing regulations restrict the disclosure of patient medical records.

- The Organization may not disclose PHI relating to a hospice patient without the patient's consent, unless the disclosure is:
 - (1) To the patient.
 - (2) To designated team members, physicians, and others having professional responsibility for the patient.
 - (3) To representatives of the Alabama State Board of Health.
 - (4) To persons designated by the patient.
 - (5) To another health care institution in connection with the patient's transfer.
 - (6) As required under any third-party payment contract.
 - (7) As required by law. Ala. Admin Code r. 420-5-17.04(1)(h) and 420-5-17.18(1).

Arizona**A. Communicable Diseases**

Arizona law restricts the disclosure of information relating to a communicable disease obtained by the Organization in the course of providing a health service, or obtained by the Organization from a health care provider pursuant to a patient's authorization ("Communicable Disease Information").

- A communicable disease is a contagious, epidemic, or infectious disease that the Organization is required to report to the local board of health or the Arizona Department of Health Services. Ariz. Rev. Stat. § 36-661.

Except for the disclosures described below, the Organization may only disclose Communicable Disease Information pursuant to the patient's written authorization. Ariz. Rev. Stat. 36-664(A)(13).

- An authorization to disclose Communicable Disease Information must be signed by the patient or, if the patient lacks capacity to consent, the patient's health care decision maker. The authorization must be dated and specify to whom disclosure is authorized, the purpose for the disclosure, and the time period during which the authorization is effective.
- A general authorization for the disclosure of medical or other information, including Communicable Disease Information, is not an authorization for the disclosure of HIV-related information unless the authorization specifically indicates its purpose as an authorization for the disclosure of confidential HIV-related information. Ariz. Rev. Stat. § 36-664(F).

The Organization may disclose Communicable Disease Information without the patient's authorization to the following persons or entities:

- (1) The patient, or, if the patient lacks capacity to consent, the patient's health care decision maker.
- (2) The Arizona Department of Health Services or a local health department for purposes of notifying a person who renders emergency care or assistance in good faith and without compensation at the scene of an accident, fire, or other life-threatening emergency and who believes that a significant exposure risk occurred while the person rendered care or assistance.
- (3) An agent or employee of a health care provider for purposes of providing health services to the patient or the patient's child, or for billing or reimbursement for health services.
- (4) A health care provider in connection with the procurement, processing, distributing or use of a human body or a human body part, including organs, tissues, eyes, bones, arteries, blood, semen, milk or other body fluids, for use in medical education, research or therapy or for transplantation to another person.
- (5) A health care provider, or an organization, committee, or individual designated by the health care provider, which is engaged in the review of professional practices, including the review of the quality, utilization or necessity of medical care, or an accreditation or oversight review organization responsible for the review of professional practices of a health care provider.
- (6) A private entity that accredits the Organization and with whom the Organization has an agreement to protect the confidentiality of patient information.
- (7) A federal, state, county or local health officer if disclosure is mandated by federal or state law.
- (8) A federal, state or local government agency authorized by law to receive the information.

- (9) An authorized employee or agent of a federal, state or local government agency that supervises or monitors the Organization or administers the program under which the health service is provided.
- (10) Any person or health care provider pursuant to an order of a court or administrative body under Ariz. Rev. Stat. § 36-665.
- (11) The Arizona Industrial Commission or parties to an Industrial Commission claim pursuant to Ariz. Rev. Stat. § 23-908, subsection D and Ariz. Rev. Stat. § 23-1043.02.
- (12) Insurance entities pursuant to Ariz. Rev. Stat. § 20-448.01 and third party payors or the payors' contractors.
- (13) A person or entity as required by federal law.
- (14) The legal representative of the Organization in order to secure legal advice.
- (15) A person or entity for research purposes, but only if the research is conducted pursuant to applicable federal or state laws and regulations governing research.
- (16) A business associate with whom the Organization has entered into a HIPAA-compliant business associate agreement. Ariz. Rev. Stat. § 36-664(A).

The Organization may list Communicable Disease Information, including AIDS, HIV-related illness, and HIV infection information, in any certificate of death, autopsy report or other related document that is prepared pursuant to law for purposes of documenting the patient's cause of death, or that is prepared to release a body to a funeral director. Ariz. Rev. Stat. § 36-664(H).

If the Organization reasonably believes that an identifiable third party is at risk of HIV infection, the Organization may report that risk to the Arizona Department of Health Services. The report must be in writing and include the name and address of the third party and the name and address of the Organization. Ariz. Rev. Stat. § 36-664(I).

B. Genetic Testing Information

Arizona law restricts the disclosure of genetic testing information. A "genetic test" is a test of a person's genes, genetic sequence, gene products or chromosomes for abnormalities or deficiencies, including carrier status, that:

- (a) are linked to physical or mental disorders or impairments;
- (b) indicate a susceptibility to any illness, disease, impairment or other disorder, whether physical or mental; or
- (c) demonstrate genetic or chromosomal damage due to any environmental factor.

