

**ENCORE SENIOR LIVING**  
**NOTICE OF PRIVACY PRACTICES**  
**FOR PROTECTED HEALTH INFORMATION**

***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***

**A. INTRODUCTION**

During the course of providing services and care to you, Encore Senior Living gathers, creates, and retains certain personal information about you that identifies who you are and relates to your past, present, or future physical or mental condition, the provision of health care to you, and payment for your health care services. This personal information is characterized as your “protected health information.” This Notice of Privacy Practices describes how Encore Senior Living maintains the confidentiality of your protected health information, and informs you about the possible uses and disclosures of such information. It also informs you about your rights with respect to your protected health information.

**B. ENCORE SENIOR LIVING’S RESPONSIBILITIES**

Encore Senior Living is required by federal and state law to maintain the privacy of your protected health information. Encore Senior Living is also required by law to provide you with this Notice of Privacy Practices that describes Encore Senior Living’s legal duties and privacy practices with respect to your protected health information. Encore Senior Living will abide by the terms of this Notice of Privacy Practices. Encore Senior Living reserves the right to change this or any future Notice of Privacy Practices and to make the new notice provisions effective for all protected health information that it maintains, including protected health information already in its possession. If Encore Senior Living changes its Notice of Privacy Practices, it will personally deliver or mail a revised notice to you at your current address.

**C. USE AND DISCLOSURE WITH YOUR AUTHORIZATION**

Encore Senior Living will require a written authorization from you before it uses or discloses your protected health information, unless a particular use or disclosure is expressly permitted or required by law without your authorization. Encore Senior Living has prepared an authorization form for you to use that authorizes Encore Senior Living to use or disclose your protected health information for the purposes set forth in the form. You are not required to sign the form as a condition to obtaining treatment or having your care paid for. If you sign an authorization, you may revoke it at any time by written notice. Encore Senior Living then will not use or disclose your protected health information, except where it has already relied on your authorization.

**D. HOW ENCORE SENIOR LIVING MAY USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION WITHOUT YOUR AUTHORIZATION**

**1. Permissive Disclosures**

Encore Senior Living may, in its discretion, use or disclose your protected health information without your written authorization in the following circumstances:

a. Your Care and Treatment

Encore Senior Living may use or disclose your protected health information to provide you with or assist in your treatment, care and services. For example, Encore Senior Living may disclose your health information to health care providers who are involved in your care to assist them in your diagnosis and treatment, as necessary. Encore Senior Living may also disclose your protected health information to individuals who will be involved in your care if you leave ESL.

b. Billing and Payment

- i. Medicare, Medi-Cal and Other Public or Private Health Insurers – Encore Senior Living may use or disclose your protected health information to public or private health insurers (including medical insurance carriers, HMOs, Medicare, and Medi-Cal) in order to bill and receive payment for your treatment and services that you receive at ESL. The information on or accompanying a bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.
- ii. Health Care Providers – Encore Senior Living may also disclose your protected health information to health care providers in order to allow them to determine if they are owed any reimbursement for care that they have furnished to you and, if so, how much is owed.

c. Health Care Operations

Encore Senior Living may use your protected health information for health care operations at Encore Senior Living Community. These uses and disclosures are necessary to manage Encore Senior Living Community and to monitor our quality of services and care. For example, we may use your protected health information to review our services and to evaluate the performance of our staff in caring for you.

d. Health Oversight

Encore Senior Living may disclose your protected health information to any government or private agency, such as to the federal centers for Medicare and

Medicaid services, responsible for licensing or accrediting Encore Senior Living Community so that the agency can carry out its oversight activities. These oversight activities include audits; civil, administrative, or criminal investigations; inspections; licensure or disciplinary actions; civil, administrative, or criminal proceedings or actions; or other activities necessary for appropriate oversight.

e. Provision of Basic Information about Residents

Encore Senior Living allows staff to provide certain basic information about a resident to persons who ask for the resident by name and to members of the clergy. Unless you notify Encore Senior Living that you object, it will disclose your name, your location in ESL, and your general condition to anyone who asks for you by name. It will disclose your name, your location in ESL, your general condition, and your religious affiliation to members of the clergy.

