

CATHOLIC SOCIAL SERVICES OF WASHTENAW COUNTY
Information Privacy and Security Policy

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

OUR PLEDGE REGARDING HEALTH AND SERVICE INFORMATION:

We understand that health and service information about you is personal. We are committed to protecting health and service information about you. We create paper and/or electronic records of the care and services you receive at Catholic Social Services of Washtenaw County (CSSW). We need this record to provide you with quality service and to comply with certain legal requirements. This notice applies to all of the records of your service generated by CSSW.

OUR DUTY TO SAFEGUARD YOUR PROTECTED HEALTH INFORMATION (PHI).

Confidential or individually identifiable information about your past, present, or future health or condition, the provision of health care to you or payment for the health care is considered Confidential (Protected Health Information) [PHI]. We are required to extend certain protections to your PHI, and to give you this Notice about our privacy practices that explains how, when and why we may use or disclose your PHI. Except in specified circumstances, we must use or disclose only the minimum necessary PHI to accomplish the purpose of the use or disclosure.

We are required to follow the privacy practices described in this Notice, though **we reserve the right to change our privacy practices and the terms of this Notice at any time**. If we do so, we will post a new Notice at the reception desk. A copy of the Notice will be posted on our website (www.csswashtenaw.org) or you may request a copy of the new notice from the Chief Privacy Officer:

Chief Privacy Officer
Catholic Social Services of Washtenaw County
4925 Packard Road
Ann Arbor MI 48108-1521

HOW WE MAY USE AND DISCLOSE YOUR PHI.

We use and disclose PHI for a variety of reasons. For most, we need your written authorization. However, the law provides that we are permitted to make some uses/disclosures without your authorization. The following offers more description and examples of our potential uses/disclosures of your PHI.

- **Uses and Disclosures Relating to Treatment, Payment, or Health Care Operations (TPO)** once you become our client:

For services: We may use your PHI to provide you services. For example, your PHI will be used by members of your service management team.

To obtain payment: We may use your PHI in order to bill and collect payment for your services. For example, we may release portions of your PHI to Medicaid, a private insurance plan, or a state office to get paid for services that we delivered to you.

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For service operations: We may use your PHI in the course of operating our agency. For example, we may use your PHI in evaluating the quality of services provided, or disclose your PHI to our accountant or attorney for audit purposes. Since we are an integrated system, designated staff in our central office may use your PHI for similar purposes. Release of your PHI to the county, state, and/or the Medicaid agency might also be necessary to determine your eligibility for publicly funded services.

Appointment reminders: Unless you provide us with reasonable alternative instructions, we may send appointment reminders and similar materials to your home. This included leaving a message on your answering machine or voice mail.

Exceptions: State and Federal law allows us to use/disclose your PHI without your consent in certain situations. For example, we may disclose your PHI if needed for emergency treatment if it is not reasonably possible to obtain your consent prior to the disclosure and we think that you would give consent if able. Also, if we provide you treatment, we will disclose your PHI for TPO.

- **Uses and Disclosures Requiring Authorization:** For uses and disclosures beyond treatment, payment and operations purposes we are generally required to have your written authorization, unless the use or disclosure falls within one of the exceptions described below. Authorizations can be revoked at any time to stop future uses/disclosures except to the extent that we have already undertaken an action in reliance upon your authorization.
- **Uses and Disclosures Not Requiring Authorization:** The law provides that we may use/disclose your PHI without authorization in the following circumstances:

When required by law: We will disclose PHI when a law requires that we report information about suspected abuse, neglect or domestic violence, or relating to suspected criminal activity, or in response to a court order. We must also disclose PHI to authorities that monitor compliance with these privacy requirements.

For public health activities: We will disclose PHI when we are required to collect information about disease or injury, or to report vital statistics to the public health authority.

For health oversight activities: We will disclose PHI to an accrediting organization or another agency responsible for monitoring the health care system for such purposes as reporting or investigation of unusual incidents.

Relating to decedents: We will disclose PHI relating to an individual's death to coroners, medical examiners or funeral directors, and to organ procurement organizations relating to organ, eye, or tissue donations or transplants.