Genetic tests do not include:

- (a) chemical, blood and urine analyses that are widely accepted and used in clinical practice and that are not used to determine genetic traits;
- (b) tests used in a criminal investigation or prosecution or as a result of a criminal conviction;
- (c) tests for the presence of HIV;
- (d) tests to determine paternity; or
- (e) tests given for use in biomedical research that is conducted to generate scientific knowledge about genes or to learn about the genetic basis of disease or for developing pharmaceutical and other treatment of disease. Ariz. Rev. Stat. § 12-2801.

The Organization may disclose genetic testing information about a patient only to the following persons:

- (1) The patient.
- (2) Any person who is specifically authorized in writing by the patient or by the patient's health care decision maker.
- (3) The health care decision maker of the patient.
- (4) A researcher for medical research or public health purposes, but only if the research is conducted pursuant to applicable federal and state laws and regulations, or if the identity of the patient is not disclosed.
- (5) A third party, if approved by a human subjects review committee or a human ethics committee, with respect to persons who are subject to an Arizona cancer registry.
- (6) An authorized agent or employee of a health care provider if: (a) the health care provider performs the test or is authorized to obtain the test results by the person tested for the purposes of genetic counseling or treatment; (b) the agent or employee provides patient care, treatment, or counseling; and (c) the agent or employee needs to know the information in order to conduct the test or provide patient care, treatment, or counseling.
- (7) A health care provider that procures, processes, distributes or uses: (a) a human body part from a deceased person with respect to medical information regarding that person; or (b) semen or ova for the purpose of artificial insemination.
- (8) A health care provider for purposes of conducting utilization review, peer review and quality assurance.
- (9) The authorized agent of a federal, state, or county health department to conduct activities specifically authorized pursuant to the laws of Arizona for the birth defects registry, children's rehabilitative services, newborn screening and sickle cell diagnosis and treatment programs and chronic, environmentally provoked and infectious disease programs.
- (10) The legal representative of the Organization in order to secure legal advice.
- (11) A health care provider that assumes the responsibility to provide care for, or consultation to, the patient from another health care provider that had access to the patient's genetic records. Ariz. Rev. Stat. § 12-2802.

Florida**A. Hospice Licensing Statute**

Florida hospice licensing regulations restrict the disclosure of patient records.

- The Organization may not disclose PHI relating to a hospice patient unless:
 - (1) The patient or the patient's legal guardian has given express written informed consent for the disclosure.
 - (2) A court orders the disclosure.
 - (3) A state or federal agency requires submission of aggregate statistical data. Fla. Stat. § 400.611(3).

B. Home Health Licensing Regulations

Florida home health licensing regulations restrict the disclosure of information relating to patients receiving nursing or therapy services.

- The Organization may not disclose such information without the written consent of the patient or the patient's guardian. Fla. Admin. Code. Ann. r. 59A-8-022(2).

C. Genetic Testing

The Organization may not disclose "DNA analysis" information without the consent of the person tested. Fla. Stat. § 760.40(2)(a).

- The term "DNA analysis" means the medical and biological examination and analysis of a person to identify the presence and composition of genes in that person's body.
- The term includes DNA typing and genetic testing. Fla. Stat. § 760.40(1).

D. HIV/AIDS

Florida law restricts the disclosure of "HIV test results."

- The term "HIV test results" is defined as a laboratory report of an HIV test entered into a medical record on or after July 6, 1988, or any report or notation in a medical record of a laboratory report of an HIV test.
- The term does not include test results reported to the Organization by a patient. Fla. Stat. § 381.004(1)(b).

The Organization may not disclose the identity of any patient upon whom an HIV test is performed or the HIV test results in a manner that would permit identification of the patient, except to the following persons or entities:

- (1) An authorized agent or employee of a health care provider if the provider itself is authorized to obtain the test results, the agent or employee participates in the administration or provision of patient care or handles or processes specimens of body fluids or tissues, and the agent or employee has a need to know such information.
- (2) Health care providers consulting between themselves or with health care facilities to determine diagnosis and treatment.
- (3) The patient or the patient's legally authorized representative.
- (4) Any person, including third-party payors, designated by the patient in a legally effective authorization.

