

SUMMARY OF YOUR PRIVACY RIGHTS

I. Understand Your Medical Record/Information.

Each time you visit the Tule River Indian Health Center, Inc. for healthcare services, a record is made of this visit in our Next-Gen Electronic Health Record (EHR) System. If you are referred out by the Tule River Indian Health Center, Inc. through Contract Health Service (CHS) program, the Tule River Indian Health Center, Inc. also keeps record of your CHS visit. Typically contained within this record are your presenting symptoms, examination findings, test results, diagnoses, your treatment plan, and your healthcare provider's plan for your future medical care. Also contained in this record is your personal or demographic information including: Your Dated of Birth, Social Security Number, Home Address, Phone Number, and Health Insurance Information. This information, often referred to as your medical or health record, serves as a:

- Plan for your healthcare or medical treatment.
- Source of communication between health care professionals involved in your healthcare.
- Tool that the Tule River Indian Health Center, Inc. can utilize to check results and continually work to improve the healthcare we provide.
- Tool for the education of healthcare professionals.
- Means by which Medicare, Medi-Cal, or private insurance payers can utilize to verify the services billed.
- Source of information for public health authorities charged with improving the healthcare of our community.
- Source that provides essential statistical information to the Indian Health Service (IHS) and the Department of Health and Human Services (DHHS) who is charged with determining the quantity and quality of healthcare delivery to Native Americans.

Understanding what is contained within your medical record in the Next-Gen Database, and how the information is used helps you to:

- Ensure the accuracy of your health information
- Better understand how and why others may review your health information.
- Make an informed decision when authorizing any disclosures of your health information.

II. Your Rights to Your Medical Record Information.

Although your medical record is the physical property of the Tule River Indian Health Center, Inc., the information belongs to you. Due to this fact, you have the right to:

- Request and receive a copy of your medical record for your review. Request a restriction on certain uses and disclosures of your health information. For example, you may ask that the Tule River Indian Health Center, Inc., or its affiliates, not disclose your health information and/or treatment plan to a family member. The Tule River Indian Health Center, Inc. is **NOT** required to agree to your request; but if we do, we will comply with your request unless the information, and the use of it, is required to provide you with emergency healthcare services.
- Opt out of communications for fundraising purposes

- Request a correction/amendment to your medical record if you believe the health information we have is incorrect or incomplete. At the discretion of the Tule River Indian Health Center, Inc., we may make this amendment upon completion and receipt of your Statement of Disagreement.
- Request that communications regarding your health information be done in confidence, and that you be contacted either by home telephone, work telephone, or by written communication sent via postal mail to an address of your choice.
- Request and receive a listing of certain disclosures the Tule River Indian Health Center, Inc. has made of your health information.
- Revoke your written authorization to use or disclose your health information. This does not apply to health information already disclosed for the purpose of continuity of care or as a condition of obtaining insurance coverage and the insurer has the legal right to contest a claim under the policy or to contest the policy itself.
- Obtain a paper copy of the Tule River Indian Health Center, Inc.'s Notice of Privacy Practice (NPP) upon request.

III. Responsibilities of Tule River Indian Health Center:

- The Tule River Indian Health Center, Inc. is required by law to:
- Maintain the privacy of your health information.
 - Notify you in the event there is a breach of your Protected Health Information
 - Inform you in writing about our privacy practices regarding health information about you that we obtain and maintain.
 - Notify you in writing if we are unable to agree to a requested restriction.
 - Accommodate reasonable requests you may have to communicate your health information by an alternative means or location.
 - Honor the terms of this Notice of Privacy Practice or any subsequent revisions of this notice.

The Tule River Indian Health Center, Inc. reserves the right to change it's privacy practice at any time and to make the new provisions effective for all of the Protected Health Information (PHI) it stores and maintains. The Tule River Indian Health Center, Inc. will post any and all revised Notices of Privacy Practices in public places within its healthcare facilities and you may request a copy of this notice at any time.

