Department of Veterans Affairs
NOTICE OF PRIVACY PRACTICES
Summary Notice
Effective Date April 14, 2003

We, the Veterans Health Administration (VHA), are providing you with the VA Notice of Privacy Practices. This Summary Notice provides a summary of the VA Notice of Privacy Practices and briefly states:

- How your health information may be used and disclosed;
- Your rights regarding your health information; and
- Our legal duty to protect the privacy of your health information.

For a more complete description of our privacy practices, you should carefully review the Detailed Notice of Privacy Practices following this summary. This Summary Notice does not modify or limit the VA Detailed Notice of Privacy Practices.

Your Health Information Health information is any information we create or receive about you and your past, present, or future:

- Physical or mental health or condition;
- Health care; or
- Payment for health care provided.

How We May Use And Disclose Your Health Information

In most cases, your written authorization is needed for us to use or disclose your health information. However, Federal law allows us to use and disclose your health information without your permission for certain purposes, including the following:

- Treatment
- Eligibility and Enrollment for VA Benefits
- Public Health
- Research (with strict limitations)
- Abuse Reporting
- Workers' Compensation
- Patient Directories
- Payment
- Law Enforcement
- Judicial or Administrative Proceedings
- Services
- Correctional Facilities
- When Required by Law
- Family Members or Others Involved in your Care (with limitations)
- Health Operations
- Coroner or Funeral Activities (with limitation)
- National Security
- Health Care Oversight
- Military Activities
- Health or Safety Activities

A more detailed description of each use and disclosure purpose is included in the Detailed Notice of Privacy Practices, following this summary.

All other uses and disclosures of your health information will not be made without your prior written authorization.

Your Privacy Rights You have the right to:

- Review your health information;
- Obtain a copy of your health information;
- Request your health information be amended or corrected;
- Request that we not use or disclose your health information;
- Request that we provide your health information to you in an alternative way or at an alternative location in a confidential manner;
- An accounting or list of disclosures of your health information; and
- Receive our VA Notice of the Privacy Practices upon request.

Changes We reserve the right to change the VA Notice of Privacy Practices. The revised privacy practices will be effective for all health information we already have about you, as well as information we receive in the future. We will send to your last address of record, and otherwise make available to you, a copy of the revised Notice within 60 days of any change.

Complaints If you are concerned that your privacy rights have been violated, you may file a complaint to VHA or to the Secretary of the U.S. Department of Health and Human Services. To file a complaint with VHA you may contact your VA health care facility Privacy Officer, the VHA Privacy Officer, or VHA via Contact the VA at http://www.va.gov or dial 1-877-222-8387. Complaints do not have to be in writing, though it is recommended. You will not be penalized or retaliated against for filing a complaint.

NOTE: A large print version of this Notice is available upon request.

Department of Veterans Affairs
NOTICE OF PRIVACY PRACTICES
Detailed Notice
Effective Date April 14, 2003

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.

The purpose of this Detailed Notice is to inform you about your privacy rights and provide you with information on how the Veterans Health Administration (VHA) may use and disclose your health information. All VHA employees, staff, personnel, and volunteers must follow the terms of this Notice. VHA is required by law to:

- Keep health information that identifies you private to the extent described in this Notice;
- Follow the terms of this Notice.
- Provide you with this Notice of VHA's legal duties and privacy practices with respect to your personal health information; and

Our Pledge To You We recognize that health information about you is personal. We are committed to protecting the confidentiality of your health information.

Your Health Information Health information is any information we create or receive about you and your past, present, or future:

- Physical or mental health or condition;
- Health care; and/or
- Payment for health care provided.

Some examples of your health information are:

- Name, age or home address
- Insurance and billing information
- Prescriptions
- Prosthetics
- Eligibility and enrollment information
- Examination, diagnosis, findings or treatment

Our records containing your health information are the property of VHA. We will give a copy of your health information to you upon your written request, unless prohibited or restricted by law. However, you must follow VHA procedures to obtain the information.

