



**Saint Alphonsus**

A MEMBER OF  TRINITY HEALTH

## Notice of Privacy Practices Summary

Version 041403.4

This summary describes how we use and share health information about you. This summary describes how you may see and get copies of this information.

### **We might use or share information about you for:**

Treatment. Such as when our physicians and nurses discuss your care.

Payment. Such as when we bill your insurance company for services provided to you.

Operations. Such as when we operate our facilities or work to make the quality of the care we provide better. When we give out information about the different services we provide. Or, when we contact community residents to ask for donations.

Other ways. Such as when we send disease reports to county and state health officials (this is required by law). When we provide information to funeral directors, organ donation groups and researchers. When we share information to protect the health and safety of others or you. Or, when we respond to court requests. We also may send you appointment reminders, greeting cards and newsletters.

### **How you may see and get copies of this information and exercise rights you have concerning this information.**

You have the right to:

- ◆ Ask for restrictions on the ways we use and give out your information. However, we are not required to agree with the restrictions for which you ask.
- ◆ Get and inspect a copy of your health record.
- ◆ Add information to or change information in your health record.
- ◆ Ask that your health information be sent to an alternate address or that you be called at an alternate phone number.
- ◆ Change your mind if you told us we could use or share your information for purposes that require your permission or your authorization.
- ◆ Get a list of the times we gave out your information. It will be a list of the times that the law requires us to keep a record of giving out your information and provide that list to you when requested.

## **Our Commitment to Respect Privacy**

Saint Alphonsus is required to:

- ◆ Keep your information private.
- ◆ Let you know if we cannot do what you have asked us to do with your information.
- ◆ Try to reach you at another location or phone number, if you ask us to do so.
- ◆ Use and / or give out your information only as the law permits, unless we have your permission to do more.

As we serve our patients, we at Saint Alphonsus may change what we do with your information. If we make a change, we will give you a new notice the next time you visit us. You may call us or write to us to check if we have made any changes, or to our website at [www.saintalphonsus.org](http://www.saintalphonsus.org).

## **Complaints**

If you believe your privacy rights have been violated, you may complain to Saint Alphonsus. You also may complain to the Department of Health and Human Services. You will not be mistreated for filing a complaint.

## **Contact Information**

Saint Alphonsus Regional Medical Center  
Attn: Privacy Officer  
1055 N Curtis  
Boise, ID 83706