- (5) The Florida Department of Health, in accordance with rules for reporting and controlling the spread of disease, as otherwise provided by state law.
- (6) A health care provider that procures, processes, distributes, or uses: (a) a human body part from a deceased person, with respect to medical information regarding that person; or (b) semen provided prior to July 6, 1988, for the purpose of artificial insemination.
- (7) Health facility staff committees, for purposes of conducting program monitoring, program evaluation, or service reviews
- (8) Authorized medical or epidemiological researchers.
- (9) Any person allowed access by a court order issued in compliance with Fla. Stat. § 381.004(2)(e)(9).
- (10) Any person allowed access by order of a judge of compensation claims of the Florida Division of Administrative Hearings.
- (11) Employees of the Florida Department of Health or of child-placing or child-caring agencies or of family foster homes who are directly involved in the placement, care, control, or custody of the patient and who have a need to know the information; adoptive parents of the patient; and any adult custodian, adult relative, or person responsible for the patient's welfare, if the patient was tested without the consent of a legal guardian and if a reasonable attempt has been made to locate and inform the legal guardian of the test results.
- (12) Employees of residential facilities or of community-based care programs that care for developmentally disabled persons, who are directly involved in the care, control, or custody of the patient and who have a need to know the information.
- (13) A health care provider involved in the delivery of a child for purposes of noting the mother's HIV test results in the child's medical record.
- (14) Medical personnel or nonmedical personnel who have been subject to a significant exposure during the course of medical practice or in the performance of professional duties. Fla. Stat. § 381.004(2)(e).

Any disclosure described above must be accompanied by the following written notice:

This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of such information without the specific written consent of the person to whom such information pertains, or as otherwise permitted by state law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

An oral disclosure shall be accompanied by oral notice and followed by written notice within 10 days. Fla. Stat. § 381.004(2)(f).

E. Mental Health

Florida law restricts the disclosure of information relating to patients with mental illness ("Mental Health Information").

- The term "mental illness" is defined as an impairment of the mental or emotional processes that exercise conscious control of one's actions or of the ability to perceive or understand reality, which impairment substantially interferes with a person's ability to meet the ordinary demands of living, regardless of etiology. Fla. Stat. § 394.455(18).

The Organization may not disclose Mental Health Information, unless:

- (1) The patient or the patient's guardian authorizes the disclosure.
- (2) The patient is represented by legal counsel and the information is needed by the patient's counsel for adequate representation.
- (3) A court orders the disclosure.
- (4) The patient is committed to, or is to be returned to, the Florida Department of Corrections from the Florida Department of Children and Family Services, and the Department of Corrections requests such information.
- (5) The patient has declared an intention to harm other persons. The Organization may only disclose sufficient information to provide adequate warning to the person threatened with harm.
- (6) The Organization deems the disclosure to a qualified researcher, aftercare treatment provider, or the Florida Department of Children and Family Services necessary for treatment of the patient, maintenance of adequate records, compilation of treatment data, aftercare planning, or evaluation of programs. Fla. Stat. 394.4615(2) and (3).

Georgia**A. Genetic Testing**

Georgia law restricts the disclosure of genetic testing information.

- The term "genetic testing" is defined as laboratory tests of human DNA or chromosomes for the purpose of identifying the presence or absence of inherited alterations in genetic material or genes that are associated with a disease or illness that is asymptomatic at the time of testing and that arises solely as a result of such abnormality in genes or genetic material.
- The term does not include:
 - (a) routine physical measurements;
 - (b) chemical, blood, and urine analysis;
 - (c) tests for abuse of drugs; or
 - (d) tests for the presence of HIV. Ga. Code Ann. § 33-54-2(1).

The Organization may not disclose any information derived from genetic testing, except as follows:

- (1) The Organization may disclose genetic testing information to the patient tested or persons specifically authorized by the patient. Ga. Code Ann. § 33-54-3(b).
- (2) The Organization may disclose the identity of an individual who is the subject of a criminal investigation or a criminal prosecution to appropriate legal authorities conducting the investigation or prosecution. Ga. Code Ann. § 33-54-5.

B. HIV/AIDS

Georgia law restricts the disclosure of any information that discloses that a person:

- (a) has been diagnosed as having AIDS;
- (b) has been or is being treated for AIDS;
- (c) has been determined to be infected with HIV;
- (d) has submitted to an HIV test;
- (e) has had a positive or negative result from an HIV test;
- (f) has sought and received counseling regarding AIDS; or
- (e) has been determined to be a person at risk of being infected with AIDS;

and which permits the identification of that person ("HIV Information"). Ga. Code Ann. § 31-22-9.1(a)(2).

The Organization may not disclose HIV Information relating to a patient, except as follows:

- (1) HIV Information may be disclosed to the patient or, if the patient is a minor or incompetent person, to the patient's parent or legal guardian. Ga. Code Ann. § 24-12-21(c).
- (2) HIV Information may be disclosed pursuant to the patient's written authorization or, if the patient is a minor or incompetent person, the written authorization of the patient's parent or legal guardian. Ga. Code Ann. § 24-12-21(d).
- (3) The Organization may be disclose HIV Information to any agency or department of the federal government, the state of Georgia, or any political subdivision of the state of Georgia, if required or authorized by law. Ga. Code Ann. § 24-12-21(e).
- (4) The results of an HIV test may be disclosed to the person who ordered the test. Ga. Code Ann. § 24-12-21(f).

