

ETZEL-TYLER HEALTH DEPARTMENT

425 South Fourth Avenue Paden City, WV 26159 (304) 337-2001 fax (304) 337-2004 wetzeltylerhealthdepartment.com

Dr. David Hess, Health Officer

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WETZEL-TYLER HEALTH DEPARTMENT NOTICE OF 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 review it carefully.

YOUR RIGHTS

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

YOU HAVE THE RIGHT TO:

Get an electronic or paper copy of your medical record.

You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this. We will provide a copy or a summary of your health information, usually within 30 days of your request.

Ask us to correct your medical record.

Ask us to correct health information about you that you think is incorrect or incomplete. As us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 days.

Request confidential communications.

You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests.

Ask us to limit what we use or share.

You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.

Get a list of those with whom we've shared information.

You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why. We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make).

Get a copy of this privacy notice.

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you.

If you have given someone medical power of attorney or if someone is your legal guardian, that person can

exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.

You can file a complaint if you feel your rights are violated.

You can complain if you feel we have violated your rights by contacting us. Complaints may be directed to:

Privacy Officer Wetzel-Tyler Health Department 425 South Fourth Avenue Paden City, WV 26159 304-337-2001

You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights 200 Independence Avenue, S.W. Washington, D.C. 20201 877-696-6775 www.hhs.gov/ocr/privacy/hippa/complaints/

We will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share.

If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do and we will follow your instructions.

In these cases, you have both the right and choice to allow or disallow us to:

- Share information with your family, close friends, or other involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory
- Contact you for fundraising efforts

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases, we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In case of fundraising:

• We may contact you for fundraising efforts, but you can tell us not to contact you again. OUR USES AND DISCLOSURES

How do we typically use or share your health information?

We typically use or share your health information in the following ways:

To treat you

We can use your health information and share it with other professionals who are treating you. For example, a doctor treating you for an injury may ask another doctor about your overall health condition.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary. For example, we use health information when needed to lessen a serious and imminent threat to health or safety.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities. For example, we give information about you to your health insurance plan so it will pay for your services.

HOW ELSE CAN WE USE OR SHARE YOUR HEALTH INFORMATION?

We are allowed or required to share your information in other ways—usually in ways that contribute to the public good, such as public health and research. We must meet many conditions in the law before we can share your information for these purposes. More information is available at: www.hhs.gov/ocr/privacy/hippa/understanding/consumers/index.html.

Help with public health and safety issues

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

• We can use or share your information for health research.

Comply with the law

• We will share information about you if state or federal laws require it, including with the Department of Health and Human Services to verify that we are complying with federal privacy law.

Respond to organ and tissue donation requests

We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

• We can share health information about you with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests We can use or share health information about you:

- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

• We can share health information about you in response to a court or administrative order, or in response to a subpoena.

OUR RESPONSIBILITIES

- Law requires us to maintain the privacy and security of your protected health information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing.

If you tell us we can, you may change your mind at any time. Let us know in writing of your decision.

• We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

FOR MORE INFORMATION

More information about your health information privacy rights is available online at: www.hhs.gov/ocr/privacy/hippa/understanding/consumers/index.html

CHANGES TO THE TERMS OF THIS NOTICE

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request in our office.

EFFECTIVE DATE

This notice became effective on January 1, 2018.

THIS NOTICE OR PRIVACY PRACTICES APPLIES TO:

Wetzel-Tyler Health Department

DIRECT ALL QUESTIONS, CONCERNS AND COMPLAINTS TO:

Privacy Officer Wetzel-Tyler Health Department 425 South Fourth Avenue Paden City, WV 26159 Phone (304)337-2001 Fax (304)337-2004