

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.

FAMILY MANORS is required by law to maintain the privacy of your protected health information (PHI) and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about the privacy practices at FAMILY MANORS ASSISTED LIVING please contact:

Privacy Officer
FAMILY MANORS ASSISTED LIVING
3385 SE Evergreen Ave
Stuart, FL 34997
(772) 288-4781

Effective Date of This Notice: April 11, 2003

I. How FAMILY MANORS ASSISTED LIVING may Use or Disclose Your Health Information

FAMILY MANORS collects health information from you and stores it in a chart and on a computer. This is your medical record. The medical record is the property of FAMILY MANORS, but the information in the medical record belongs to you. FAMILY MANORS protects the privacy of your health information. The law permits FAMILY MANORS to use or disclose your health information for the following purposes:

1. Treatment. We may disclose your PHI to physicians, nurses, medical students, and other health care personnel who provide you with health care services or are involved in your care. For example, if you're being treated for a knee injury, we may disclose your PHI to the physical therapist in order to coordinate your care.
2. Payment. We may use and disclose your PHI in order to bill and collect payment for the treatment and services provided to you. For example, we may provide portions of your PHI to our billing department and your health plan to get paid for the health care services we provided to you.
3. Regular Health Care Operations. We may disclose your PHI in order to operate this facility. For example, we may use your PHI in order to evaluate the quality of health care services that you received or to evaluate the performance of the health care professionals who provided health care services to you. We may also provide your PHI to our accountants, attorneys, consultants, and others in order to make sure we're complying with the laws that affect us.
4. Directory. We may list your name, where you are located in our facilities, your general medical condition and your religious affiliation in our directory. This information may be provided to members of the clergy. This information, except your religious affiliation, may be provided to other people who ask for you by name. If you do not want us to list this information in our directory and provide it to clergy and others, you must tell us that you object.
5. Notification and communication with family. We may disclose your health information to notify or assist in notifying a family member, your personal representative or another person responsible for your care about your location, your general condition or in the event of your death. If you are able and available to agree or object, we will give you the opportunity to object prior to making this notification. If

you are unable or unavailable to agree or object, our health professionals will use their best judgment in communication with your family and others.

6. Required by law. As required by law, we may use and disclose your health information.
7. Public health. As required by law, we may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or disability; reporting child abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.
8. Health oversight activities. We may disclose your health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings.
9. Judicial and administrative proceedings. We may disclose your health information in the course of any administrative or judicial proceeding.
10. Law enforcement. We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena and other law enforcement purposes.
11. Deceased person information. We may disclose your health information to coroners, medical examiners and funeral directors.
12. Organ donation. We may disclose your health information to organizations involved in procuring, banking or transplanting organs and tissues.
13. Research. We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board or FAMILY MANORS privacy board.
14. Public safety. We may disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.
15. Specialized government functions. We may disclose your health information for military and national security purposes.
16. Worker's compensation. We may disclose your health information as necessary to comply with worker's compensation laws.
17. Marketing. We may contact you to provide appointment reminders or to give you information about other treatments or health-related benefits and services that may be of interest to you.
18. Change of Ownership. In the event that FAMILY MANORS is sold or merged with another organization, your health information/record will become the property of the new owner.

II. When FAMILY MANORS May Not Use or Disclose Your Health Information

Except as described in this Notice of Privacy Practices, FAMILY MANORS will not use or disclose your health information without your written authorization. If you do authorize FAMILY MANORS to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

III. Your Health Information Rights

1. You have the right to request restrictions on certain uses and disclosures of your health information. This request must be made in writing; however, FAMILY MANORS is not required to agree to the restriction that you requested. You may not limit the uses and disclosures that we are legally required to make.
2. You have the right to receive your health information through a reasonable alternative means or at an alternative location. For example, you may request that we send your information to an alternate address, or via e-mail instead of regular

mail. We must agree to your request as long as we can easily provide it in the format you requested.

3. You have the right to inspect and copy your health information. You must make this request in writing and, in certain situations, we may deny your request. If your request is denied, we will notify you, in writing, our reasons for the denial. There may be charges for copies made.
4. You have a right to request that FAMILY MANORS amend your health information that is incorrect or incomplete. This request must be made in writing. FAMILY MANORS is not required to change your health information and, if your request is denied, we will provide you with information about FAMILY MANORS denial and how you can disagree with the denial.
5. You have a right to receive an accounting of disclosures of your health information made by FAMILY MANORS except that FAMILY MANORS does not have to account for the disclosures described in parts 1 (treatment), 2 (payment), 3 (health care operations), 4 (information provided to you), 5 (directory listings) and 6 (certain government functions) of section I of this Notice of Privacy Practices.
6. You have a right to a paper copy of this Notice of Privacy Practices.

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, contact

Customer Liaison, (972) 986-7603

IV. Changes to this Notice of Privacy Practices

FAMILY MANORS reserves the right to amend this Notice of Privacy Practices at any time in the future, and to make the new provisions effective for all information that it maintains, including information that was created or received prior to the date of such amendment. Until such amendment is made, FAMILY MANORS is required by law to comply with this Notice.

Before FAMILY MANORS makes an important change to our policies, we will promptly change this notice and post a new notice on public bulletin boards located at FAMILY MANORS. You may also request a copy of this notice from the business office at any time.

V. Complaints

Complaints about this Notice of Privacy Practices or how FAMILY MANORS handles your health information should be directed to:

Customer Liaison (972) 986-7603

If you are not satisfied with the manner in which this office handles a complaint, you may submit a formal complaint to:

Department of Health and Human Services
Office of Civil Rights
Hubert H. Humphrey Bldg.
200 Independence Avenue, S.W.
Room 509F HHH Building
Washington, DC 20201

You may also address your complaint to one of the regional Offices for Civil Rights. A list of these offices can be found online at <http://www.hhs.gov/ocr/regmail.html>.