



## ClearPath Healthcare Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please read it carefully.

**Understanding the type of information we have:** We receive medical information about you before and during your care with us. It includes your name, date of birth, sex, sexual orientation, gender identity, ethnicity, insurance information, and other personal information that will be pertinent to your care. We also receive enrollment information from your health insurers and medical information from your health care providers. When we visit you in your home, we also collect information about your condition, diagnosis, and treatment.

**Our Privacy commitment to you:** *We care about your privacy.* The information we collect about you is private. We are required by law to maintain the privacy and security of your protected health information and to provide you with a notice of our legal duties and privacy practices. In addition, all information about any substance use disorders is protected under federal law and will be kept confidential in accordance with HIPAA and 42 CFR Part 2. Only people who have both the need and the legal right may see your information. Unless you give us permission specifically in writing, we will only disclose your information as listed below:

**Treatment:** We may use or disclose medical information about you to provide and coordinate your health care. For example, we may notify your regular doctor about changes in your health care status.

**Payment:** We may use and disclose information so the care you are given can be properly billed and paid for. For example, we may be required for payment purposes to send your health insurer information that explains the physician ordered services we provided for you. If you pay for your hospice services out of pocket, ClearPath Healthcare agrees to restrict your medical information to your health insurance plan, if so requested.

**Exceptions:** For certain kinds of records, your permission may be needed for release for treatment and/or payment.

**As required by law:** We will release information when we are required by law to do so or for other government requests. Examples of such releases would be for law enforcement or national security purposes, subpoenas or other court orders, communicable disease reporting, disaster relief, review of our activities by government agencies, to avert a serious threat to health or safety, or in other kinds of emergencies.

**Public health and safety:** We may use or disclose information about you as required to prevent or reduce a serious threat to the health or safety of a person or the public. For example, we may disclose information about immunizations and certain diseases to public health officials.

**Fundraising:** We engage in fundraising activities. Donations are used to support the mission of the organization. We may contact you and/or your family asking you to consider giving a charitable gift. We would welcome any donation you or your family would like to make. If you do not wish to receive fundraising communications, please notify us at any time and ask to be removed from our contact list. Your requests may be made by telephone at 541-548-7483 or in writing to: ClearPath Healthcare, Executive Director, 732 SW 23<sup>rd</sup>, Redmond, OR 97756.

**Contact:** We may contact you or your family after your discharge for the purpose of obtaining feedback about our care and other helpful information for us as we seek to continue improving the services we provide.

**Family and friends:** We may disclose your information to family members, friends, or others that you identify in writing.

**After death:** We may disclose your information as required by coroners or medical examiners and funeral homes after you are deceased.

**With your permission:** ClearPath Healthcare will not sell your health information for marketing or any other purpose without your written permission. If you provide written authorization, we may use and disclose your personal information only for the purposes you specify. You have the right to revoke your authorization at any time. Revocation must be made in writing. We cannot retract any uses or disclosures that were made before we received your written revocation.

*Our use and disclosure of your personal health information must comply with federal privacy regulations and applicable Oregon law. Oregon law provides certain additional protection to your personal health information.*



## Your Privacy Rights:

You have the following rights regarding your health information. Your requests must be made in writing to us at: ClearPath Healthcare, Executive Director, 732 SW 23<sup>rd</sup>, Redmond, OR 97756

**Your right to inspect and copy:** You have the right to request your health information. ClearPath Healthcare will make every attempt to provide it in the format requested or a mutually agreed upon format. In most cases you have the right to look at or get copies of your health records. You may be charged a fee to cover the cost of copying your records. You may need to make an appointment to look at your records to assure that we will have them available for you.

**Your right to amend:** You may ask us to change your records if you feel that there is a mistake. We can deny your request for certain reasons, but we must give you a written reason for our denial.

**Your right to a list of disclosures:** You have the right to ask for a list of certain disclosures made after April 14, 2003. This list will not include the time that information was disclosed for treatment, payment, or health care operations. The list will not include information provided directly to you or your family, or information that was sent with your permission. It will not include information released without your name or other data that would identify you.

**Your right to request restrictions on our use or disclosure of information:** You can ask for limits on how your information is used or disclosed. We are not required to agree to such a request, but we can if we believe that it is reasonable to do so.

**Your right to request confidential communication:** You have the right to ask that we share information with you in a certain way or in a certain place. For example, you may ask us to send information to an alternate address instead of your home address. We will do our best to accommodate such a request.

**Changes to this notice:** ClearPath Healthcare reserves the right to change Notice of Patient Privacy at any time due to federal or state law requirements that may change and/or if ClearPath Healthcare adds greater restrictions to the notice. Any new notice changes will apply to all health information that ClearPath Healthcare manages. All individuals under ClearPath Healthcare's care at the time of the notice change will receive a copy of the new notice.

**How to use your rights under this notice, file complaint, or communicate with us:** If you want to exercise your rights under this notice or if you wish to communicate with us about privacy issues or if you wish to file a complaint, you can call us at 541-548-7483 or write to: ClearPath Healthcare 732 SW 23<sup>rd</sup>, Redmond, OR 97756. You will not be penalized for filing a complaint. If you need assistance in preparing a specific request in writing, we will help you prepare your written request.

**Complaints to the Federal Government:** If you believe that your privacy rights have been violated, you have the right to file a complaint with the Executive Director of ClearPath Healthcare, 732 SW 23<sup>rd</sup>, Redmond, OR 97756 in writing or by phone at 541-548-7483; or the Secretary of Health and Human Services, US Department of Health and Human Services, 200 Independent Ave SW, Washington, DC 20201 or phone 1-877-696-6775. Filing a complaint is your right and there will not be any retaliation if you do so.

**Information blocking** complaints can be submitted through ONC's online Health IT Feedback Form (<https://inquiry.healthit.gov/support/servicedesk/customer/portal/6/user/login?destination=portal%2F6%2Fcreate%2F67>).

As specified by the Cures Act, information blocking claims and information received by ONC in connection with a claim or suggestion of information blocking are generally protected from disclosure under the Freedom of Information Act.

**Breach of Health Information:** ClearPath Healthcare and all its business associates are required by federal law to notify you of any breach of your unsecured health information. You will be notified of any breach in writing.

For more information contact the Executive Director of ClearPath Healthcare at 541-548-7483.