

# Notice of Privacy Practices

**Your information.**  
**Your rights.**  
**Our responsibility.**

This notice explains how we may use and share your medical information and how you can access it. Please read it carefully.

# Your Rights

When it comes to your health information, you have certain rights. Here are your rights and what we will do to help you.

## **Get a Copy of Your Medical Record**

You can ask to see or get a copy of your medical records and other health information we have about you. You can choose to get it electronically or on paper. Just ask us how.

We will give you a copy or summary of your health information within about a month. Sometimes we may charge a reasonable fee for this.

## **Ask Us to Correct Your Medical Record**

If you think there's something wrong or missing in your health information, you can ask us to correct it. Just let us know what is wrong or missing.

We may not always agree with your request, but we will explain why in writing within two months.

## **Request Confidential Communications**

You can ask us to contact you in a specific way, like calling your home or office phone, or sending mail to a different address.

We will say “yes” to reasonable requests like these.

## **Ask Us to Limit the Use or Sharing of Your Information**

You can ask us not to use or share certain health information.

If it would affect your care, we may have to say no. However, if you pay for a service or healthcare item on your own, you can ask us not to share that information with your health insurer, and we will agree unless the law requires us to share it.

## **Get a List of Information Shared**

You can ask us for a list of the times we’ve shared your health information in the past six years, who we shared it with, and why.

We will provide this list, except for information related to treatment, payment, healthcare operations, and certain other disclosures that you requested. You can get one free list per year,

but if you ask for another within 12 months, we may charge a reasonable fee.

### **Get a Copy of This Privacy Notice**

You can ask for a paper copy of this notice any time, even if you agreed to receive it electronically. We will give you a paper copy without delay.

### **Choose Someone to Act for You**

If you have given someone medical power of attorney or have a legal guardian, that person can exercise your rights and make decisions about your health information.

We will confirm their authority before taking any action.

### **File a Complaint if Your Rights are Violated**

If you feel we have violated your rights, you can complain to us using the contact information provided. You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. They can be reached by sending a letter to 200 Independence Avenue, S.W. Washington, D.C. 20201, calling 1-877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/).

We will not punish or retaliate against you for filing a complaint.

## Your Choices

### **How We Use and Share Information**

You have the power to choose how we share certain health information. If you have a specific way you want us to handle your information in the situations we describe below, just let us know. Tell us what you prefer, and we will follow your instructions.

### **In these situations, you have the right and choice to ask us to:**

- Share information with your family, close friends, or others involved in your care, but only if you give us written permission.
- Share your information in case of a disaster to help with relief efforts.
- Include your information in a hospital list or directory.

Note: If you are unable to let us know your preference, such as if you are unconscious, we might still share your information if we believe it is in your best interest. We may also share your information when necessary to prevent a serious and immediate threat to health and safety.

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

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

# How do we typically use or share your health information?

Usually, we use or share your health information in the following ways.

## **To treat you**

We can use your health information and share it with other healthcare professionals who are treating you.

*Example:* If a doctor treating you for an injury wants to know about your overall health condition, they may ask another doctor.

## **To run our organization**

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

*Example:* We use health information about you to manage your treatment and services.

## **To bill for our services**

We can use and share your health information to bill and receive payment from health plans or other entities.

*Example:* We provide information about you to your health insurance plan so they will pay for the services you receive.

## **Other ways we can use and share your health information**

We sometimes need to use or share your health information for different reasons. This is usually done to help the public good, such as public health and doing research. Before we can share your information, we have to follow certain rules set by the law. If you want more details, you can visit this website:

[www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html).

Here are some examples of how we might use or share your health information:

### **Helping with public health and safety:**

We can share your health information to prevent diseases. If there's a problem with a product, we can use your information to help with a product recall. If you have a bad reaction to a medication, we need to report it.



If we suspect abuse, neglect, or domestic violence, we have to report it.

If someone's health or safety is in serious danger, we may use your information to prevent harm.

**Doing research:**

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

**Following the law:**

If state or federal laws require it, we will share your information. This includes sharing it with the Department of Health and Human Services to make sure we follow privacy laws.

**Organ and tissue donation:**

We can share your health information with organizations that handle organ donations.

**Working with medical professionals after death:**

When someone passes away, we can share health information with a coroner, medical examiner, or funeral director.

## **Dealing with workers' compensation, law enforcement, and government requests:**

We may use or share your health information for worker's compensation claims. In certain situations, we can share it with law enforcement officials. Health oversight agencies authorized by law may also receive your information. If there are special government functions like military, national security, or presidential protective services, we might share your information.

## **Responding to lawsuits and legal actions:**

If we receive a court or administrative order, or a subpoena, we may share your health information.

We follow federal privacy regulations and also Michigan law when using and sharing your health information. Michigan law has additional protections for sensitive information related to HIV/AIDS, alcohol and other substances, and mental health.

# Our Responsibilities

By law, we have to keep your private health information safe and secure.

If there is ever a situation where your privacy and security might have been compromised, we will inform you right away.

We have to follow the rules and practices described in this notice, and we'll give you a copy of it.

We won't use or share your information in any other way unless you give us written permission. And if you change your mind later, just let us know in writing.

For more information, visit [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html).

## **Changes to the Terms of this Notice:**

We can make changes to this notice, and those changes will apply to all the information we have about you. If you want to see the new notice, you can ask for it in our office or find it on our website.

This Notice of Privacy Practices applies to InterCare Community Health Network.

Privacy Officer  
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