Notice of Privacy Practices

This notice describes how medical information about you can be used and disclosed, and how you can get access to this information. Please review it carefully. If you have any questions, please contact our Privacy Officer at phone number (573)836-7112 or via email at amculity@centralozarks.org.

Who will follow this notice?

The list below tells you who will follow the outlined practice for keeping your medical record private: All Central Ozarks Medical Centers (COMC) Medical and Dental Clinics; any COMC health care professional that treats you at any of our locations; all COMC employees, temporary or contract staff, students, and volunteers.

What is this Notice?

We are required by law to maintain the privacy of your Protected Health Information (PHI). We are also required by law to give you this notice of our legal duties and privacy practices regarding your health information. We are required to notify you if there is a breach of your unsecured PHI. We are required to follow the terms of the current Notice of Privacy Practices.

We may use and disclose your health information for:

Treatment: We may use and disclose health information for our medical treatment and services. Payment: We may use and disclose health information to bill for and receive payment for the services provided to you. Health Care Operations: We may use and disclose health information for purposes of health care operations. Appointment Reminders: To remind you that you have an appointment scheduled with us. Treatment Alternatives: To inform you of treatment options available to you. As required by Law: When required to do so by applicable law.

To prevent a serious threat to health or safety: To prevent a serious threat to your health and safety or the health and safety of others.

Individuals involved in your care: Unless you object to friends, family members, or others involved in your medical care or who may be helping pay for your care.

Organ and tissue donation: When or tissue donation to organizations that handle organ procurement and transport.

De-identified: Health records for patients deceased 50 or more years are no longer considered PHI.

General Information:

Genetic information is considered PHI, which may be disclosed with authorization but cannot be used by health plans for underwriting purposes.

Military and Veteran: If you are a member of the armed forces, as required by military authority.

Worker's Compensation: For worker's compensation purposes or similar programs providing benefits for work related injury or illness.

Public Health Activities: for public health activities such as preventing or controlling disease, reporting births and deaths, and reporting child abuse and neglect.

Health Oversight Activities: To governmental agencies and boards as authorized by law such as licensing and compliance purposes.

Breach Notification: Uses or disclosures of PHI that are not permissible are now presumed to be a breach, unless it can be demonstrated a "low probability" exists that your PHI has been compromised or that an exception applies.

Disaster Relief: Unless you object, to disaster relief organizations to coordinate your care or notify family and friends of your location or condition following a disaster.

Lawsuits and Disputes: to respond to a warrant, court order, or other lawful process.

Law Enforcement: Pursuant to process and as otherwise required by law.

Coroners, Medical Examiners, Funeral Directors: As necessary to determine the cause of death or to perform their duties.

National Security and Intelligence Activities: To authorized federal officials for intelligence and other national security activities as authorized by law.

Protective Services for the President and Others: To federal officials to provide protection to the President and other authorized persons or conduct special investigations.

Immun or Individuals in Certain Cases: If you are an inmate or in the custody of law enforcement, we may disclose to the correctional institution or law enforcement officials the following information necessary to provide you with health care, to protect the health and safety of you and others, or for the safety and security of the correctional institution.

Research Studies and Clinical Trials: Authorizations may be combined in the research context subject to certain requirements, and authorizations for future research are also permitted.

Business Associates: Business Associates are directly liable for violations of the HIPAA/WYICH Act. Subcontractors of a business associate that create, receive, maintain or transmit PHI on behalf of the business associate are likewise HIPAA business associates, and subject to the same requirements that the first business associate is subject to.

Fundraising: For raising funds. You may opt out of receiving fundraising communications at any time.

Other Disclosures: With certain exceptions, we are not allowed to use or disclose psychotherapy notes without your authorization. We are also not allowed to use or disclose your health information for marketing purposes or sell your health information without your authorization. Other uses and disclosures of your health information not described in this Notice of Privacy Practices or applicable laws will require your written authorization. If you choose to permit us to use or disclose your health information, you can revoke that authorization by informing us of your decision in writing. If you revoke your authorization, we will no longer use or disclose your health information as set forth in the authorization. However, any use or disclosure of your health information made in reliance on your authorization before it was revoked, will not be affected by the revocation.

Your rights regarding your health information:

Information access. You have the right to access and inspect your health information that we maintain in any form, unless this right is limited by law. You have the right to request a copy of your health information. If you request copies of your health information, we will provide you with copies of your health information in a form or manner you request. We may charge a fee for this service. If we deny your request, we will tell you the reason for the denial in writing.

Information amendment. You have the right to request that we correct or amend your health information that you believe is inaccurate or incomplete. If we agree that the information is inaccurate or incomplete, we will make the correction or amendment and inform you of the amendment. If we disagree that the information is inaccurate or incomplete, you have the right to request that we include a statement of your understanding of the disputed information in your health information, and to have such statement be attached to all copies of your health information that we provide you, for a period of time up to your prior to the denial of your request. If the first request you submit is an amendment request, we may charge a fee for this service. If we do not agree to your request that we correct or amend your health information, you have the right to file a complaint with the Secretary of Health and Human Services, your state or local health department, or your attorney, as appropriate, about our denial of your request.

Restrictions. You have the right to restrict the use and disclosure of your health information in your health plan’s drug or tobacco policy. You have the right to restrict the disclosure of your health information to a family, friend or any other person who is involved in your care who may be helping pay for your care. We are required to abide by your request for a period of one year, unless we believe it is necessary to limit its disclosure for the treatment of you or another person’s health.

Privacy complaints. If you believe that you have been subjected to health discrimination, you have the right to file a complaint with the Secretary of Health and Human Services or your state or local health department.

You have the right to file a complaint with the Secretary or our organizational or practice or any complainer office. If you have any other questions, please contact our Privacy Officer at phone number (573)836-7112 or via email at amculity@centralozarks.org. You may write us at Central Ozarks Medical Center Attn: Amy McAlilly At PO Box 777, Richmond, MO 65556. You may also contact Missouri Department of Health, Bureau of Facility Health Regulation: (573)751-6303 and/or the State Attorney General’s Office Consumer Hot Line: (800)302-2222.

You may file a complaint with the U.S. Department of Health and Human Services Office of Civil Rights at: http://www.hhs.gov/ocr/privacy/hipaa/complaints/index.html

The Office of Corporate Compliance can provide the mailing address. We will not retaliate against you for filing a complaint. If we change our policies regarding our use and disclosure of your protected health information, we will change our Notice of Privacy Practices and make the revised notice available to you on our website and our practice locations. You may access our website at: www.cwcentralozarks.org. You may also request a paper copy of the current Notice of Privacy Practices at any time.

- The Staff of COMC

Complaints: If you believe that your privacy rights may have been violated, you may contact our Privacy Officer, Amy McAlilly, at (573)836-7112 or by email at amculity@centralozarks.org. You may write us at: Central Ozarks Medical Center Attn: Amy McAlilly At PO Box 777, Richmond, MO 65556. You may also contact Missouri Department of Health, Bureau of Facility Health Regulation: (573)751-6303 and/or the State Attorney General’s Office Consumer Hot Line: (800)302-2222.

You may file a complaint with the U.S. Department of Health and Human Services Office of Civil Rights at: http://www.hhs.gov/ocr/privacy/hipaa/complaints/index.html

The Office of Corporate Compliance can provide the mailing address. We will not retaliate against you for filing a complaint. If we change our policies regarding our use and disclosure of your protected health information, we will change our Notice of Privacy Practices and make the revised notice available to you on our website and our practice locations. You may access our website at: www.cwcentralozarks.org. You may also request a paper copy of the current Notice of Privacy Practices at any time.

- The Staff of COMC