

Your Information. Your Rights. Our Job.



This notice explains how medical information about you may be used and shared and how you can get access to this information. Please review it carefully.

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and what we are supposed to do. You have the right to...

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record, your lab results, and other health information we have about you. Ask us how to do this.
 - We will provide a copy or a summary of your health information, usually within 30 days of your request.
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Ask us to correct your medical record

- You can ask us to correct health information about you that you think is not correct or does not have all the information it should. Ask us how to do this.
 - We may say “no” to your request, but we’ll tell you why in writing within 60 days.
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Request to communicate with us in a certain way

- You can ask us to contact you in a certain way (for example, home or office phone) or to send mail to a different address.
 - We will say “yes” to all requests that we are able to fill.
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Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or how we run our services. We are not required to agree to your request, and we may say “no” if it would affect your care.
 - If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information with your health insurance company. We will say “yes” unless a law requires us to share that information.
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Get a list of those with whom we've shared your information

- You can ask for a list of the times we've shared your health information for up to six years before the date you asked for it, who we shared it with, and why.
- We will include everything except for those about treatment, payment, how our services are run, and certain requests (such as any you asked us to make). We'll provide one list per year for free.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to get the notice electronically (by email). We will provide you with a paper copy right away.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can act for you with your same rights and make choices about your health information.
- We will make sure the person is able to do this (has authority) and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not punish you in any way for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you prefer that we share your information in a certain way, please tell us.

You have the choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation

If you are not able to tell us what you prefer, for example if you are unconscious, we may go ahead and share your information if we believe it is best for you. We may also share your information if it may help prevent a serious threat to someone's health or safety.

We never share your information unless you give us written permission if it is for:

- Marketing
- To sell your information
- Most sharing of psychotherapy notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

How We Use and Share

How do we use or share your health information?

In general, we use or share your health information to...

Treat you

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

Example: A doctor treating you for an injury asks another doctor about your overall health.

Run our organization

We can use and share your health information to run our services, improve your care, and contact you if we need to.

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

Bill for your services

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

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that are for the public good, such as public health and research. We have to meet many rules before we can share your information to...

Help with public health and safety issues

We can share health information about you if it is to:

- Prevent disease
 - Help with product recalls
 - Report bad reactions to medications
 - Report suspected abuse, neglect, or domestic violence
 - Prevent or reduce a serious threat to someone's health or safety
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Do research

We can use or share your information for health research.

Follow with the law

We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're following the federal privacy law.

Respond to organ and tissue donation requests

We can share health information about you with organ donation organizations.

Work with a medical examiner or funeral director

We can share health information with a coroner, medical examiner, or funeral director when someone dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement reasons or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government reasons such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Job

- We are required by law to keep your protected health information private and secure.
 - We will let you know right away if there is any risk to the privacy or security of your information.
 - We must follow the duties and privacy practices described in this notice and give you a copy of it.
 - We will not use or share your information other than as explained here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.
 - For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.
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Health Information Exchange (HIE)

Columbus Public Health is part of an electronic health information exchange (HIE) system that safely and securely shares your health records with other health professionals to help inform them on your health history and give you the best care. If you would like to opt out of this system, please tell a staff member.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. You can get a copy of the new notice if you request it from our office or from our web site.

Other Information About This Notice

- This notice is effective as of September 23, 2013.
- If you want to contact Columbus Public Health's Privacy Officer, her name is Shelly Mitchell. She can be reached by telephone at (614) 645-2738 or by email at smitchell@columbus.gov.

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THE CITY OF
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