We may use or disclose health information to remind you that you have an appointment or to check on you after you have received treatment. If you have an answering machine we may leave a message. If you elect, we may also send information to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine health information about deceased patients and the researcher certifies the information is necessary for research purposes; or (d) a researcher obtains data with certain very non-specific geographic identifiers (for example, a zip code) called a limited data set and agrees to use the data only for research or public health purposes. If you would like to opt out you may opt out by e-mailing foundation@emoryhealthcare.org or calling 404-501-5956. Your decision whether or not to receive fundraising communications will not affect your ability to receive health care services at Emory Healthcare.

Emory Healthcare Directory – As a nonprofit health system, support from generous patients and families builds Emory Healthcare and the Robert W. Woodruff Foundation. If you would like to opt out you may opt out by e-mailing foundation@emoryhealthcare.org or calling 404-501-5956.

Payment – We may use or disclose health information about you in order to bill and collect payment for the services and items you may receive from us. For example, we may need to give your health insurance plan information about your surgery so that your health insurance plan will pay us or reimburse you for the surgery. We may also tell your health insurance plan about your treatment so that they can pay us. We may also use or disclose health information about you to other health care providers to whom we want to transfer your care so that your treatment will be continued after you leave our care.

Health Information Exchanges (HIE) – Health information exchanges allow health care providers, including Emory Healthcare, to share and receive health information about patients, assists in the coordination of patient care. Emory Healthcare participates in a HIE that may make your health information available to other providers, health plans, and health care clearingshouses for treatment or payment purposes. Your health information may be included in the HIE. We may also share your health information with other health care providers to whom we refer you, so that your treatment can be continued after you leave Emory Healthcare.
Public Health Activities – to public health agencies or other governmental authorities to report public health activities or risks. These activities generally include the following: to prevent or control disease, injury or disability; to report births and deaths; to report child abuse or neglect; to report reactions to medications or problems with products; to notify people of recalls of products they may be using; to notify a person who may have been exposed to a disease or may be at risk for acquiring a disease or spreading a disease or condition as authorized by law; to notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect or domestic violence (we will only make this disclosure if you agree or when required or authorized by law).

Health Oversight Activities – to a health oversight agency for activities authorized by law and the Secretary of the Department of Health and Human Services. Emory Healthcare must provide this list of names and addresses to allow public officials to conduct special investigations and to individuals to contact these officials if they have questions about this policy.

Law Enforcement – to authorized federal officials in law enforcement as defined by law for the law enforcement official(s) for certain law enforcement purposes. We may report a death that we believe may be the result of criminal conduct or report suspected criminal conduct occurring on our premises. We may also report information related to a suspected crime discovered in the course of providing emergency medical services.

Coroners, Medical Examiners and Funeral Directors – to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release health information about patients of Emory Healthcare to funeral directors as necessary to carry out their duties.

National Security and Intelligence Activities – to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

Protective Services for the President and Others – to authorized federal officials so they may provide protection to the President of the United States, other authorized persons or foreign heads of state or to conduct special investigations.

Inmates – to the prison or law enforcement official for use by that official in the operation of the prison, in cases where you are an inmate of a correctional institution or under the custody of a law enforcement official. This release would be necessary for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

Most uses and disclosures of psychotherapy notes, uses and disclosures for marketing purposes, disclosures that constitute a sale of health information, and other types of uses and disclosures of your health information not described in this Notice require an authorization and will be made only with your written authorization.

You may request an amendment to your health information in order to correct or remove information about yourself that you believe is incorrect or incomplete. We will notify you of our decision in writing within 60 days of receiving your request. We may deny your request if it is not in writing or does not include a reason for the request.
Emory Healthcare facilities are clinically integrated and part of an organized health care arrangement (OCHA) with its components and other components of Emory University. Your health information may be disclosed between the University’s Covered Components and the University may disclose your health information to Emory Healthcare if necessary to carry out treatment, payment or health care operations related to the OCHA. All components of the OCHA arrangement are required to abide by this Notice.

Individuals who work in a Covered Component must follow HIPAA and this NPP. Individuals in a facility work as a part of the facility’s Covered Component when they perform one of the following activities:
(a) Treat patients and bill insurance or government programs for that treatment. (Note: Student patients are covered by the Family Educational Rights and Privacy Act instead of HIPAA),
(b) Take or process payment for health care services that are billed to insurance or a government program, and/or
(c) Perform health care operations.

NOTE: The Emory University Group Health Plan operates under a separate Notice of Privacy Practices and therefore does not follow this Notice.

Emory Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Non-Discrimination Policy

http://www.emoryhealthcare.org/patients-visitors/non-discrimination-policy.html