- (5) If the patient is infected with HIV and the patient's physician reasonably believes that the spouse or sexual partner or any child of the patient, spouse, or sexual partner is at risk of being infected with HIV, the physician may notify the spouse, sexual partner, or child that the patient is infected with HIV, but only after first attempting to notify the patient that such disclosure is going to be made. Ga. Code Ann. § 24-12-21(g).
- (6) If the patient is infected with HIV, a physician may disclose to the Florida Department of Community Health the name and address of that patient; that such patient has been determined to be infected with HIV; and the name and address of any other person whom the disclosing physician reasonably believes to be at risk of being infected with HIV by that patient. Ga. Code Ann. § 24-12-21(h).
- (7) Any health care provider authorized to order an HIV test may disclose HIV Information if the disclosure is made to a health care provider that has provided, is providing, or will provide any health care service to the patient and: (a) has personnel or patients who may be at risk of being infected with HIV by that patient, if the disclosure is reasonably necessary to protect any such personnel or patients from that risk; or (b) has a legitimate need for that information in order to provide health care services to the patient. Ga. Code Ann. § 24-12-21(i).

Kentucky

Kentucky law restricts the disclosure of information related to HIV test results.

- An HIV test is any test designed to reveal a condition indicative of HIV infection, antibodies to HIV, or infection with any probable causative agent of AIDS. Ky. Rev. Stat. Ann. § 210.625(2).
- The Organization may not disclose the identity of a patient upon whom an HIV test has been performed or the results of an HIV test in a manner which permits identification of the patient, except to the following persons or entities:
 - (1) The patient or the patient's legally authorized representative.
 - (2) Any person designated by the patient or the patient's authorized representative in a legally effective authorization.
 - (3) A health care provider who has a legitimate need to know the test result in order to provide for his or her protection and to provide for the patient's health and welfare.
 - (4) Health care providers consulting between themselves or with health care facilities to determine diagnosis and treatment.
 - (5) The Kentucky Cabinet for Health and Family Services, in accordance with rules for reporting and controlling the spread of disease, as otherwise provided by state law.
 - (6) A health care provider that procures, processes, distributes, or uses: (a) a human body part from a deceased person, with respect to medical information regarding that person; or (b) semen provided prior to July 13, 1990, for the purpose of artificial insemination.
 - (7) Health facility staff committees, for purposes of conducting program monitoring, program evaluation, or service reviews.
 - (8) Authorized medical or epidemiological researchers.
 - (9) A parent, foster parent, or legal guardian of a minor; a crime victim; or a person specified in Ky. Rev. Stat. Ann. § 438.250.
 - (10) A person allowed access by a court order that is issued in compliance with Ky. Rev. Stat. Ann. § 210.625(5)(c)(10). Ky. Rev. Stat. Ann. § 210.625(5)(c)(10).

All disclosures described above must be accompanied by the following written statement:

This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of such information without the specific written consent of the person to whom such information pertains, or as otherwise permitted by state law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

An oral disclosure must be accompanied by oral notice and followed by written notice within 10 days. Ky. Rev. Stat. Ann. § 210.625(5)(c)(10).

Missouri**A. Genetic Testing**

Missouri law restricts the disclosure of "genetic information."

- Genetic information is defined as the results of any "genetic test." A genetic test is a laboratory test of human DNA or RNA used to identify the presence or absence of inherited alterations in the DNA or RNA which cause predisposition to disease or illness. Mo. Rev. Stat. § 375.1300(4).
- The term genetic test does not include routine physical measurements and examinations, routine tests performed as part of a physical examination, chemical, blood or urine analysis, cholesterol tests, tests for the presence of HIV, a test for drugs, or tests commonly accepted in clinical practice at the time.
- Genetic information does not include family history, the results of routine physical measurements, or the results of chemical, blood, urine analysis, or the results of tests for drugs or the presence of HIV, or from results of any other tests commonly accepted in clinical practice at the time. Mo. Rev. Stat. § 375.1300(3).

The Organization may not disclose genetic information, unless:

- (1) The disclosure is made pursuant to the written authorization of the patient or the patient's authorized representative.
- (2) The disclosure consists of statistical data compiled without reference to the identity of the patient.
- (3) The disclosure is for purposes of health research conducted in accordance with federal law or that does not identify the patient.
- (4) The disclosure is made pursuant to legal or regulatory process.
- (5) The disclosure is for purposes of body identification. Mo. Rev. Stat. § 375.1309.1.

B. HIV/AIDS

Missouri law restricts the disclosure of information concerning an individual's HIV infection status or the results of any individual's HIV testing ("HIV Information").

- The Organization may not disclose HIV Information, except to the following persons or entities:
 - (1) Public employees who need the information to perform their public duties.
 - (2) Peace officers (as defined in Mo. Rev. Stat. § 590.100), the attorney general or any assistant attorneys general acting on his or her behalf (as defined in Chapter 27 of the Missouri Revised Statutes), and prosecuting attorneys or circuit attorneys (as defined in Chapter 56 of the Missouri Revised Statutes), pursuant to Mo. Rev. Stat. § 191.657.
 - (3) Persons other than public employees who are entrusted with the regular care of individuals under custody of a state agency (such operators of day care facilities, group homes, residential care facilities, and adoptive or foster parents).
 - (4) The Missouri Department of Health and Senior Services.
 - (5) Health care personnel working directly with the patient who reasonably need to know the results for purposes of providing direct patient care.
 - (6) Any person authorized in writing by the patient.
 - (7) The patient's spouse.
 - (8) The patient.

