

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

Camai Community Health Center, Inc. is required, by law to maintain the privacy and confidentiality of your protected health information and to provide our patients with notice of our legal duties and privacy practices with respect to your protected health information.

Disclosure of Your Health Care Information

Treatment:

We may disclose your health care information to other health care professionals for the purpose of treatment, payment or health care operations. (example)

“On occasion, it may be necessary to seek consultation regarding your condition from other health care providers associated with Camai CHC, Inc.”

“It is our policy to provide a substitute health care provider, authorized by Camai CHC, Inc., to provide assessment and/or treatment to our patients, without advanced notice, in event of your primary health care provider’s absence due to vacation, illness, or other emergency situations.”

Payment:

We may disclose your health care information to insurance companies or other responsible parties for the purpose of payment or health care operations.

(Example)

“As a courtesy to our patients, we will submit an itemized billing statement to insurance carriers for the purpose of payment to Camai CHC, Inc. for health care services rendered. If you pay for your health care services personally, we will, as a courtesy, provide an itemized billing to your insurance carrier for the purpose of reimbursement to you. The billing statement contains medical information, including diagnosis, date of service, and codes which describe the health care services received.”

Worker’s Compensation:

We may disclose your health information as necessary to comply with State Workers’ Compensation Laws.

Emergencies:

We may disclose your health information to notify or assist in notifying a family member, or another person responsible for your care, about your medical condition or in the event of an emergency or of your death.

Public Health:

As required by law, we may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or disability, reporting child abuse or neglect, reporting domestic violence, reporting to the Food and Drug Administration problems with products and reactions to medications, and reporting disease or infection exposure.

Judicial and Administrative Proceedings:

We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order of subpoena, and other law enforcement purposes.

Deceased Persons:

We may disclose your health information to coroners or medical examiners.

Organ Donation:

We may disclose your health information to organizations involved in procuring, banking, or transplanting organs and tissues.

Research:

We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board.

Public Safety:

It may be necessary to disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.

Specialized Government Agencies:

We may disclose your health information for military, national security, prisoner and government benefits purposes.

Contacting You:

We may contact you for reminders as described below:

“We may call with test results or to schedule follow up appointments. If you are not at home we may leave a message on your answering machine or with the person answering the phone. No personal health information will be disclosed during this recording or message other than a request to call our office.”

Your Health Information Rights:

- You have a right to request restrictions on certain uses and disclosures of your health information. Please be advised, however, that Camai CHC, Inc. is not required to agree to the restriction that you requested.
- You have a right to have your health information received or communicated through an alternative method or sent to an alternative location other than the usual method of communication or delivery, upon your request.
- You have a right to inspect and copy your health information.
- You have a right to request that Camai CHC, Inc. amend your protected information. Please be advised, however, that Camai CHC, Inc. is not required to agree to amend your protected health information. If your request to amend your health information has been denied, you will be provided with an explanation of our denial reason(s) and information about how you can disagree with the denial.
- You have the right to receive an accounting of disclosures of your protected health information made by Camai CHC, Inc. You have a right to a paper copy of this Notice of Privacy Practices at any time upon request.

Changes to this Notice of Privacy Practices:

Camai CHC, Inc. reserves the right to amend the Notice of Privacy Practices at any time in the future, and will make the new provisions effective for all information that it maintains. Until such amendment is made, CamaiCHC, Inc. is required by law to comply with this Notice.

Camai CHC, Inc. is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about your privacy rights, please contact our Privacy Officer by calling this office.

Complaints:

Complaints about your privacy rights or how Camai CHC, Inc. has handled your health information should be directed to our Privacy Officer by calling this office.

If you are not satisfied with the manner in which the office handles your complaint, you may submit a formal complaint to:

DHHS, Office of Civil Rights

200 Independence Avenue, S.W.

Room 509 F HHH Building

Washington, DC 20201