Patient Privacy Notice

Effective Date September 23, 2013

THE FOLLOWING NOTICE DESCRIBES BOULDER CITY HOSPITAL’S HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) PRIVACY PRACTICES, HOW YOUR MEDICAL INFORMATION MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THE INFORMATION. PLEASE REVIEW THE INFORMATION CAREFULLY.

- Your confidential healthcare information may be released to other healthcare professionals within the organization for the purpose of providing you with quality healthcare.
- Your confidential healthcare information may be released to your insurance provider for the purpose of the organization receiving payment for providing you with needed healthcare services.
- Your confidential healthcare information may be released to public or law enforcement officials in the event of an investigation in which you are a victim of abuse, a crime or domestic violence.
- Your confidential healthcare information may be released to other healthcare providers in the event you need emergency care.
- Your confidential healthcare information may be released to a public health organization or federal organization in the event of a communicable disease or to report a defective device or untoward event to a biological product (food or medication).
- Disclosure of the following Personal Health Information (PHI) requires your written authorization: use of psychotherapy notes, disclosure of PHI for marketing, and disclosures that constitutes a sale of PHI. You may revoke your permission to release confidential healthcare information at anytime.
- You may be contacted by Boulder City Hospital to remind you of any appointments, healthcare treatment options or other health services that may be of interest to you.
- You may be contacted by Boulder City Hospital or Foundation for the purpose of raising funds to support Boulder City Hospital’s operations. You may opt out of receiving such communications by contacting the Privacy Officer, in writing or by following the directions provided on the fund raising materials.
- You have the right to restrict the use of your confidential healthcare information. However, Boulder City Hospital may choose to refuse your restriction if it is in conflict of providing you with quality healthcare or in the event of an emergency situation.
- You have the right to receive confidential communication about your health status.
- You have the right to review and any/all portions of your healthcare information.
• You have the right to make changes to your healthcare information unless it is the documented result of diagnostic testing.
• You have the right to know who has accessed your confidential healthcare information and for what purpose.
• You have the right to restrict disclosure to your insurance plan of any PHI created from a service that you have paid for out of pocket.
• You have the right to possess a copy of this Privacy Notice upon request. This copy can be in the form of an electronic transmission or on paper.
• Boulder City Hospital is required by law to protect the privacy of its patients. It will keep confidential any and all patient healthcare information and will provide patients with a list of duties or practices that protect confidential healthcare information.
• Boulder City Hospital will notify patient(s) when a reportable breach is discovered. Notification will be made to the patient(s) as soon as possible and no later than 60 days from when the breach is discovered. Notification will include a brief description of how the breach occurred, a description of the PHI involved, and steps patient(s) should take to protect themselves from harm. The notification will also include contact information for the individual to ask questions.
• Boulder City Hospital shall abide by the terms of this notice. Boulder City Hospital reserves the right to make changes to this notice and continue to maintain the confidentiality of all healthcare information. Patients will receive a mailed copy of any changes to the notice within 60 days of making the changes.
• Insurance plans are prohibited from using or disclosing genetic information of an individual for underwriting purposes.
• You have the right to complain to Boulder City Hospital if you believe your rights to privacy have been violated. If you feel your privacy rights have been violated, please mail your complaint to:

ATTN: Andre Pastian, Privacy Officer
Boulder City Hospital
901 Adams Blvd
Boulder City, NV 89005

• All complaints will be investigated. No personal issue will be raised for filing a complaint with Boulder City Hospital.
• For further information about this Privacy Notice, please contact the above named Privacy Officer.
• This notice is effective as of September 23, 2013.