

Klamath Family Practice Center PC

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW PROTECTED MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GAIN ACCESS TO THIS INFORMATION. *Please review it, carefully.*

The Klamath Family Practice Center PC is required, by federal and state laws, to maintain the privacy of "Protected Health Information" (PHI) and to provide Notice about your rights and our legal duties with respect to your PHI. We must abide by the terms in this Notice while it is in effect. This Notice is effective as of April 14, 2003. Some of the uses and disclosures described in this Notice may be limited in certain cases by applicable state laws that may be more stringent than federal standards.

1. Klamath Family Practice Center PC is permitted to make uses and disclosures of protected health information for treatment, payment and health care operations, as described in the following examples:
 - a) **FOR TREATMENT** - We may use and disclose your PHI to assist your health care providers (doctors, dentists, hospitals, physical therapists, pharmacies and others) in your diagnosis and treatment. Example: your provider may contact your primary physician to verify or obtain additional information concerning your treatment and PHI may be disclosed in this process.
 - b) **FOR PAYMENT** - We may use and disclose your PHI in order to process claims, and seek reimbursement for your health expenses covered by your health insurance or third party insurers. Example: we may contact your insurer to determine whether it will pay for your treatment. Your information on or accompanying the billing may include PHI.
 - c) **FOR HEALTH CARE OPERATIONS** - We may use and disclose your PHI in order to perform our administrative activities, including data management and customer service. Example: Klamath Family Practice Center may use your health records to monitor the performance of Klamath Family Practice Center, to improve quality and effectiveness; to describe or recommend treatment alternatives and/or information on benefits or services available that may be of interest.
2. **PHI SECURITY** – We require our employees to follow Klamath Family Practice Center PC security practices, and only those employees who require patient PHI to perform their job responsibilities are allowed access. In addition, Klamath Family Practice Center PC maintains physical, administrative and technical securities protocol to safeguard your PHI.
3. **OTHER PHI DISCLOSURE**- Klamath Practice Center PC is permitted or required by law, under specific circumstances, to use or disclose protected health information without the individual's written authorization.
 - **REQUIRED BY LAW**- We may disclose PHI to law enforcement officials in support of law enforcement activities in circumstances as follows: a) when required to do so by law or by legal proceeding; b) or, when such information may be useful to substantiate past or potential acts of crimes, and in compliance with the provisions of this policy.
 - **AVERT A SERIOUS THREAT TO HEALTH OR SAFETY** - We may disclose PHI to avert serious threat to health or safety, in accordance with applicable law and standards of ethical conduct, if workforce members have cause to believe that: a) the disclosure is to a person or persons reasonably able to prevent or lessen a serious and imminent threat to the health or safety of a person or public; or b) the disclosure is necessary for law enforcement authorities to identify or apprehend an individual: 1) because of a statement by an individual admitting participation in a violent crime that the organization reasonably believes may have caused serious physical harm to the victim; or 2) where it appears from all circumstances that the individual has escaped from a correctional institution or from lawful custody.
 - **BUSINESS ASSOCIATES**- We may disclose PHI to business associates. We provide some services through contracts with business associates, and PHI disclosure may be necessary. To protect your PHI, we require our business associates to abide by the appropriate Privacy Regulations.
 - **CORONERS, MEDICAL EXAMINERS and FUNERAL DIRECTORS** - We may disclose PHI about decedents consistent with applicable laws to a Coroner, Medical Examiner, or Funeral Director for the following purposes: 1) to identify a deceased individual; 2) to determine cause of death; 3) other duties as authorized by law.

- **HEALTH OVERSIGHT ACTIVITIES-** We may disclose PHI to a health oversight agency for oversight activities authorized by law, including audits; civil administrative or criminal investigations; inspections, licensure or disciplinary action; civil, administrative or criminal proceedings or actions; or other activities necessary for the proper oversight of: a) the health care system; b) government benefit programs for which PHI is relevant to benefit eligibility; c) entities subject to government standards for compliance with respect to protected health information; d) entities subject to civil rights laws for which PHI is necessary to determine compliance.
 - **JUDICIAL and ADMINISTRATIVE PROCEEDINGS-**We may disclose PHI in the course of any judicial or administrative proceeding, in response to a) an order of a court or tribunal; b) or a subpoena, discovery request, or other lawful process that is not accompanied by an order of a court or tribunal.
 - **ORGAN and TISSUE DONATION PURPOSES-** We may disclose PHI for organ and tissue donation for the purposes of facilitating organ, eye or tissue donation and transplantation, and may use or disclose PHI to entities engaged in the procurement, banking or transportation of cadaveric organs, eyes or tissues.
 - **PEOPLE INVOLVED in an INDIVIDUAL'S CARE-** We may disclose PHI to people involved in an individual's care to facilitate individual's care or payment.
 - a. We may disclose to an individual's family member, or other relative, or a close personal friend of the individual, or any other person identified by the individual, if such PHI is 1) directly relevant to the recipient's involvement with the individual's care; 2) relevant to make payment related to the individual's health care.
 - b. We may disclose individual's PHI if doing so is necessary to identify, locate and notify a family member, personal representative, or other person responsible for the care of the individual.
 - **PUBLIC HEALTH ACTIVITIES-** We may disclose PHI for public health activities, in accordance with the law, to public health or government authorities or their agents as follows:
 - a. For purposes of preventing or controlling disease, injury or disability, including, but not limited to 1) reporting of disease; 2) birth or death; 3) the conduct of public health surveillance, investigations or interventions.
 - b. Officials of foreign governments acting in collaboration with public health authorities, and who have been authorized to receive such information by the public health authority.
 - c. Public health or appropriate governmental authorities authorized by law to receive reports of child abuse and neglect.
 - d. A person subject to jurisdiction of the Food and Drug Administration (FDA), with respect to an FDA-regulated product or activity for which that person has responsibility, for the purpose of activities related to the quality, safety or effectiveness of such FDA – regulated product or activity.
 - **RESEARCH-** We may disclose PHI about you for research purposes. All research projects are subject to special approval and measurements have been taken to protect your privacy.
 - **SPECIALIZED GOVERNMENT FUNCTIONS-** We may disclose PHI for specialized government functions, including but not limited to: 1) military and veterans affairs; 2) national security and intelligence activities; 3) protective services for the President and others; 4) medical suitability determinations; 5) correctional institutions and other law enforcement custodial situations; 6) entities covered by the Privacy Regulation that are government programs providing benefits.
 - **VICTIMS of ABUSE, NEGLECT or DOMESTIC VIOLENCE-** We may disclose PHI regarding victims of abuse, neglect or domestic violence to a social or protective services agency, or other appropriate government agency authorized by law to receive reports of abuse, neglect or domestic violence. We may disclose the protected health information of an individual for whom workforce members have reasonable cause to believe is the victim of abuse.
 - **WORKERS' COMPENSATION –**We may disclose PHI for workers' compensation to the extent necessary to comply with laws relating to workers' compensation, or other similar programs established by law to provide benefits for work-related injuries or illnesses, without regard to fault.
4. Other uses and disclosures will be made only with the individual's written authorization, and the individual may revoke such authorization at any time, in writing, except to the extent we have already taken action on the information disclosed or if we are permitted by law to use the information.
 5. Klamath Practice Center PC intends to engage in one or more of the following activities:
 - a. Klamath Practice Center PC may contact the individual to provide appointment reminders, or information about treatment alternatives or other health-related benefits and services that may be of interest to the individual or patient.