For quality assurance purposes: In certain circumstances, and under supervision of a privacy board, we may disclose PHI to other agencies in order to assist medical or psychiatric research.

To avert threat to health or safety: In order to avoid a serious threat to health or safety, we will disclose PHI as necessary to law enforcement or other persons who can reasonably prevent or lessen the threat of harm.

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For specific government functions: We will disclose PHI of military personnel and veterans in certain situations, to correctional facilities in certain situations, to government programs relating to eligibility and enrollment, and for national security reasons, such as protection of the President.

- **Uses and Disclosures Requiring that You Have an Opportunity to Object:** In the following situations, we may disclose your PHI if we inform you about the disclosure in advance and you do not object. However, if there is an emergency situation and you cannot be given your opportunity to object, disclosure may be made if it is consistent with any prior expressed wishes and disclosure is determined to be in your best interests. You must be informed and given an opportunity to object to further disclosure as soon as you are able.

To families, friends or others involved in your care: We may share with these people information directly related to your family's, friend's or other person's involvement in your care, or payment for your care. We may also share PHI with these people to notify them about your location, general condition, or death.

YOUR RIGHTS REGARDING YOUR PHI.

You have the following rights relating to your PHI:

- **To request restrictions on uses/disclosures:** You have the right to ask that we limit how we use or disclose your PHI. We will consider your request, but are not legally bound to agree to the restriction. To the extent that we do agree to any restrictions on our use/disclosure of your PHI, we will put the agreement in writing and abide by it except in emergency situations. We cannot agree to limit uses/disclosures that are required by law.
- **To choose how we contact you:** You have the right to ask that we send you information at an alternative address or by an alternative means. We must agree to your request as long as it is reasonably easy for us to do so.
- **To inspect and copy your PHI:** Unless your access is restricted for clear and documented treatment reasons, you have a right to see your PHI if you put your request in writing. We will respond to your request within 30 days. If we deny your access, we will give you written reasons for the denial and explain any right to have the denial reviewed. If you want copies of your PHI, a charge for copying will be imposed, but may be waived, depending on your circumstances. You have a right to choose what portions of your information you want copied and to have prior information on the cost of copying.
- **To request amendment of your PHI:** If you believe that there is a mistake or missing information in our record of your PHI, you may request, in writing, that we correct or add to the record. We will respond within 60 days of receiving your request. We may deny the request if we determine that the PHI is: (i) correct; (ii) not created by us and/or not part of our records. Any denial will state the reasons for denial and explain your rights to have the request and denial, along with any statement in response that you provide, appended to your PHI. If we approve the request for amendment, we will change the PHI and so inform you, and tell others that need to know about the change in the PHI.

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- **To find out what disclosures have been made:** You have a right to get a list of when, PHI has been released by CSSW other than instances of disclosure for which you gave permission. The list also will not include any disclosures made for national security purposes, to law enforcement officials or correctional facilities, or before April 13, 2003. We will respond to your written request for such a list within sixty (60) days of receiving it. (Your request can relate to disclosures going as far back as six (6) years but not prior to April 14, 2003). There will be no charge for up to one such list each year. There may be a charge for more frequent requests.
- **To receive this notice:** You have a right to receive a paper copy of this Notice and/or an electronic copy by email upon request. If you request an electronic copy via email, you must sign an authorization form to allow us to communicate with you in that manner.

HOW TO COMPLAIN ABOUT OUR PRIVACY PRACTICES:

If you think we may have violated your privacy rights, or you disagree with a decision we made about access to your PHI, you may file a complaint with the person listed in Section VI below. You also may file a written complaint with the U.S. Department of Health and Human Services by contacting:

Secretary of the U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington DC 20201
1-877-696-6775

Or with Catholic Social Services, by contacting:

Chief Privacy Officer
Catholic Social Services of Washtenaw County
4925 Packard Road
Ann Arbor MI 48108-1521
(734) 971-9781

We will take no retaliatory action against you if you make such complaints.

CONTACT PERSON FOR INFORMATION, OR TO SUBMIT A COMPLAINT:

If you have questions about this Notice or any complaints about our privacy practices, please contact:

Chief Privacy Officer
Catholic Social Services of Washtenaw County
4925 Packard Road
Ann Arbor MI 48108-1521