In general, we must have your written authorization to use and disclose your protected health information. However, we do not need your authorization to use or disclose your health information in certain circumstances explained in more detail later in this Notice. These circumstances include:

- For treatment, payment, health care operations, and as otherwise permitted by law;
- For Research activities in certain situations explained below;
- For listing in our patient directories (a list of who is currently admitted in the hospital), although you have the opportunity to object to this use and disclosure of information;
- For disclosure to the Secretary of the U.S. Department of Health and Human Service for investigation of our compliance with 45 CFR Parts 160 and 164.

In certain situations we may only use or disclose the minimum amount of your health information necessary to accomplish the intended purpose of the use or disclosure.

When We May Use And Disclose Your Health Information

Treatment We may use and disclose your health information for treatment. Treatment may include:

- Emergency and routine health care or services including labs and xrays
- Contacting you to provide appointment reminders or information about treatment alternatives
- Prescriptions for medication, supplies, and equipment
- Coordination of care, including care from non-VA providers

Examples: 1) A veteran sees a VA doctor who prescribes medication based on the veteran's health information. The VA pharmacy uses this information to fill the prescription. 2) A veteran is taken to a community hospital emergency room. Upon request from the emergency room, the VA discloses health information needed to treat this veteran.

Payment We may use and disclose your health information for payment purposes. This may include:

- Determining eligibility for health care services
- Paying for non-VA care and services, including but not limited to CHAMPVA
- Providing personal information to consumer reporting agencies regarding delinquent debt owed to VA
- Pre-certifying benefits
- Billing and collecting for services
- Coordinating benefits with other insurance payers

Examples: 1) A veteran is seeking care at a VA health care facility. VHA uses the veteran's health information to determine eligibility for health care services. 2) A veteran has private health insurance and is being treated for a nonservice-connected condition. The VA health care facility discloses the veteran's health information to the health insurance company to seek and receive payment for the care provided.

Health Care Operations We may use and disclose your health information to support the activities related to health care, including:

- Improving quality of care or services
- Conducting veteran and beneficiary satisfaction surveys
- Conducting health care training programs
- Improving health care processes, reducing health care costs, and assessing organizational performance
- Conducting accreditation activities
- Reviewing competence or qualifications of health care professionals
- Managing, budgeting, and planning
- Conducting audits and compliance programs, including fraud, waste and abuse investigations
- Legal services
- Certifying, licensing, or credentialing of health care professionals
- Maintaining computer systems

Examples: 1) Medicine Service, within a VA Medical Center, uses the health information of diabetic veterans as part of a quality of care review process to determine if the care was provided in accordance with the established best clinical practices. 2) A VA Medical Center discloses a veteran's health information to the Department of Justice for defense of VA in litigation.

Eligibility and Enrollment for VA Benefits We may use and disclose your health information to determine your eligibility for VA benefits, including to:

- Other programs within VA, such as Veterans Benefits Administration; and
- Other Federal Agencies.

Abuse Reporting We may disclose your health information to report suspected abuse, neglect, or domestic violence to appropriate Federal, State, local, and/or tribal authorities.

Health and Safety Activities We may use and disclose your health information when necessary to prevent or lessen a serious threat to the health and safety of the public, yourself, or another person. Any disclosure would only be to someone able to help prevent or lessen the harm.

Public Health We may disclose your health information to public health and regulatory authorities, including the Food and Drug Administration (FDA), for public health activities. Public health activities may include:

- Controlling and preventing disease, injury, or disability
- Reporting vital events such as births and deaths
- Reporting communicable diseases such as hepatitis, tuberculosis, and sexually transmitted diseases
- Tracking FDA-regulated products
- Reporting adverse events, and product defects or problems
- Enabling product recalls, repairs, or replacements

Judicial or Administrative Proceedings We may disclose your health information for judicial or administrative proceedings if:

- We receive an order of a court or administrative tribunal, requiring the disclosure; or
- To defend VHA in judicial and administrative proceedings.

Law Enforcement We may disclose your health information for law enforcement purposes when applicable legal requirements are met. These law enforcement purposes may include:

- Responding to a court order
- Responding to a specific request when in pursuit of a focused civil or criminal law enforcement investigation
- Identifying or apprehending an individual who has admitted to participating in a violent crime
- Reporting a death where there is a suspicion that death has occurred as a result of a crime
- Reporting crimes occurring at a VHA site
- Routine reporting to law enforcement agencies, such as gunshot wounds
- Providing certain information to identify or locate a suspect, fugitive, material witness, or missing person

Health Oversight VHA may disclose your health information to a governmental health oversight agency (e.g. Inspector General (IG)) for activities authorized by law, such as audits, investigations, and inspections. Health oversight agencies include government agencies that oversee the health care system, government benefit programs, other government regulatory programs, and civil rights laws.