The Tule River Indian Health Center, Inc. understands that health information about you is personal and that the discretion of its use is very important. We would like to assure you that we are committed to protecting the health information about you that we store and maintain. Furthermore, the Tule River Indian Health Center, Inc. will not disclose your health information without your written permission, except as described in this notice and as permitted by the Privacy Act.

IV. How the Tule River Indian Health Center, Inc. may use and disclose your health information.

The following categories describe how we may use and disclose your health information:

- We Will Use and Disclose Your Health Information to Provide You With Medical Treatment.** For example:
- Your personal information will be obtained from you and recorded in your medical record. This information will be utilized in various courses of our delivery of medical care to you. Your Healthcare

team. All information including actions taken and the observations made by your healthcare team will be recorded in your medical record, and this information will be utilized by your Healthcare Provider to determine how you are responding to his/her treatment plan for you.

- If the Tule River Indian Health Center, Inc. refers you to another health care facility or healthcare provider, we may disclose your health information to that healthcare facility or healthcare provider to the purpose of treatment or medical decision making.
- If your care is transferred to another facility for further medical care and/or treatment, the Tule River Indian Health Center, Inc. may disclose your health information to that facility to include: Demographic information, past medical history, extent of treatment already received, and other relevant information about the condition of your health.
- We will require your written consent prior to using and/or disclosing your psychotherapy notes, or to utilize your Protected Health Information for marketing purposes

We Will Use and Disclose Your Health Information for the Purpose of Obtaining Payment. For example:

- If you have private health insurance, Medicare, and/or Medi-Cal coverage, a bill for healthcare services provided will be sent to your health insurance plan for payment. The information on or accompanying the bill will include information that identifies you, your healthcare provider's diagnosis for you, as well as any healthcare services rendered to you during a visit with you healthcare provider.
- If the Tule River Indian Health Center, Inc. refers you to another health care provider for medical treatment under the Contract Health Service (CHS) program, we may disclose your health information to that provider for healthcare payment purposes.

We Will Use and Disclose Your Health Information for the Purpose of Healthcare Operations. For example:

- Quality improvement teams and committees may utilize your health information for the purpose of evaluating various care and treatment outcomes. The use of this information will be to continually improve the quality and effectiveness of the healthcare services we provide to our community members. This includes health care services provided under the Contract Health Service (CHS) program.



NOTICE OF PRIVACY PRACTICES

February 2013

TULE RIVER INDIAN HEALTH CENTER, INC.

380 N. RESERVATION RD
PORTERVILLE, CA 93257

PHONE: (559) 784-2316
FAX: (559) 781-6514

SUMMARY OF YOUR PRIVACY RIGHTS

This Notice of Privacy Practice describes how the Tule River Indian Health Center, Inc. may use or disclose your health information to carry out treatment, request payment for healthcare operations, and for other purposes that are permitted or required by law. It also describes your rights to access and control your protected health information. "Protected Health Information" (PHI) is simply information about you including: Demographic information or information that identifies you, health information that relates to your past, present or future physical or mental health conditions, and/or information on healthcare services provided to you.

Your protected health information may be used and disclosed by your physician, our staff and others outside of our facility who are directly involved in your healthcare and treatment. Such disclosures will be for the sole purpose of providing healthcare services to you. This includes uses and/or disclosures of your protected health information for the purpose of obtaining payment from your health insurance company for healthcare services provided to you.

Your health information may be used and or disclosed for the following:

Business Associates: We may use and/or disclose your protected health information with third party "Business Associates" that perform various services for the Tule River Indian Health Center, Inc. Whenever an arrangement between the Tule River Indian Health Center, Inc. and a Business Associate involves the use and/or disclosure of your health information, we will have a written contract, or Business Associate Agreement (BAA) that contains the terms that will protect the privacy and use of your protected health information.