- (9) The parent or legal guardian or custodian of the patient, if he is an un-emancipated minor.
- (10) The victim of any sexual offense (as defined in Chapter 566 of the Missouri Revised Statutes) that includes sexual intercourse or deviate sexual intercourse as an element of the crime, in which a court orders the defendant to be tested for HIV, hepatitis B, hepatitis C, syphilis, gonorrhea, or Chlamydia, once the charge is filed.
- (11) The victim of an offense under Mo. Rev. Stat. § 566.135, in which the court orders the defendant to be tested for HIV, hepatitis B, hepatitis C, syphilis, gonorrhea, or Chlamydia, once the charge is filed.
- (12) Employees of a state licensing board in the execution of their duties in connection with disciplinary action taken by the licensing board. Mo. Rev. Stat. § 191-656.

North Carolina

North Carolina law restricts the disclosure of information and records that identify a person who has HIV/AIDS, or who has or may have a disease or condition required to be reported to the North Carolina Department of Public Health ("Communicable Disease Information").

- The Organization may not disclose Communicable Disease Information, except under the following circumstances:
 - (1) The Organization may disclose specific medical or epidemiological information for statistical purposes in a way that no person can be identified.
 - (2) Disclosure is made pursuant to the written consent of the patient or the patient's guardian.
 - (3) Disclosure is made for purposes of treatment, payment, research, or health care operations, as such terms are defined under HIPAA.
 - (4) Disclosure is necessary to protect the public health and is made in accordance with North Carolina regulations regarding control measures for communicable diseases and conditions.
 - (5) Disclosure is made pursuant to subpoena or court order.
 - (6) The Organization may disclose Communicable Disease Information to the North Carolina State Health Director or a local health director, if such information relates to:
 - (a) diagnosis, treatment, or prevention of a communicable disease or communicable condition for a person infected, exposed, or reasonably suspected of being infected or exposed to such a disease or condition; or
 - (b) the investigation of a known or reasonably suspected outbreak of a communicable disease or communicable condition.
 - (7) Disclosure is made pursuant to any other provisions of law that specifically authorize or require the disclosure of information or records related to AIDS. N.C. Gen. Stat. § 131A-143.

South Carolina

A. Prescription Information

South Carolina law restricts the disclosure of "patient prescription drug information."

- Patient prescription drug information is data that is conveyed by or on behalf of a health care provider in ordering a prescription drug or device and that identifies the patient as the recipient of the prescription drug or device. The term also includes any data concerning the dispensing of a drug or device that identifies a patient as having been the recipient of a prescription drug or device. S.C. Code Ann. § 44-117-20.
- The Organization may not disclose patient prescription drug information without the written consent of the patient or a person authorized by law to act on behalf of the patient, except that this prohibition does not apply to:
 - (1) The lawful transmission of a prescription drug order in accordance with all state and federal laws pertaining to the practice of pharmacy.
 - (2) Communications among licensed health care providers who provide or have provided medical or therapeutic treatment, pharmacy service, or medical or therapeutic consultation service for the patient.
 - (3) Information gained as a result of a person requesting informational material from a prescription drug or device manufacturer or vendor.
 - (4) Information necessary to effect the recall of a defective drug or device or other information necessary to protect the health and welfare of an individual or the public generally.
 - (5) Any disclosure mandated by state or federal law, court order, or subpoena, or accreditation or licensure requirements.
 - (6) Information necessary to adjudicate or process payment claims for health care.
 - (7) Information used in clinical research monitored by an institutional review board.
 - (8) Information that does not identify patients and that is used for epidemiological studies, research, statistical analysis, medical outcomes, or pharmaco-economic research.
 - (9) Information transferred in connection with the sale of a business or medical practice to a successor in interest.
 - (10) Information necessary to perform quality assurance programs, medical records review, internal audits, medical records maintenance, or similar programs.
 - (11) Any disclosure to a third party who obtains a prescription from a pharmacy on behalf of the patient.
 - (12) Information necessary for a health plan licensed by the South Carolina Department of Insurance to perform case management, utilization management, and disease management for individuals enrolled in that health plan. S.C. Code Ann. § 44-117-30.

B. Genetic Information

South Carolina law restricts the disclosure of "genetic information."

- The term "genetic information" includes an individual's genetic tests, genetic tests of the individual's family members, and manifestation of a disease or disorder in family members of the individual. The term also includes, with respect to an individual, a request for, or receipt of, genetic services or participation in clinical research which includes genetic services by the individual or a family member of the individual.
 - "Genetic Information" does not include information about the sex or age of an individual.

