

NOTICE OF HEALTH INFORMATION PRIVACY PRACTICES

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please see the receptionist to request a copy.

Understanding Your Health Record/Information

Each time you visit a hospital, physician or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment.
- Means of communication among the many health professionals who contribute to your care.
- Legal document describing the care you received.
- Means by which you or a third-party payer can verify that services billed were actually provided.
- Tool in educating health professionals.
- Source of data for medical research.
- Source of information for public health officials charged with improving the health of the nation.
- Source of data for facility planning and marketing.

- Tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understanding what is in your record and how your health information is used helps you to:

- Ensure its accuracy.

- Better understand who, what, when, where and why others may access your health information.

- Make more informed decisions when authorizing disclosure to others.

Your Health Information Rights

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have the right to:

Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522. Requests for restrictions on disclosures to your health plan for health care items or services paid out of pocket must be accepted.

- Obtain a paper copy of the notice of information practices upon request.

- Inspect and obtain a copy of your health record as provided for in 45 CFR 164.524 and HB 300 (paper or electronic).

- Amend your health record as provided in 45 CFR 164.528.

- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528.

- Request communications of your health information by alternative means or at alternative locations.

- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

- Receive a notice of a breach of “unsecured” protected health information.

Our Responsibilities

This organization is required to:

- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.

- Abide by the terms of this notice.

- Notify you if we are unable to agree to a requested restriction.

- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

- Notify you of a breach of “unsecured” protected health information.

We reserve the right to change our practices and to make the new provisions effective for all protected health information (PHI) we maintain. Should our information practices change, we will mail a revised notice to the address you have supplied us.

We will not use or disclose or sell your health information without your written authorization, except as described in this notice.

To Report a Problem

If you have questions and would like additional information, you may contact the Privacy Officer at this office: Enrique Acosta, phone number: 7863686212.

If you believe your privacy rights have been violated, you can file a complaint with this office or with the secretary of Health and Human

Services, 200 Independence Ave, SW Room 509F, HHH Building, Washington, D.C., 20201. 1(800)368-1019. There will be no retaliation for filing a complaint.

Examples of Disclosures for Treatment, Payment and Health Operations

Treatment*:* Information obtained by a nurse, physician or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her expectations of the members of your healthcare team. Members of your healthcare team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment. We will also provide subsequent healthcare providers with copies of various reports that should assist them in treating you.

Payment: A bill may be sent to you or a third-party payer. This information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures and supplies used.

Health Operations: 1.**Risk Management** – Members of the medical staff or the risk or quality improvement staff may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide. 2. **Business Associates** – There are some services provided in our organization through contacts with business associates. Examples include radiology, laboratory, copy services, transcription services, contracted, we may disclose your health information to our business associate so that they can perform the job we have asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information. 3. **Notification** – We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, of your location and general condition. 4. **Communication With Family** – Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that person’s involvement in your care or payment related to your care.

5. **Research** – We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information. 6. **Funeral Directors** – We may disclose health information to funeral directors consistent with

applicable law to carry out their duties. 7. **Organ Procurement Organizations** – Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs for the purpose of tissue donation and transplant 8. **Marketing** – We may contact you to provide appointment reminders or face- to- face
information about treatment alternatives or other health-related benefits and services that may be of interest to you. 9. **Food and Drug Administration (FDA)** – We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, recalls, repairs or replacement. 10.**Workers' Compensation**– We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar programs established by law. 11. **Public Health**– As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury or disability. 12. **Law Enforcement** – We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena. 13. **Schools** – We may disclose childhood immunization records to schools.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

This notice is effective and revised as of July 29, 2019 and will remain in effect until revised.