



Notice of Privacy Practices

This notice describes how medical information about you may be used or disclosed to others, and how you can access this information. Please review carefully.

Uses and disclosure (sharing) of your health information:

We have chosen to participate in the Chesapeake Regional Information System for our Patients, Inc. (CRISP), a statewide health information exchange. As permitted by law, your health information will be shared with this exchange in order to provide faster access, better coordination of care and assist providers and public health officials in making more informed decisions. You may “opt-out” and prevent searching of your health information available through CRISP by calling 1-877-952-7477 or completing and submitting an Opt-Out form to CRISP by mail, fax or through their website at www.crisphealth.org.

We can use or share your health information only for specific purposes or if you give us permission to do so, this includes to:

- Provide treatment including sharing information with other health professionals who are treating you.
- Run our organization, improve your care, and reach out to you about your health.
- Bill insurance or health plans for services we provide.
- Help with public health and safety issues such as preventing diseases, helping with recalls, reporting adverse reactions to medications, or preventing or reducing a serious threat to anyone’s health or safety.
- Report suspected abuse, neglect, or domestic violence.
- Comply with the law if state or federal laws require it, including with the Department of Health and Human Services or Maryland Department of Health.
- Work with the medical examiner or funeral director.
- Address workers’ compensation, law enforcement, and other government requests.
- Respond to lawsuits and legal actions such as an administrative order or in response to a subpoena.
- We are allowed or required to share your information in other ways that may contribute to public good, such as public health research. We must meet the conditions in the law before we can share any information.

Your rights

You have rights with how we can use your information and how you can exercise these rights. You also have a right to complain about how we managed your information. You have a right to:

- See or get a copy of your medical record and other health information we have about you in order to be informed about your health. You can ask us for information about your medications, tests, labs, or other information about your health! Ask us how to do this.
- Receive a copy or summary of your health information, usually within 30 days of your request.
- Ask us to correct your health information that you think is incorrect or incomplete. While we may say no to your request, we will tell you why in writing within 60 days.

- Tell us how you would like us to communicate with you, whether by phone or mail.
- Ask us to limit what we use or share with others. There are times when we may have to share your information (for treatment or payment purposes) when it impacts your care.
- Ensure that substance use treatment records are only shared with your written permission.
- Ask us for a list of places or times that we have shared your health information for six years prior to the date you ask including who we shared it with and why. Certain disclosures about treatment, payment, or health center operations will not be included.
- Receive a copy of this notice at any time.
- Have someone you have given medical power of attorney or a legal guardian to exercise your rights and make choices about your health information.

If you feel your rights have been violated, you can file a complaint (please see attached complaint procedure) with us. You also have the right to 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 1-877-696-6775, or visiting <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>.

We will not retaliate against you for filing a complaint.

Our responsibility

We have certain legal duties to ensure the protection of your health information.

- We are required by law to maintain the privacy of your protected health information. This includes information about you (name, date of birth, social security number, etc.) or your health information (such as medical conditions, information in your medical record, etc.) This means we must store it appropriately and have the right electronic security in place to protect your records.
- We will not use or share your information other than as described in here, or if you give us permission in writing through a consent to release information. You may change your mind at any time, and can let us know in writing if you change your mind.
- We will let you know promptly and in writing if a breach has occurred that may compromise the privacy or security of your information.
- We must securely transmit your data when sending it to outside sources. But, once we send it to another entity, we are no longer responsible for that information that has been sent.
- We must provide you with this notice anytime you ask and ensure that you understand your rights and access to protected health information.
- We are required to have procedures in place to protect this information, as well as provide staff training on how to protect your health information.

Contact information

If you have questions about our privacy practices, or how we keep your information safe, please ask to speak to the Chief Quality Officer.

For more information on your rights or our responsibility to you, please visit www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.