

Other Uses and Disclosures (cont.)

Work with a medical examiner or funeral director

- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

- We can use or share health information about you:
 - For workers' compensation 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

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena

To our business associates

- We may contract with outside people, companies, or other organizations to perform services or functions on behalf of Keystone Health, such as legal service providers or auditors, which we refer to as Business Associates.
- We will only disclose your health information to a Business Associate when necessary and only to the extent permissible by law.
- We require all Business Associates, and any of their subcontractors, to safeguard the privacy of your health information.

As part of one or more Health Information Exchange (HIEs)

- Keystone Health participates in one or more HIEs.
- Our participation may involve sharing information we obtain or create about you with these HIEs. This information will be made available to outside entities that also participate in the HIE (such as hospitals, doctors offices, pharmacies, or other insurance companies), or receiving information that those outside entities create or obtain about you (such as medication history, medical history, or insurance information) so each entity can provide better treatment and coordination of your health care services.
- You have the option to opt out of sharing your information with the HIE. If you wish to opt out, please let us know. Keystone health will use its best efforts to limit the sharing of patient information with HIEs for any patients who have opted out.
- In cases where your specific consent or authorization is required to disclose certain health information to others, including HIEs, we will not disclose that health information without first obtaining your consent. Information that requires additional consent in order to be shared includes:
 - psychotherapy notes;
 - treatment of substance or alcohol abuse; or
 - treatment for sexually transmitted diseases.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security.
- We must follow the duties and privacy practices described in this Notice and will give you a copy of it.
- We will not use or share your information other than as described here, unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our website at www.keystonehealth.org.

Our Mission

Keystone Health improves the health and quality of life of the people and communities we serve. We do this by:

- Providing quality, compassionate primary medical, dental, behavioral and social services to anyone, especially those who need it most;
- Coordinating care with other providers to provide a full range of services our patients need;
- Promoting and supporting healthy lifestyles;
- Adjusting fees based on patients' ability to pay - no one is turned away due to inability to pay;
- Collaborating with others to promote affordable access and breaking down of language and cultural barriers; and
- Advocating for our patients and the medically underserved.



Keystone Health

111 Chambers Hill Drive, Suite 200
Chambersburg, PA 17201
(717) 709-7900

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Notice of Privacy Practices

Your Information.
Your Rights.
Our Responsibilities.

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.

Leading the way to a healthier community

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or 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

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different 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 our operations -We are not required to agree to your request, unless otherwise described in this notice, but we will attempt to agree to all reasonable requests when appropriate.
- If we agree to a particular restriction, we reserve the right to terminate the agreed-to restriction if we believe that termination has become appropriate. We will notify you if we decide to terminate any agreed-upon restriction.
- If you pay for a service or health care item 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’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Your Rights (cont.)

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 the person has this authority and can act for you before we take any action.

Receive notification of a breach

- We will promptly notify you in writing about any breach of your unsecured health information, no later than 60 days after we discover such a breach.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting Keystone Health’s Privacy Officer at 717-709-7900 ext. 7964.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, DC 20201, or calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, tell us what you want us to do and we will follow your instructions.

In these cases, you have both 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

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

Without your written permission, we will *never* share your information in these situations:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes
- Using or disclosing information specifically protected by state and/or federal law, such as drug and alcohol information and HIV information

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again

Other Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways:

Treat you

- We can use your health information and share it with other professionals who are treating you. (Example: a doctor treating you for an injury asks another doctor about your overall health condition.)

Run our organization

- We can use and share your health information to run our practice, improve your care, and contact you when necessary. (Example: We use health information about you to manage your treatment and services.)

Bill for your services

- We 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 so it will pay for your services.)

How else can we use or share your health information?

We are allowed or required to share your information in other ways—usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

Help with public health and safety issues

- We can share health information about you for certain situations such as:
 - Public health investigations
 - 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

Do research

- We can use or share your information for health research.

Comply with the law

- We will share information about you if the state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we’re complying with federal privacy law.

Respond to organ and tissue donation requests

- We can share health information about you with organ procurement organizations.