- "Genetic test" means an analysis of human DNA, RNA, chromosomes, proteins, or metabolites that detects genotypes, mutations or chromosomal changes.
 - The term does not include: (a) an analysis of proteins or metabolites that does not detect genotypes, mutations, or chromosomal changes; or (b) an analysis of proteins or metabolites that is directly related to a manifested disease, disorder, or pathological condition that reasonably could be detected by a health care professional with appropriate training and expertise in the field of medicine involved. S.C. Code Ann. § 38-93-10.

The Organization may not disclose genetic information to a third party in a manner that allows for identification of the patient without first obtaining the written informed consent of the patient or a person legally authorized to consent on behalf of the patient, except that genetic information may be disclosed without consent:

- (1) As necessary for the purpose of a criminal or death investigation, a criminal or judicial proceeding, an inquest, or a child fatality review, or for purposes of the South Carolina State DNA Database.
- (2) To determine the paternity of a person pursuant to S.C. Code Ann. § 63-17-30.
- (3) Pursuant to court order specifically ordering disclosure of the genetic information.
- (4) Where genetic information concerning a deceased individual will assist in medical diagnosis of blood relatives of the decedent.
- (5) To a law enforcement or other authorized agency for the purpose of identifying a person or a dead body.
- (6) As specifically authorized or required by a state or federal statute. S.C. Code Ann. § 38-93-40.

C. Mental Health

South Carolina law restricts the disclosure of communications between a patient and a mental health professional (which includes general physicians, psychiatrists, psychologists, psychotherapists, nurses, social workers, or other staff members employed in a patient therapist capacity or employees under supervision of them) ("Mental Health Information"). S.C. Code Ann. §44-22-90.

- The Organization may not disclose Mental Health Information except under the following circumstances:
 - (1) When communications are among facility staff that require access to the information.
 - (2) In involuntary commitment proceedings.
 - (3) In an emergency to prevent the patient from harming himself or others.
 - (4) If the information is obtained through a court-ordered psychiatric examination (but only to the extent the admissibility of the information is limited to the patient's mental condition).
 - (5) In civil proceedings if the patient's mental condition is an element of the claim or defense.
 - (6) With the patient's consent (or the consent of the patient's guardian if the patient is adjudicated incompetent).
 - (7) If the disclosure is to the South Carolina Governor's ombudsman office or the South Carolina Protection and Advocacy System for the Handicapped, Inc., as consistent with state law.
 - (8) If the disclosure is otherwise authorized or permitted by statute. S.C. Code Ann. §44-22-90.

In addition, South Carolina law restricts the disclosure of certificates, applications, records and reports that directly or indirectly identify a mentally ill or alcohol or drug abuse patient (or former patient) whose commitment was sought ("Commitment Information"). S.C. Code Ann. §44-22-100(A).

- The Organization may only disclose Commitment Information if:
 - (1) The patient or the patient’s guardian consents.
 - (2) The disclosure is pursuant to a court order.
 - (3) The patient consents and the disclosure is for research conducted or authorized by the South Carolina Department of Mental Health or the South Carolina Department of Alcohol and Other Drug Abuse Services.
 - (4) The disclosure is necessary to cooperate with law enforcement or health, welfare or other state or federal agencies for the welfare of the patient or the patient’s family.
 - (5) The disclosure is necessary to carry out the provisions of any of the following Chapters of Title 44 of the South Carolina Code of Laws:
 - a. Chapter 22 (Rights of Mental Health Patients);
 - b. Chapter 9 (State Department of Mental Health);
 - c. Chapter 11 (Organization and Control of State Mental Health Facilities);
 - d. Chapter 13 (Admission, Detention and Removal of Patients at State Mental Health Facilities);
 - e. Chapter 15 (Local Mental Health Programs, Boards and Centers);
 - f. Chapter 17 (Care and Commitment of Mentally Ill Persons);
 - g. Chapter 23 (Provisions Applicable to both Mentally Ill and Mentally Retarded Persons);
 - h. Chapter 25 (Interstate Compact on Mental Health);
 - i. Chapter 27 (Patients at Federal Institutions); or
 - j. Chapter 52 (Alcohol and Drug Abuse Commitment). S.C. Code Ann. §44-22-100(A).

D. Intellectual Disabilities

South Carolina law restricts the disclosure of communications between a patient with an intellectual disability and an intellectual disability professional ("Intellectual Disability Information").

- "Intellectual disability" means significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period. S.C. Code Ann. § 44-26-10(9).
- "Intellectual disability professional" means a person responsible for supervising a patient's plan of care, integrating various aspects of the program, recording progress, and initiating periodic review of each individual plan of habilitation. S.C. Code Ann. § 44-26-10(10).