f. Individuals Involved in Your Care or Payment for Your Care

Unless you specifically object, Encore Senior Living may disclose to a family member, other relative, a close personal friend, or to any other person identified by you, all protected health information directly relevant to such person's involvement with your care or directly relevant to payment related to your care. Encore Senior Living may also disclose your protected health information to a family member, personal representative, or other person responsible for your care to assist in notifying them of your location, general condition, or death.

g. Disclosures within Provider Community

Unless you specifically object, Encore Senior Living may disclose certain general information about you (e.g., past activities, present interests, birthday, and location if hospitalized) to members of its community, including other residents and staff, by means such as newsletter or bulletin board.

h. Business Associates

Encore Senior Living may contract with certain individuals or entities to provide services on its behalf. Examples include data processing, quality assurance, legal, or accounting services. Encore Senior Living may disclose your protected health information to a business associate, as necessary, to allow the business associate to perform its functions on the Encore Senior Living's behalf. Encore Senior Living will have a contract with its business associates that obligate the business associates to maintain the confidentiality of your protected health information.

i. Fundraising

Encore Senior Living may use certain very limited protected health information to contact you in an effort to raise money for ESL and its operations. Encore Senior Living may disclose the same information to business associates or to related foundations that it uses to raise funds for its own benefit. This information is limited to demographic information (i.e., your name, address, telephone number, age, and gender) and the dates during which you reside at ESL. You may notify Encore Senior Living in writing if you object to such disclosures.

j. Research

Encore Senior Living may disclose your protected health information for research purposes, provided that an outside Institutional Review Board overseeing the research approves the disclosure of the information without a written authorization.

k. Dangerous Disease

Encore Senior Living may immediately disclose protected health information to the Arizona Department of Health where ESL diagnoses or suspects the existence of a disease of public health significance..

l. Public Health Activities

Encore Senior Living may disclose your protected health information to any public health authority that is authorized by law to collect it for purposes of preventing or controlling disease, injury, or disability.

m. Hospital Peer Review

Encore Senior Living may disclose your protected health information to hospital medical staffs to aid in the credentialing of applicants and in the peer review of members.

n. Organ Procurement

Encore Senior Living may disclose your protected health information following your death to an organ procurement agency or tissue bank in order to aid in using your organs or tissues in transplantation.

o. Members of Workforce

It is Encore Senior Living's policy to allow members of its workforce to share residents' protected health information with one another to the extent necessary to permit them to perform their legitimate functions on Encore Senior Living's behalf. At the same time, Encore Senior Living will work with and train its workforce members to ensure that there are no unnecessary or

extraneous communications that will violate the rights of its residents to have the confidentiality of their protected health information maintained.

p. Veterans

Encore Senior Living may use and disclose to components of the Department of Veterans Affairs medical information about you to determine whether you are eligible for certain benefits.

q. Workers' Compensation

ESL may use or disclose a resident's protected health information to comply with laws relating to workers' compensation or similar programs.

**2. Mandatory Disclosures**

Encore Senior Living will disclose protected health information to outside persons or entities without your written authorization as required by law in the following circumstances:

a. Court Order; Order of Administrative Tribunal

Encore Senior Living will disclose protected health information in accordance with an order of a court or of an administrative tribunal of a government agency.

b. Subpoena

Encore Senior Living will disclose protected health information in accordance with a valid subpoena issued by a party to adjudication before a court, an administrative tribunal, or a private arbitrator. Reasonable efforts will be made to notify you of the subpoena, or attempts will be made to obtain an order or agreement protecting your protected health information.

c. Law Enforcement Agencies

Encore Senior Living will disclose protected health information to law enforcement agencies in accordance with a search warrant, a court order or court-ordered subpoena, or an investigative subpoena or summons.

d. Coroner

Encore Senior Living will disclose protected health information to a coroner where the coroner requests the information to identify a decedent; to notify next of kin; or to investigate deaths that may involve public health concerns, suspicious circumstances, elder abuse, or organ or tissue donation.

e. Elder Abuse Reporting

Encore Senior Living will disclose protected health information about a resident who is suspected to be the victim of elder abuse to the extent necessary to complete any oral or written report mandated by law. Under certain circumstances, Encore Senior Living may disclose further protected health information about the resident to aid the investigating agency in performing its duties. Encore Senior Living will promptly inform the resident about any disclosure unless Encore Senior Living believes that informing the resident would place the resident in danger of serious harm, or would be informing the resident's personal representative, whom the Provider believes to be responsible for the abuse, and believes that informing such person would not be in the resident's best interest.

f. National Security and Intelligence Activities, Protected Services for the President and Others

Encore Senior Living will disclose protected health information about a resident to authorized federal officials conducting national security and intelligence activities or as needed to provide protection to the President of the United States, certain other persons or foreign heads of states, or to conduct certain special investigations.

g. Other Disclosures Required by Law

Encore Senior Living will disclose protected health information about a resident when otherwise required by law.