Coroner or Funeral Services We may disclose your health information to a funeral director, as authorized by law. We may also disclose your health information to a coroner or medical examiner for:

- Identification purposes
- Determining cause of death
- Performing other duties authorized by law

Services We may provide your health information to individuals, companies and others who need to see the information to perform a function or service for VHA, such as a contract. To protect your privacy, we will require these individuals, companies and entities to sign an agreement to protect your privacy.

National Security We may use or disclose your health information to authorized Federal officials for conducting national security and intelligence activities. These activities may include protective services to the President and others.

Military Activities We may use or disclose your health information, if you are a member of the Armed Forces, for activities deemed necessary by appropriate military command authorities to assure the proper execution of the military mission, when applicable legal requirements are met.

Workers' Compensation We may disclose your health information to comply with workers' compensation laws and other similar programs.

Correctional Facilities We may disclose your health information to a correctional facility if you are an inmate and disclosure is necessary:

- To provide you with health care;
- To protect your health and safety or the health and safety of others; or
- For the safety of the correctional institution.

Required by Law We may use or disclose your health information for other purposes to the extent required by Federal law.

When Use or Disclosure May or May Not Require Your Authorization

Research We may use and disclose your health information for research. Before we may use health information for research, all research projects must go through a special VHA approval process in which a research review board, usually called an Institutional Review Board, evaluates the project and its use of health information based on, among other things, the level of risk to you and to your privacy. If you will be seen or provided care as part of the research project, you will be asked to sign a consent form to participate in the project that includes an authorization for use of your information. However, there are times when we may use your health information without an authorization, such as when:

- A researcher is preparing a plan for a research project. For example, a researcher needs to examine patient medical records to identify patients with specific medical needs. The researcher must agree to use this information only to prepare a plan for a research study; the researcher may not use it to contact you or actually conduct the study. The researcher also must agree not to remove that information from the VHA.
- A researcher conducts a research review board approved project reviewing health information without seeing you.

We may disclose your health information for research without an authorization if a research review board (e.g., Institutional Review Board) has approved such action based on a determination that the conduct of the research will cause no more than minimal risk to you and to your privacy.

When We Offer You the Opportunity to Decline Use or Disclosure of Your Health Information

Patient Directories Unless you object, when you are a patient at a VA health care facility we may list in the VA Medical Center Patient Directory your general condition, religious affiliation and location where you are receiving care. This information may be disclosed to people who ask for you by name. Your religious affiliation will only be disclosed to members of the clergy who ask for you by name.

Family Members or Others Involved in Your Care

General Information Disclosures: We may disclose general information about you to your family and friends. These disclosures will be made only as necessary and on a need-to-know basis consistent with good medical and ethical practices. General information is limited to:

- Verification of identity
- Your condition described in general terms (e.g., critical, stable, good, prognosis poor)
- Your location in a VA health care facility (e.g., building, floor or room number).

Disclosures to others while you are present: When you are present, or otherwise available, we may disclose your health information to your next of kin, family or other individuals that you identify. For example, your doctor may talk to your spouse about your condition while at your bedside. Before we make such a disclosure, we will ask you if you object. We will not make the disclosure if you object or if we cannot reasonably infer from the circumstances and based on the exercise of professional judgment that you do not object.

Disclosures to others when you are not present: When you are not present, or are unavailable, we may disclose your health information to your next-of-kin, family, and others with a significant relationship to you without your authorization if, in the exercise of professional judgment, we determine the disclosure is in your best interests. We will limit the disclosure to information directly relevant to the other person's involvement with your health care or payment for your health care. Examples of this type of disclosure may include questions or discussions concerning:

- Medical care;
- Medical supplies (e.g., wheelchair) and filled prescriptions; and
- Home-based care;
- Forms or other information relevant to your care.

NOTE: We may provide a copy of your medical records to family, next-of-kin, or other individuals involved in your care only if we have your written authorization.