The Organization may not disclose Intellectual Disability Information unless:

- (1) The patient or his representative consents.
- (2) A court orders the disclosure.
- (3) The disclosure is required for research conducted or authorized by the South Carolina Department of Disabilities and Special Needs.
- (4) The disclosure is necessary to cooperate with law enforcement, health, welfare, and other state agencies, schools, and county entities.
- (5) The disclosure is necessary to carry out Title 44, Chapter 26 of the South Carolina Code of Laws (regarding services provided to individuals with intellectual disabilities).

- (6) The disclosure is to appropriate next of kin, upon proper inquiry (but the information is limited to the patient's current medical condition).
- (7) The information is used in an educational or informational capacity if the identity of the patient is concealed.
- (8) The disclosure is to the South Carolina Governor's ombudsman office or the South Carolina Protection and Advocacy System for the Handicapped, Inc., as consistent with state law. S.C. Code Ann. § 44-26-130.

Tennessee

The Organization may not disclose the name, address, or any other identifying information of a patient without the patient's written authorization, except for:

- (1) Any statutorily required reporting to health or government authorities.
- (2) Access by an interested third party payor or designee, for purposes of utilization reviews, case management, peer reviews, or other administrative functions.
- (3) Access by health care providers from whom the patient receives or seeks care.
- (4) Disclosures of directory information (limited to the patient's name, general health status, location, and telephone number), if the patient does not object.
- (5) Disclosures in response to any request by the Office of Inspector General or the Medicaid Fraud Control Unit with respect to an ongoing investigation.
- (6) Disclosures in response to a subpoena, court order, or request authorized by state or federal law. Tenn. Code Ann. §§ 68-11-1503(a) and (d).

In addition, the name, address, and other identifying information of a patient may not be sold for any purpose. Tenn. Code Ann. § 68-11-1503(b).

Texas**A. Marketing**

The Organization may not disclose PHI for any marketing communication without the patient's written authorization, unless the communication is:

- (1) In the form of a face-to-face communication made to the patient.
- (2) In the form of a promotional gift of nominal value provided by the Organization.
- (3) Necessary for the administration of a patient assistance program or other prescription drug savings or discount program.
- (4) Made at the oral request of the patient. Tex. Health & Safety Code § 181.152(a).

If the Organization uses or discloses PHI to send a written marketing communication through the mail, the communication must:

- (a) be sent in an envelope showing only the names and addresses of sender and recipient;
- (b) include the Organization's name and toll-free telephone number; and
- (c) explain the recipient's right to have the recipient's name removed from the Organization's mailing list. Tex. Health & Safety Code § 181.152(b).

B. Sale of PHI

The Organization may not disclose an individual's PHI to any other person in exchange for direct or indirect remuneration, except that the Organization may disclose an individual's PHI:

- (1) To another covered entity for purposes of:
 - (a) treatment;
 - (b) payment;
 - (c) health care operations; or
 - (d) performing an insurance or health maintenance organization function described in Tex. Insurance Code § 602.053.
- (2) As otherwise authorized or required by state or federal law. Tex. Health & Safety Code § 181.153(a).

Under Texas law (and for purposes of this policy), the term "covered entity" is broader than the definition of "covered entity" under HIPAA, and includes any entity that engages in assembling, collecting, analyzing, using, evaluating, storing, or transmitting PHI as well as any entity that comes into possession of or obtains or stores PHI (including business associates). Tex. Health & Safety Code § 181.001(b)(2).

C. Electronic Disclosures of PHI

The Organization may not electronically disclose an individual's PHI to any person without a separate authorization from the individual or the individual's legally authorized representative for each disclosure. Tex. Health & Safety Code § 181.154(b). An authorization for disclosure may be made in written or electronic form or in oral form if it is documented in writing by the Organization. An authorization for electronic disclosure is not required if the electronic disclosure is:

- (1) Made to another covered entity for the purpose of:
 - (a) treatment;

- (b) payment;
 - (c) health care operations; or
 - (d) performing an insurance or health maintenance organization function described by Tex. Insurance Code § 602.053.
- (2) Otherwise authorized or required by state or federal law. Tex. Health & Safety Code § 181.154(c).

Under Texas law (and for purposes of this policy), the term "covered entity" is broader than the definition of "covered entity" under HIPAA, and includes any entity that engages in assembling, collecting, analyzing, using, evaluating, storing, or transmitting PHI as well as any entity that comes into possession of or obtains or stores PHI (including business associates). Tex. Health & Safety Code § 181.001(b)(2).

D. Communicable Diseases

The Organization may not disclose any information that directly or indirectly identifies a patient as having a communicable disease, unless the disclosure is permitted under Tex. Health & Safety Code Chapter 81 (regarding mandatory reporting to the Texas Department of Health) or is otherwise permitted under state law. Tex. Health & Safety Code § 81.203.

- A "communicable disease" is an illness that occurs through the transmission of an infectious agent or its toxic products from a reservoir to a susceptible host, either directly from an infected person or animal, or indirectly through an intermediate plant or animal host, vector, or the inanimate environment. Tex. Health & Safety Code § 81.003(1).