**E. YOUR RIGHTS REGARDING PROTECTED HEALTH INFORMATION**

You have the following rights with respect to your protected health information. To exercise these rights, contact Encore Senior Living at the address found in paragraph G below.

a. Right to Receive a Copy of the Notice of Privacy Practices

You have the right to request and receive a copy of Encore Senior Living's Notice of Privacy Practices for Protected Health Information in written or electronic form.

b. Right to Request Special Privacy Protections

You have the right to request restrictions on the use and disclosure of your protected health information for treatment, payment or health care operations, or providing notifications regarding your identity and status to persons inquiring about or involved in your care. Encore Senior Living is not required to grant your request, but if it does, it will comply with your request, except in an emergency situation or until the

restriction is terminated by you or Encore Senior Living. You also have the right to request that Encore Senior Living communicate protected health information to the recipient by alternative means or at alternative locations.

c. Right to Request Access

You have the right to inspect and copy your health records maintained by Encore Senior Living. In certain limited circumstances, Encore Senior Living may deny your request as permitted by law.

d. Right to Request Amendment

You have the right to request an amendment to your health records maintained by Encore Senior Living. If your request for an amendment is denied, you will receive a written denial, including the reasons for such denial, and an opportunity to submit a written statement disagreeing with the denial.

e. Right to an Accounting

You have the right to receive an accounting of disclosures of your protected health information created and maintained by Encore Senior Living over the six years prior to the date of your request or for a lesser period. Encore Senior Living is not required to provide an accounting of the following disclosures:

- To carry out treatment, payment, and health care operations;
- To respond to your requests for access to protected health information;
- To release basic information about you to persons asking for you by name or to members of the clergy;
- To aid in the identification or care of a resident;
- To any recipient, where such disclosure was incident to a use or disclosure otherwise permitted or required by law;
- To any recipient pursuant to a written authorization from the resident or the resident's personal representative;
- To any recipient for national security or intelligence purposes as required by law; or
- To any recipient prior to April 14, 2003 or for protected health information created more than six years before the date of your request for an accounting.

f. Right to Receive a Copy of the Notice of Privacy Practices

You have the right to request and receive a copy of Encore Senior Living's Notice of Privacy Practices for Protected Health Information in written or electronic form.

**F. COMPLAINTS**

If you believe that your privacy rights have been violated, you may file a complaint with Encore Senior Living at the address found in Paragraph G below.

You also have the right to submit a complaint to the Secretary of the U.S. Department of Health and Human Services, 90 7th Street, Suite 4-100, San Francisco, CA 94103, Telephone: (415)437-8310, Fax: (415)437-8329, TDD: (415)437-8311, Attention OCR Regional Manager. **Encore Senior Living will not retaliate against you if you file a complaint.**

**G. FURTHER INFORMATION**

If you have questions about this Notice of Privacy Practices or would like further information about your privacy rights, contact Encore Senior Living at the following address:

ENCORE SENIOR LIVING AT \_\_\_\_\_

Attention HIPAA Privacy Official:

Street Address: \_\_\_\_\_

City, State: Zip: \_\_\_\_\_

**The effective date of this Notice of Privacy Practices is \_\_\_\_\_.**

I hereby acknowledge receipt from Encore Senior Living of a copy of its Notice of Privacy Practices for Protected Health Information effective on the date set forth above.

**RESIDENT:**

**RESIDENT'S PERSONAL REPRESENTATIVE**

(If signed on the Resident's behalf)

\_\_\_\_\_  
(Printed or typed name)

\_\_\_\_\_  
(Printed or typed name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Signature)

Date: \_\_\_\_\_

Date: \_\_\_\_\_