- b. We elect to limit the uses or disclosures you are permitted to make, as follows: Your request for a restriction must be made in writing. Your request must tell us: 1) what information you want to limit; 2) whether you want to limit how we use or disclose your information or both; and 3) to whom you want the restrictions to apply. We may not agree to your request. If we do agree, we will comply with your request unless the information is needed for an emergency or required by law. Klamath Practice Center PC will respond to your request in written form.
 6. The individual has the following rights regarding protected health information:
 - a. **ACCESS** – The right to request restrictions on certain uses and disclosures of protected health information. Klamath Practice Center PC is not required to agree to a requested restriction, however.
 - b. **COMMUNICATIONS**-The right to receive confidential communications of protected health information, as applicable. You have the right to request that we use a certain method to communicate with you about your PHI, or that we send related information to a specific location if the communications could endanger you. Your request to receive confidential communications must be made in writing, and must clearly state that all or part of the communication from us could endanger you. Your request must specify how or where you wish to be contacted. We will accommodate all reasonable requests.
 - c. **INSPECT and COPY**- The right to inspect and copy protected health information, as provided in the Privacy Regulation. These records usually include chart notes, prescriptions, billing and claims information and medical management information. To view or copy your PHI, you must make your request in writing. We may charge you an administrative fee for the costs of copying, mailing or supplies needed to support your request. If you are denied access due to certain limited circumstances, you may request that the denial be reviewed.
 - d. **AMEND** - The right to amend protected health information, as provided in the Privacy Regulation. If you think that the PHI currently maintained by Klamath Family Practice Center PC is incorrect or incomplete, you may request that we amend the information. Your request must be made in writing and include the reason you are seeking a change. We may deny your request if you ask us to amend information that was not documented by us, or you ask us to amend a record that is already accurate and complete. If Klamath Family Practice Center PC denies your request to amend, we will notify you in writing. You do have the right to submit to us, in writing, a statement of disagreement and we have the right to rebut your statement.
 - e. **ACCOUNTING** - The right to receive an accounting of disclosures of your protected health information. The list will not include our disclosures related to your treatment, billing or receipts of payment, health care operations, for notification purposes, disclosures made to you or with your authorization. Your request for accounting disclosures must be made in writing and must state the period of time that you would like an accounting. This time period may not be longer than six years, and may not include dates before April 14, 2003. We may charge you an administrative fee for copying, mailing and supplies necessary to fulfill your request.
 - f. **PAPER COPY** - The right to obtain a paper copy of the Notice from the covered entity upon request. This right extends to an individual who has agreed to receive the Notice, electronically.
 7. Klamath Family Practice Center PC is required by law to maintain the privacy of protected health information, and to provide individuals with notice of its legal duties and Privacy practices with respect to protected health information.
 8. Klamath Family Practice Center PC reserves the right to change the terms of this Notice. The new Notice provisions will be effective for all protected health information that it maintains.
 9. Klamath Family Practice Center PC will provide individuals or patients with a revised Notice whenever we make a material change to the privacy practices described in this Notice. We will also post a copy of our current Notice at Klamath Family Practice Center PC. Any time we make a material change to this Notice, we will promptly revise and issue the Notice with the new effective date. Klamath Family Practice Center PC reserves the right to change the terms of this Notice at any time, for PHI that we already have about you, as well as any information that we receive in the future.
 10. Individuals may complain to Klamath Family Practice Center PC and to the Secretary of the Department of Health and Human Services, without fear of retaliation by the organization if you believe your privacy rights have been violated. All complaints regarding Klamath Family Practice Center PC must be in writing and sent to the attention of the HIPAA Privacy Officer. We support your right to protect the privacy of your PHI.