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District Administrator: Caitlin Blagg Safety/ Privacy Officer: Shawn Payne

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

Please review this document carefully.

General Rule

This notice describes information about privacy practices followed by Sherman County Medical Clinic healthcare providers, our employees, staff and other office personnel. The practices described in this notice will also be followed by health care providers you consult with by telephone (when your regular healthcare provider from our office is not available) who provider "call coverage" for your healthcare provider.

This notice applies to the information and records we have about your health and healthcare and services you receive at this office.

At Sherman County Medical Clinic, we have made a continuous effort to maintain professionalism and confidentiality when dealing with private patient information. Due to the advances in technology and the way information is transferred and stored, the Federal government has enacted an additional set of regulations called *The Health Insurance Portability and Accountability Act* (HIPAA) with which we will also comply.

We are not required by law to give you this notice of our privacy practices, and we respect our legal obligation to keep health information that identifies you private.

Generally, we can only use your health information in our office or disclose it outside of our office, without your written permission, for purposes of treatment, payment, or healthcare operations. In most other situations, we will not use or disclose your health information unless you sign a written authorization form. In some limited situations, the law allows or required us to disclose your health information without written authorization.

Uses or Disclosures of Health Information

Examples of how we use information for treatment purposes:

- When we set up an appointment for you
- When our medical assistant or provider examines you
- When the provider prescribes medication
- When the provider uses your medical history to decide what treatment is best for you
- When the provider confides in another healthcare provider to help determine the most appropriate care for you

We may disclose your health information outside of our office for treatment purposes, for example:

- If we refer you to another provider for specialized care
- When family members who are involved in your care require information about you
- When you are referred to another entity for tests and/or treatment that we do not provide
- When we provide a prescription for medication to a pharmacist
- When we phone to let you know that you are scheduled for follow-up care

Sometimes we may ask for copies of your health information from another professional that you may have seen before.

We may use your health information within our office or disclose your health information outside of our office for payment purposes. Some examples are:

- When our staff ask you about healthcare plans (Insurance) that you may belong to, or about other sources of payment for our services
- When your insurance provider requires prior authorizations for treatments
- When we try to collect unpaid amounts due
- When bills or claims for payment are mailed, faxed or sent electronically to you or your health plan
- When we occasionally have to ask a collection agency or attorney to help us with unpaid amounts due.

We use and disclose your health information operations in a number of ways. Healthcare operations mean those administrative and managerial functions that we have to do in order to run our office. We may use or disclose your health information, for example, for financial or billing audits, for internal quality assurance, for personnel decisions, to enable our providers to participate in managed care plans, for the defense of legal matters, to develop business plans, and for outside storage of our records.

Appointment Reminders

We may call to remind you of scheduled appointments. We may also call to notify you of other treatments or services available at our office that might help you. If/When you are not available a brief message may be left on your answering machine.

Uses & Disclosures without an Authorization

In some limited situations, the law allows ore requires us to use or disclose your health information without your permission. Not all of these situations will apply to us; some may never happen at our office at all. Such uses or disclosures are:

- A state or federal law that mandates certain health information be reported for a specific purpose
- Public health purposes, such as contagious disease reporting, investigation or surveillance; and notices to and from the Food and Drug Administration regarding drugs or medical devices
- Disclosures to governmental authorities about victims of suspected abuse, neglect, or domestic violence
- Uses and disclosures for health oversight activities, such as for the licensing of providers, audits by Medicare or Medicaid, or investigation of possible violations of healthcare laws
- Disclosures for judicial and administrative proceedings, such as in response to subpoenas or orders of courts or administrative agencies
- Disclosures for law enforcement purposes, such as to provide information about someone who is or is suspected to be a victim of a crime, to provide information about a crime at our office, or to report a crime that happed somewhere else
- Disclosure to a medical examiner to identify a deceased person or to determine the cause of death; or to funeral directors to aid in burial; or to organizations that handle organ or tissue donations
- Uses or disclosures for health-related research
- Uses and disclosures to prevent a serious threat to health or safety

- Uses or disclosures for specialized government functions, such as for lawful national intelligence activities, for military purposes, or for the evaluation and health of members of the foreign service
- Disclosures relating to workers' compensation programs and claims
- Disclosures to business associates who perform healthcare operations for us and who agree to keep your health information private

Other Disclosures

We will not make any other uses or disclosures of your health information unless you sign a written authorization form. You do not have to sign such a form. If you do sign one, you make revoke it at any time unless we have already acted in reliance upon it.

Your Rights Regarding Your Health Information

- You can ask us to restrict our uses and disclosures for purposes of treatment (except emergency treatment), payment or healthcare operations. We do not have to agree to do this, but if we agree, we must honor the restrictions that you want. To ask for a restriction, send a written request to the Privacy Officer or District Administrator at the address shown at the beginning of this notice.
- You can ask us to communicate with you in a confidential way, such as phoning you at work rather than at home or by mailing health information to a different address. We will accommodate those requests if they are reasonable, and if you pay for any extra cost. If you want to ask for confidential communications, send a written request to the Privacy Officer or District Administrator at the address shown at the beginning of this notice.

Our Notice of Privacy Practices

By law, we must abide by the terms of this *Notice of Privacy Practices* until we choose to change it. We reserve the right to change this notice at any time in compliance with and as allowed by law. If we change this notice, the new privacy practices will apply to your health information that we already have, as well as to such information that we may generate in the future. If we change our *Notice of Privacy Practices*, we will post the new notice in our office, and have copies available in our office.

Complaints

If you think that we have not properly respected the privacy of your health information, you are free to complain to us. We will not retaliate against you if you make a complaint. If you want to complain to use, send a written complaint to the Privacy Officer or District Administrator at the address shown at the beginning of this notice. If you prefer, you can discuss your complaint in person or by phone.

For More Information

If you want more information or if you have questions about our privacy practices, please call or visit the Privacy Officer or District Administrator at the address or phone number shown at the beginning of this notice.