E. HIV/AIDS

Texas law restricts the disclosure of HIV test results.

- HIV test results are defined as any statement that indicates that an individual has or has not been tested for AIDS or HIV infection, antibodies to HIV, or infection with any other probable causative agent of AIDS, including a statement that the individual is positive, negative, at risk, or has or does not have a certain level of antigen or antibody. Tex. Health & Safety Code § 81.101(5).
- The Organization may not disclose HIV test results unless the disclosure is to:
 - (1) The Texas Department of Health.
 - (2) A local health authority pursuant to mandatory reporting requirements.
 - (3) The Centers for Disease Control and Prevention of the United States Public Health Service, if reporting is required by federal law or regulation.
 - (4) The person who ordered the test.
 - (5) A health care provider who legitimately needs the information in order to provide for his or her protection or to provide for the patient's health and welfare.
 - (6) The patient or a person authorized to act on behalf of the patient.
 - (7) The patient's spouse, if the patient is positive for AIDS or HIV infection, antibodies to HIV, or infection with any other probable causative agent of AIDS.
 - (8) A person authorized to receive HIV test results under Article 21.31 of the Texas Code of Criminal Procedure.
 - (9) A person exposed to HIV infection as provided by Tex. Health & Safety Code § 81.050.
 - (10) A county or district court, in order to comply with Texas laws relating to the control and treatment of communicable diseases and health conditions. Tex. Health & Safety Code § 81.103(b).

F. Mental Health/Substance Abuse

Texas law restricts the disclosure of communications between a healthcare professional and a patient who consults or is interviewed by the healthcare professional for diagnosis, evaluation, or treatment of any mental or emotional condition or disorder, including alcoholism or drug addiction ("Mental Health Information"). Tex. Health & Safety Code § 611.001 and 611.002.

- The Organization may not disclose Mental Health Information, unless the disclosure is made:
 - (1) To a governmental agency, if required or authorized by law.
 - (2) To medical or law enforcement personnel, if there is a probability of imminent physical injury by the patient to himself or others, or if there is a probability of immediate mental or emotional injury to the patient.
 - (3) To qualified personnel for management audits, financial audits, program evaluations, or research.
 - (4) To a person authorized in writing by the patient, the patient's parent (if the patient is a minor), or the patient's guardian (if the patient has been adjudicated as incompetent to manage the patient's personal affairs).
 - (5) To the patient's personal representative if the patient is deceased.
 - (6) To parties involved in paying or collecting fees for mental or emotional health services provided by a professional.
 - (7) To health care providers who participate in the diagnosis, evaluation, or treatment of the patient.
 - (8) In connection with an official legislative inquiry relating to a state hospital or state school.
 - (9) To designated personnel of a correctional facility in which a person is detained, if the disclosure is for purposes of providing treatment and health care to the person in custody.
 - (10) To an employee or agent of the patient's health care provider who requires Mental Health Information to provide mental health care services, or to comply with statutory, licensing, or accreditation requirements, but only if the Organization ensures that the employee or agent: (a) will not use or disclose the information for any other purposes; and (b) will take appropriate steps to protect the information.
 - (11) To satisfy a request for medical records of a deceased or incompetent person pursuant to Section 74.051(e) of the Texas Civil Practice and Remedies Code. Tex. Health & Safety Code § 611.004(a).

G. Developmental Disability

Texas law restricts the disclosure of information relating to the identity, diagnosis, evaluation, or treatment of a person that is maintained in connection with the performance of a "program or activity relating to mental retardation" ("Developmental Disability Information"). Tex. Health & Safety Code § 595.001.

- The Organization may not disclose Developmental Disability Information without the written consent of the patient, unless the disclosure is:
 - (1) To medical personnel in a medical emergency.
 - (2) To qualified personnel for management audits, financial audits, program evaluations, or research approved by the Texas Department of Mental Health and Mental Retardation.

- (3) To personnel legally authorized to conduct investigations concerning complaints of abuse or denial of rights of persons with mental retardation.
- (4) Authorized by a court. Tex. Health & Safety Code § 595.005.

Utah

A. Hospice Licensing Regulations

Utah hospice licensing regulations restrict the disclosure of patient information.

- The Organization may not disclose or photocopy PHI relating to a hospice patient without the patient's written consent. Utah Admin. Code r. 432-750-12(6)(b).

B. Mental Health

Utah law restricts the disclosure of information that directly or indirectly identifies a patient whose commitment to a mental health facility has been sought ("Commitment Information"). The Organization may not disclose Commitment Information unless the disclosure is:

- (1) Pursuant to the consent of the patient, the patient's legal guardian, or the patient's parent (if the patient is a minor).
- (2) Necessary to carry out the provisions of the Utah Substance Abuse and Mental Health Act (regarding commitment to mental health facilities). Utah Code Ann. § 62A-15-643.