

County of York – Notice of Privacy Practices

YOUR RIGHTS TO PRIVACY

You have the following rights about your health information:

- **Right to see and get copies of your health information records.** You may be charged a fee for copies.
- **Right to ask for a correction to your records.**
- **Right to ask that we limit how your information is used or shared.** However, we do not have to agree to your request.
- **Right to take back permission.** You can change your permission to share, or limit the sharing, of your health information.
- **Right to confidential communications.** You can request that we send mail to another address or call you at another phone number, for example.
- **Right to receive a list of who we've shared your health information with after April 14, 2003.** This list would not include sharing for treatment, payment, or operations; or those made with your permission.
- **Right to get a paper copy of this Notice.**
- **Right to file a complaint.**

FOR MORE INFORMATION

If you have questions or want more information, call or write:

County of York
HIPAA Coordinator
100 W. Market St., Suite 401
York, PA. 17401

717/771-9897

TO REPORT A PROBLEM

If you feel your privacy rights have been violated, you may write to:

County of York
Attention: Privacy Officer
One MarketWay West, 4th Floor
York, PA. 17401

You may also file a complaint with:

U.S. Department of Health and Human Services
Office of Civil Rights
200 Independence Avenue
Washington, D. C. 20201

Your rights and benefits will not be affected, and you will not be retaliated against, if you complain.

NOTICE OF PRIVACY PRACTICES for Personal Health Information

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.

The County of York, Pennsylvania serves its citizens through many programs including health and human services. We are required by law and are committed to keeping your personal health information private, confidential, and secure; to give you this notice; and to do what we say in the notice. If there are changes to this notice, we will mail you a new notice.

CONFIDENTIALITY AND USES OF YOUR INFORMATION:

The County of York and its programs may use or share your health information for:

- Treatment - to get you the health services that you need. For example, we may share information with your doctor to take care of you.
- Payment - to get payment or to pay for services you receive. For example, your hospital bill that we send for payment has your name and the tests you had done on it.
- Health care operations - to coordinate and manage County services for you. For example, we may use information to help decide what services we should offer in the future.
- Your permission - you may also give us your written permission to use or share information for any purpose. You can change your permission, in writing, at any time. We cannot use or share your information for reasons other than what is listed in this Notice, unless you give us permission.

IF YOU WANT THIS NOTICE
IN LARGE PRINT,
PLEASE ASK.

OTHER USES OF YOUR INFORMATION NOT REQUIRING YOUR PERMISSION:

There are other reasons that we may, or are required to, use or share your health information:

- National security, military and veterans - for national security or intelligence. Also health information can be given to the appropriate military authorities if you are or have been in the U.S. armed forces.
- Public health - for public health including but not limited to when you have been exposed to a disease, may be at risk for spreading the disease or to an authority authorized by law to receive reports of abuse or neglect.
- Health oversight - for audits, inspections and licensing.
- By law, for law enforcement, or court order - when we are required by law, for law enforcement purposes or in response to a subpoena or court order.
- Emergency care, disaster relief or to avoid harm - to provide emergency care, disaster relief and/or to prevent a serious threat to the health and safety of a person or the public, including those in the corrections system.
- Coroners, medical examiners, funeral directors, for organ donation - to perform their duties.
- Family, friends and others - in certain cases, to tell a family member or friend of your general condition and where you are. Also, when you agree in advance, we can share information with family and friends involved in your medical care or paying for that care.
- Workers' compensation - to process benefits.