The Following are business associates of the Tule River Indian Health Center, Inc. with whom we may disclose your health information:

- **California Rural Indian Health Board (CRIHB)**- Membership organization which the Tule River Indian Health Center, Inc. utilized for staff training, Electronic Health Record support, and reporting healthcare statistical data to the Indian Health Service (IHS).
- **Lab Corp**- Vendor utilized by the Tule River Indian Health Center, Inc. to perform outside lab tests for patients.
- **Next-Gen Healthcare**- Electronic Health Record Vendor utilized by the Tule River Indian Health Center, Inc. The EHR software they provide is where a digital copy of your health record is currently stored and maintained at the Tule River Indian Health Center, Inc.
- **i2i Systems**- Software utility that is utilized by the Tule River Indian Health Center, Inc. for reporting statistical data and tracking various patients for case management purposes.
- **Dentrix Software**- Electronic Dental Record Vendor utilized by the Tule River Indian Health Center, Inc. The software they provide is where a digital copy of your dental record is stored and maintained at the Tule River Indian Health Center, Inc.

Parents/Legal Guardian(s): Typically, the Tule River Indian Health Center, Inc. may use and/or disclose the health information of minors to the parents or legal guardians. The exception to this would be in situations where legal rights and responsibility have been revoked from the parent by court order, and a copy of this court order has been furnished to the Tule River Indian Health Center, Inc. For individuals who have been declared incompetent due to physical or mental incapacity by a court of competent jurisdiction, the Tule River Indian Health Center, Inc. may disclose health information to the court appointed representative as it relates to the personal representation.

Interpreters: In some cases, the Tule River Indian Health Center, Inc. may utilize the services of an interpreter in order to provide proper healthcare and health services. This may require the use and or disclosure of protected health information to the interpreter.

Uses and Disclosures about Decedents: The Tule River Indian Health Center, Inc. may use or disclose health information about decedents to a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death, or other duties as authorized by law. The Tule River Indian Health Center, Inc. may also disclose health information to funeral directors consistent with applicable laws as necessary to carry out their job duties. In addition, the Tule River Indian Health Center, Inc. may disclose protected health information about decedents where required under the Freedom of Information Act or otherwise required by law.

Food and Drug Administration: The Tule River Indian Health Center, Inc. may use and/or disclose your health information to the Food and Drug Administration (FDA) in connection with the consumption or use of an FDA regulated product or activity. For example: we may disclose to the FDA information concerning adverse events involving the consumption of food, consumption or use of dietary supplements, product defects. This information is needed to track FDA-regulated products or to conduct product recalls, repairs, or for post marketing surveillance.

Workers Compensation: The Tule River Indian Health Center, Inc. may use and/or disclose your health information for workers compensation claim purposes, or as otherwise required by law.

Public Health: The Tule River Indian Health Center, Inc. may use and/or disclose your health information to public health departments or other appropriate government authorities as follows:

1. We may use and/or disclose your health information to government authorities that are authorized by law to collect or receive such information for the purpose of preventing or controlling diseases, injuries, disabilities, or to conduct public health surveillance, investigations, and/or interventions.
2. We may use and/or disclose your health information to government authorities that are authorized by law to receive reports of child abuse and/or neglect.
3. We may use and/or disclose your health information to government authorities that are authorized by law to receive reports of other abuse, neglect, or domestic violence as required by law, or as authorized by law if an employee of the Tule River Indian Health Center, Inc. believes it is necessary to prevent serious harm. Where authorized by law, we may disclose your health information to an individual who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition to others. In some situations, the Tule River Indian Health Center, Inc. may use and or disclose to your employer health information concerning a work-related illness or injury or a workplace related medical surveillance for the purpose of preventing the spread of the work-related illness or injury to others.

Correctional Institution: If you are an inmate of a correctional institution, the Tule River Indian Health Center, Inc. may use and/or disclose your health information to the institution to the extent necessary for your health, as well as the health and safety of other individuals such as correctional staff and other inmates.

Law Enforcement: The Tule River Indian Health Center, Inc. may use and/or disclose your health information for law enforcement activities as authorized by law or in response to a verified court of competent jurisdiction (Subpoena).

Health Oversight Authorities: The Tule River Indian Health Center, Inc. may use and/or disclose your health information to health oversight agencies for activities authorized by law. These oversight activities may include: Investigations, audits, inspections, and other actions. These are necessary for the government to monitor the health care system, government benefit programs, and entities that are subject to government regulatory programs and/or civil rights laws for which health information is necessary to determine compliance.

