Goodwill Industries of Central Virginia, Inc. Notice Of Privacy Practices

THIS NOTICE DESCRIBES HOW YOUR MEDICAL INFORMATION MAY BE USED AND SHARED. IT OUTLINES YOUR RIGHTS AND HOW YOU CAN GET ACCESS TO YOUR INFORMATION. PLEASE REVIEW IT CAREFULLY.

YOUR RIGHTS

You have certain rights related to your health information. Those rights include:

- **Get an electronic or paper copy of your medical record.** Ask us how to see or get a copy. We will provide a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- **Ask us to correct your medical record.** If you think that your health information is incomplete or incorrect, ask us how to make a correction. We may say "no", but we will explain why in writing within 60 days.
- **Request confidential communications.** You can ask us to contact you in a specific way, or by using a specific method (example: home or cell phone, via e-mail, etc.), or mail to a specific address that may be one other than your home address. We will say "yes" to all reasonable requests.
- 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 operations. We are not required to agree to your request, and may say "no" if it would affect your care. If you pay for a service out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.
- Get a list of those with whom we have shared your health information. You can ask for a list, or "accounting", of the times that we have shared your health information for purposes other than treatment, payment, operations, and certain other disclosures (such as any you asked us to make). You can request information for six years prior to the date you ask. We will provide who we shared it with and why. (Example: received a subpoena for your information for a court case.) We will provide one accounting per year for free, but will charge a reasonable, cost-based fee for another accounting within 12 months from your last request.
- 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 exercise your rights and make choices about your health information. We will make sure that the person has this authority and can act on your behalf before we take any action.
- **Get a copy of this privacy notice.** You can ask for a paper copy of this notice at any time and we will provide you with one-even if you have previously agreed to the receipt of an electronic version.
- File a complaint if you feel that your rights have been violated. You may complain to our Privacy Officer at the address in this notice and to the U. S. Department of Health and Human Services Office for Civil Rights via mail to 200 Independence Avenue, SW, Washington DC 20201, or by calling 1-877-696-6775, or by visiting www.hhs.gov/ocr/privacy/hipaa/complaints GCVA will take no action against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choice about what we share. Talk to us about what your preferences and we will follow your instructions.

You have the right and 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
- Include your information in a hospital directory

If you are unable to tell us your preference, for example if you are unconscious, we may share your information if we believe it is in your best interest or when needed to lessen a serious and imminent threat to health or safety.

You can choose to allow us to share your information for the following reasons: Marketing purposes; Sale of your information; most sharing of psychotherapy notes. You must consent before we share this information. We would never share your information for these reasons without your written permission. We will not sell your information.

OUR USES AND DISCLOSURES

Goodwill Industries of Central Virginia, Inc. (GCVA) uses health information about you for treatment, to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care that you receive. Your health information is contained in a medical record that is the physical property of GCVA. We typically use or share your health information in the following ways:

For Treatment. GCVA can use your health information and share it with other professionals who are treating you. *Example: Our Case Manager can share information with your doctor or your case manager*.

<u>For Payment.</u> GCVA can use and share your health information to bill and get payment from health plans or other entities. *Example:* We give information about you to your health insurance plan or referring agency so that they will pay for your services.

<u>For Health Care Operations.</u> GCVA may use and disclose health information about you to run our organization, improve your care, and contact you when necessary. *Example: We use health information about you to manage your treatment and services, evaluate the performance of our staff, and determine how to continually improve the quality and effectiveness of the services that we provide.*

Other ways that we are allowed or required to share your health information:

The other ways listed below require that we meet many conditions in the law before we can share your information. Please visit www.hhs.gove/ocr/privacy/understanding/consumers/index.html for more information.

<u>To help with public health and safety</u>. Your health information may be used or shared for public health and safety activities such as preventing disease; helping with product recalls; reporting adverse reactions to medications; reporting suspected abuse, neglect, or domestic violence; preventing or reducing a serious threat to anyone's health or safety.

<u>To comply with the Law</u>. GCVA may use and disclose information about you as required by law. For example, GCVA may disclose information to respond to lawsuits and legal actions; in response to a court or administrative order or subpoena. We will share information if local, state, or federal laws require it, including requests by the Department of Health and Human Services, who may want to review our records to ensure compliance with federal privacy law.

To address worker's compensation, law enforcement, and other government requests. We can use or share your health information for workers' comp claims; for law enforcement purposes or with a law enforcement official; with health oversight agencies for activities authorized by law; for special government functions such as military, national security, and presidential protective services.

<u>To Work with a Medical Examiner or Funeral Director</u>. Your health information may be disclosed to medical examiners, funeral directors or coroners to enable them to carry out their lawful duties when an individual dies.

<u>To Respond to Organ/Tissue Donation</u>. Your health information may be used or shared with organ, eye, or tissue procurement organizations.

<u>To Do Research</u>. We can use or share your information for health research.

For Fund Raising. GCVA may use your information to contact you for fund raising. You can tell us not to contact you again.

<u>To Manage Group Health Plans</u>. A group health plan, health insurance issuer, or HMO with respect to a group health plan may disclose health information to the sponsor of the plan.

<u>Other uses.</u> Other uses and disclosures will be made only with your written authorization and you may revoke the authorization except to the extent GCVA has taken action in reliance on such.

OUR OBLIGATIONS/ RESPONSIBILITIES

GCVA is required by law to:

- maintain the privacy and security of your protected health information;
- let you know promptly if a breach occurs that may have compromised the privacy or security of your information;
- provide you with this notice of our legal duties and privacy practices with respect to your health information and abide by the terms of this notice;
- notify you if we are unable to agree to a requested restriction on how your information is used or disclosed;
- accommodate reasonable requests you may make to communicate health information by alternative means or at alternative locations; and
- not share or use your information other than as described here unless you tell us we can in writing. If you have told us that we can, you can change your mind at any time. Let us know if you change your mind.
- not use genetic information for underwriting

GCVA reserves the right to change its information practices and to make the new provisions effective for all protected health information it maintains. Revised notices will be made available to you upon request in our office, by mail, or on our website. GCVA may use the notice revision date as the new effective date.

HOW TO CONTACT US If you have any questions or concerns, please contact us at:

PRIVACY OFFICER

Goodwill Industries of Central Virginia, Inc. 6301 Midlothian Turnpike Richmond, VA 23225

Richmond, VA 23225 Phone: 804-745-6300