

SOUTHWEST OPPORTUNITIES CENTER, INC.

NOTICE OF PRIVACY PRACTICES

Effective Date: January 2, 2016

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.

If you have any questions about this notice, please contact Audrey Gaio-Johnston at 608-723-6659 or 1600 Industrial Park Rd., PO Box 207, Lancaster, WI 53813 or ajohnston@socinc.org

We keep the health and financial information of our current and former members private, as required by law. This notice explains your rights. It also explains our legal duties and privacy practices. We are required by federal law to give you this notice.

USES AND DISCLOSURES OF HEALTH INFORMATION

We may collect, use and disclose your Protected Health Information (PHI) for treatment, payment, and share your Protected Health Information (PHI) for the following reasons and other as allowed or required by law, including the HIPAA Privacy rule:

For treatment activities: We do not provide treatment. This is the role of a health care provider, such as your doctor or a hospital. But, we may share PHI with your health care provider so that the provider may treat you.

Health care operations: We may also use PHI to provide you with case management or care coordination service for conditions like asthma, diabetes, or traumatic injury.

Your Authorization: We will get permission from you in writing before we use or share your PHI for any other purpose not stated in this notice. You may take away this at permission any time, in writing. We will then stop using your PHI for that purpose. But, if we have already used or shared your PHI based on your permission, we cannot undo any actions we took before you told us to stop.

To Your Family and Friends: We must disclose your health information to you, as described in the Patient Rights section of this Notice. We may disclose your health information to a family member, friend or other person to the extent necessary to help with your healthcare, but only if you agree that we may do so.

As allowed or required by law: We may also share your PHI, as allowed by federal law, for many types of activities. PHI can be shared for health oversight activities. It can also be shared for judicial or administrative proceedings, with public health authorities, for law enforcement reasons, and with coroners, funeral directors or medical examiners (about decedents). PHI can also be shared with organ donation groups for certain reasons, for research, and to avoid a serious threat to health or safety. It can be shared for special government functions, for Workers' Compensation, to respond to requests from the U.S. Department of Health and Human Services, and to alert proper authorities if we reasonably believe that you may be a victim of abuse, neglect, domestic violence or other crimes. PHI can also be shared as required by law.

YOUR RIGHTS

Under federal law, you have the right to:

- **Access:** You have the right to look at or get copies of your health information, with limited exceptions. We will use the format you request unless we cannot practicably do so. You must make a request in writing to obtain access to your health information. You may obtain a form to request access by using the contacting information listed at the end of this Notice.
- **Disclosure Accounting:** You have the right to receive a list of instances in which we or our business associates disclosed your health information for purposes, other than treatment and certain other activities, for the last 6 years. If you request this accounting more than once in a 12 month period, we may charge you a reasonable, cost-based fee for responding to these additional requests.
- **Restrictions:** You have the right to request that we communicate with you about your health information by alternative means or to alternative locations. (You must make your request in writing.) Your request must specify the alternative means or location, and provide satisfactory explanation.

POTENTIAL IMPACT OF OTHER APPLICABLE LAWS

HIPAA (the federal privacy law) generally does not preempt, or override, other laws that give people greater privacy protections. As a result, if any state or federal privacy law requires us to provide you with more privacy protections, then we must also follow that law in addition to HIPAA.

COMPLAINTS

If you think we have not protected your privacy, you can file a complaint with us. You may also file a complaint with the Office for Civil Rights in the U.S. Department of Health and Human Services. We will not take action against you for filing a complaint.

CONTACT INFORMATION

Please call your case manager at the phone number listed below. The case manager can help you apply your rights, file a complaint or talk with you about privacy issues.

Contact Executive Director/Case Managers

Telephone: 608-723-6659 Fax: 608-723-7320

Address: 1600 Industrial Park Rd., PO Box 207, Lancaster, WI 53813

COPIES AND CHANGES

You have the right to get a new copy of this notice at any time. We reserve the right to change this notice. A revised notice will apply to PHI we already have about you, as well as any PHI we may get in the future. We are required by law to follow the privacy notice that is in effect at this time.

I hereby acknowledge receipt of Southwest Opportunities Center Notice of Privacy Practice. I understand that it is my responsibility to read and become familiar with the information received.

Name: _____ Date _____

Guardian: _____ Date _____