Members of the Military: If you are a member of the military service, the Tule River Indian Health Center, Inc. may use and/or disclose your health information to the appropriate military command authorities as authorized by law

Compelling Circumstances: The Tule River Indian Health Center, Inc. may use and/or disclose your health information in compelling circumstances where the health and safety of another individual may be affected. For example, in certain circumstances:

1. The Tule River Indian Health Center, Inc. may disclose limited health information where requested by law enforcement officials to the extent necessary to identify or locate a suspect, fugitive, material witness, or missing person;
2. Where you are believed to be a victim of a crime and a law enforcement official requests information about you and we are unable to obtain a written authorization to disclose from you due to incapacity or other emergency circumstances, we may disclose the requested information if we determine that such disclosure would be in your best interest;
3. The Tule River Indian Health Center, Inc. may use and/or disclose protected health information as we believe is necessary to prevent or lessen a serious and imminent threat to the health or safety of others;
4. The Tule River Indian Health Center, Inc. may use and/or disclose protected health information in the course of judiciary and administrative proceedings if required or authorized to do so by law;
5. Where a crime is committed on the Tule River Indian Health Center, Inc. premises, we may use and/or disclose protected health information for the purpose of reporting the crime; and
6. The Tule River Indian Health Center, Inc. may utilize and/or disclose protected health information that is required by law.

Non Violation of this Notice: The Tule River Indian Health Center, Inc. is not in violation of this Notice or the HIPAA Privacy Rule if any of its employees or its Business Associates disclose protected health information under the following circumstances:

1. **Disclosures by Whistleblowers.** If an employee of the Tule River Indian Health Center, Inc., or one of its Business Associates, believes in good faith that the Tule River Indian Health Center, Inc. has engaged in conduct that is unlawful or otherwise violates clinical and professional standards or that the care or services provided has the potential of endangering patients, staff members, and/or the public, he/she may disclose protected health information regarding the incident to:
 - a) A Public Health Authority or Health Oversight Authority authorized by law to investigate or otherwise oversee the relevant conduct or conditions, or has jurisdiction over suspected violation, or an appropriate health care accreditation organization to the extent necessary to report the allegation of failure to meet professional standards or misconduct; or
 - b) An attorney on behalf of the workforce member, or business associate, for the purpose of determining their legal options regarding the alleged or suspected violation.
2. **Disclosures by Workforce Member Crime Victims:** Under certain circumstances, a workforce member (either employee or contractor) who is a victim of a crime, that occurred on or off of the Tule River Indian Health Center, Inc.'s premises, may disclose information about the suspect to law enforcement officials provided that:
 - a) The information disclosed is about the suspect to allegedly committed the criminal act.
 - b) The information disclosed is limited to the extent necessary to identifying and locating the suspect.

YOUR RIGHT TO RESTRICT ACCESS

Any other disclosures will be made only with your written authorization, which you may revoke later in writing at any time. Such revocation would not apply where the health information has already been disclosed or used, or in circumstances where the Tule River Indian Health Center, Inc. has already taken in reliance on your authorization, or the authorization was obtained as a condition of obtaining insurance coverage and the insurer has a legal right to contest a claim under the policy or to contest the policy itself.

Furthermore, if you paid for services out-of-pocket, in full, and you request in writing that the Tule River Indian Health Center, Inc. not disclose your Protected Health Information, we will accommodate your request, except where we are required by law to make a disclosure. You may request a 'Request for Restrictions' form from the Tule River Indian Health Center, Inc Patient Receptionist Staff at any time if your wish to request restrictions of disclosure.

To exercise your rights under this Notice, to ask for more information, or to report a perceived violation of your rights, contact the Tule River Indian Health Center, Inc. Compliance Officer at:

P.O. Box 768
Porterville, CA 93257
(559) 784-2316



If you believe your privacy rights have been violated, you may file a written complaint to the Secretary of the US Department of Health and Human Services, Washington D.C. 20201. There will be no retaliation for filing a complaint.