Other Uses and Disclosures Prohibited without Your Authorization Other uses and disclosures of your health information not covered by this Notice will be made only with your written authorization. If you provide us authorization or permission to use or disclose your health information, you may revoke that permission, in writing, at any time. If you revoke your authorization, we will no longer use or disclose your health information for the reasons covered by your written authorization. Please understand that we are unable to take back any uses and disclosures we have already made with your authorization.

Your Privacy Rights

Right to Request Restriction You may request that we not use or disclose all or part of your health information, including use or disclosure for a particular purpose or to a particular person. However, we are not required to agree to such restriction. To request a restriction, you must submit a written request that identifies the information you want restricted, when you want it to be restricted, and the restrictions that you are requesting. All requests to restrict use or disclosure should be submitted to the VHA Privacy Officer, Department of Veterans Affairs, 810 Vermont Ave. N.W., Washington DC 20420. If we agree to your request, we will honor the restriction unless needed for emergency treatment.

Right to Review and Copy Health Information You have the right to review and obtain a copy of your health information in our records. You must submit a written request to the Privacy Officer at the VA health care facility that provided or paid for your care. Under certain limited situations, you may not be allowed to review or obtain a copy of parts of your health information. If your request is denied, you will be notified of this decision in writing and you may appeal this decision.

Right to Request Amendment of Health Information You have the right to request an amendment to your health information in our records if you believe it is incomplete, inaccurate, untimely, or not related to your care. You must submit your request in writing, specify the information that you want corrected, and provide a reason to support your request for amendment. All amendment requests should be submitted to the Privacy Officer at the VA health care facility that maintains your information. If your request for amendment is denied, you will be notified of this decision in writing. In response you may:

- File an appeal
- File a "Statement of Disagreement"
- Ask that your initial request for amendment accompany all future disclosures of the disputed health information

We may prepare a rebuttal to your "Statement of Disagreement". We will provide you with a copy of any such rebuttal. If you have any questions about amending your health information in our records, please contact the Privacy Officer at the VA health care facility that provided or paid for your care.

Right to Request Receipt of Communications in a Confidential Manner You have the right to request that we provide your health information to you by alternative means or at an alternative location. We will accommodate reasonable requests, as determined by VHA policy, from you to receive communications containing your health information:

- At a mailing address (i.e. confidential communications address) other than your permanent address
- In person under certain circumstances.

Contact the VA health care facility that administers your health care to request confidential communications at an alternative address. If the alternative address information results in undeliverable mail, we will resend or mail the communication to your permanent address notated in our computer system.

Right to Receive an Accounting of Disclosures You have the right to know what disclosures of your health information have been made from our records other than disclosures we have made to you. Our accounting of disclosures is subject to certain exceptions, restrictions, and limitations. To exercise this right, you must submit a written request to the Privacy Officer of the VA health care facility that maintains your health information.

Right To a Printed Copy of the Privacy Notice You have the right to obtain a paper copy of this Notice upon request from your local VA health care facility. You may also obtain a copy of this Notice at our website, http://www.va.gov/health_benefits/.

Changes to this Notice We reserve the right to change this Notice at any time. We reserve the right to make the revised or changed Notice effective for health information we already have about you as well as any information we receive in the future. When there is a change to any part of this Notice, we will send to your last address of record a copy of the revised notice within 60 days of any change. The revised Notice will also be available upon request at each VA health care facility.

Complaints If you believe that your privacy rights have been violated, you may file a complaint with VHA or with the Secretary of the U.S. Department of Health and Human Services. To file a complaint with VHA you may contact your VA health care facility Privacy Officer, the VHA Privacy Officer, or VHA via Contact the VA at http://www.va.gov or call 1-877-222-8387. Complaints do not have to be in writing, though it is recommended. You will not be penalized or retaliated against for filing a complaint.

Contact Information You may contact your VA health care facility Privacy Officer if you have questions regarding the privacy of your health information or would like further explanation of this Notice. The VHA Privacy Officer may be reached by mail at Bay Pines OIFO (192-2B), 10000 Bay Pines Boulevard, St. Petersburg, Florida 33708 or via telephone at 727-320-1839.

Effective Date The privacy practices outlined in this notice are effective in their entirety on April 14, 2003.