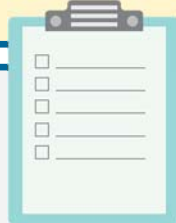




# YOUR HEALTH INFORMATION PRIVACY RIGHTS

## OUR PLEDGE REGARDING HEALTH INFORMATION

We understand that your health information is personal, and we are committed to protecting it. We create a record of the care and services you receive from DHHS. We need this record to provide you with quality care and meet legal requirements.



## WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

At your request

For treatment

For payment

For health care operations

Appointment reminders

Treatment alternatives

Health related products and services

To individuals involved in your care or payment for your care

To our Health Information Exchange (HIE)

For notification

For disaster relief

For research under certain circumstances

To contracted Business Associates

As required by law

To avert a serious threat to health or safety

And other special situations with additional written permission by you

## YOU HAVE THE RIGHT TO

Inspect and get a copy of your health information

A list of disclosures made of your health information by DHHS

Request amendments to your health information

Request restrictions of your health information

Request confidential communications



## YOU HAVE THE RIGHT TO A COPY OF OUR NOTICE OF PRIVACY PRACTICES (NOPP)

Ask the receptionist or your service provider for a copy of the DHHS NOPP and learn how your information is used and shared in DHHS, and how to request your information from DHHS.

Para obtener una copia de notificaciones de prácticas de privacidad (NOPP) del DHHS en español, pregúntele a la recepcionista.