



PARKWOOD VOLUNTEER FIRE DEPARTMENT, INC. PATIENT PRIVACY NOTICE



THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW CAREFULLY.

Parkwood Volunteer Fire Department (PVFD) is required by law to maintain the privacy of medical information about you and that identifies you, also known as protected health information (PHI). We are also required to give you this Notice that explains your legal rights and our legal duties regarding that PHI.

PVFD is required by law to abide by the terms of the version of this Notice currently in effect. PVFD reserves the right to change the terms of this Notice in the future and to make the new Notice provisions effective for all PHI that it maintains.

You may request a copy of the Notice currently in effect by contacting the PVFD Privacy Officer as listed at the end of this Notice. The Notice currently in effect is also electronically available at the PVFD website, <www.pvfd.com>.

HOW WE MAY USE OR DISCLOSE MEDICAL INFORMATION ABOUT YOU

PVFD may use or disclose your medical information for the purposes of treatment, payment and other health care operations without your consent.

Treatment. We may use or disclose your health information to a physician or other health care provider providing treatment to you

Payment. We may use or disclose your health information to obtain payment for services we provide to you.

Health care operations. We may use or disclose your health information for operations such as quality assessment; evaluation of provider performance; training and certification of healthcare practitioners.

PVFD is authorized to use or disclose your health information without your consent in certain situations.

North Carolina Medical Database. NC requires us to export your personal information into a state-maintained medical database.

Abuse or Neglect. We will disclose your PHI to appropriate authorities if we reasonably believe that you may be the victim of abuse or neglect. We will release information to the extent necessary to prevent a serious threat to your health or safety or the health or safety of others.

Public Health Investigations. We will release PHI to avert a health threat to a person or public at large.

National Security. We will release your PHI to authorized federal officials as required for lawful intelligence or national security activities.

Judicial proceedings. We will release PHI as required by court order.

Law enforcement. We will release PHI in limited situations such as when the information is needed to locate a suspect or stop a crime.

Workers' compensation purposes. We will release PHI in compliance with workers' compensation laws.

We will release your medical information only with your authorization to a relative, friend or individual involved in your care or for disaster relief operations for coordinating notification of family members, personal representatives, or others. If you are not present or are incapacitated, PVFD will exercise professional judgment to determine if such release is in your best interest and will release only the minimum necessary information to accomplish the purpose.

Marketing. We will not release your health information for marketing communications without your authorization.

PVFD will not use or disclosure your PHI, other than as listed above, except with your authorization. You may revoke your authorizations at any time, in writing, except to the extent that we have already used or disclosed medical information in reliance on that authorization.

YOU HAVE RIGHTS WITH RESPECT TO MEDICAL INFORMATION ABOUT YOU

Right to a copy of this Notice. You have the right to a paper copy of our Patient Privacy Notice at any time.

Right of access. You have the right to review and receive a copy of medical information about you that we maintain in certain groups of records. We will normally provide you with access to this information within 30 days of your request. We may charge you a reasonable fee to cover the costs of copying. Medical records will be available for 10 years previous from date of service.

In limited circumstances we may deny you access to your medical information, and certain types of denials may be appealed. We have available forms to request PHI and will provide a written response if we deny you access and let you know your appeal rights.

Right to amend medical information. You have the right request that we amend your health information. Your request must be in writing and must state why the information should be amended. We will generally amend your information within 60 days of your request. We may deny your request in rare circumstances. For details contact the Privacy Officer.

Right to disclosure accounting. You may receive an accounting from us of certain disclosures of your PHI that we have made in the last six (6) years prior to the date of your request. We are not required to give you an accounting of information we have used or disclosed for purposes of treatment, payment or health care operations, uses or disclosures prior to April 14, 2003, disclosures to you, or incidental disclosures.

Right to restrict uses and disclosures. You have the right to request additional restrictions on use and disclose your PHI. PVFD is not required to agree to additional restrictions, but any that we agree to are binding on PVFD.

Right to request an alternative contact. You have the right to request to be contacted at a different location or by a different method. If you would like to request an alternative method of contact, you must provide us with that information at the time of service or later in writing. PVFD will accommodate all reasonable requests.

YOU MAY FILE A COMPLAINT ABOUT OUR PRIVACY PRACTICES

You may complain to PVFD or to the Secretary of the US Department of Health and Human Services if you believe your privacy rights have been violated. Such complaints shall be in writing and must be filed within 180 days of when you knew or should have known that the act or omission occurred. PVFD has 30 days from receipt of the complaint to investigate the grievance and notify you in writing of the results of that investigation. We will NOT take any action against you or change our treatment of you in any way if you file a complaint with us or with the federal government.

To file a written complaint with us, contact the PVFD Privacy Officer.

To file a complaint with the federal government contact the Secretary of the U.S. Department of Health and Human Services at Hubert Humphrey Bldg., 200 Independence Ave SW, Washington, DC 20201, phone number 1-866-627-7748.

CONTACT INFORMATION

If you have any questions, need more information, or if you wish to exercise any rights listed in this Notice, contact

**Privacy Officer
Parkwood Volunteer Fire Department, Inc.
PO Box 12224
Research Triangle Park, NC 27709.
(919) 361-0927**

Effective Date: April 14, 2003

Amended 09.01.01