



Premier Community HealthCare Group, Inc.

NOTICE OF PRIVACY PRACTICES

Patients have the right to adequate notice of the uses and disclosures of protected health information and of their rights and their health care provider's legal duties with respect to their protected health information. 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.

When it comes to your health information, you have the right to ...

- have your health information maintained privately and securely.
- inspect, copy, and request copies of your protected health information.
- to receive requested information in the format and delivery method of your choice as compatible with available technology, except when a professional has determined it is not in your best interests.
- request corrections to information you believe to be incorrect or incomplete.
- request confidential communication and choose your preferred communication methods (home phone, office phone, cell phone, text, letter, fax, etc.).
- choose what information is shared, to whom, and under what conditions it can be shared, except when legally required or necessary for treatment, payment (excluding private pay patients) and health care operations.
- refuse, revoke, or revise authorizations for release of information at any time.
- request an accounting of health information disclosures – who, when and why – for the past six years, excluding disclosures for treatment, payment, and health care operations.
- to receive upon request a paper copy of this Notice, even if previously accepted electronically.
- appoint someone who can exercise your rights and make choices about your health care information.
- to opt out of communication from Premier regarding fund raising campaigns.
- be informed promptly if your health information has been compromised.
- to file a complaint without fear of retaliation if you believe your privacy rights have been violated. For more information about your rights or to file a complaint, you may contact either or both of the following:

Premier Community HealthCare Group, Inc.
Attention: Privacy Officer
37912 Church Avenue
Dade City, FL 33525
352-518-2000, ext. 9016
mhammond@hcnetwork.org

U.S. Dept. of Health and Human Services
Office for Civil Rights,
200 Independence Avenue, S.W.
Washington, D.C. 20201
1-877-696-6775
www.hhs.gov/ocr/privacy/hipaa/complaints/

For more information about your privacy rights, please visit the Department of Health and Human Services' website at <https://www.hhs.gov/hipaa/for-individuals/guidance-materials-for-consumers/index.html>

When it comes to your health information, we have the responsibility to ...

- abide by the terms of this Notice and provide you a copy upon request.
- keep your health information private and secure and to notify you promptly if your health information has been compromised.
- provide copies of your health information within legal timeframes in the delivery method of your choice as compatible with available technology, except when a professional has determined it is not in your best interests.
- share your information as authorized except as legally allowed or required:
 - for treatment at Premier or with other treating professionals.
 - for billing and payment from health plans and other entities.
 - for health care operations, to improve care, and patient contact.
 - for public health and safety, disease prevention, product recalls, medication alerts, suspected abuse or neglect, medical emergencies, and to prevent serious harm to yourself or others.
 - for health care research.
 - for organ and tissue donation requests.
 - for assisting investigations by the medical examiner or law enforcement such as abuse and neglect, missing persons, and crimes on property.
 - for death certificate and funeral home arrangements.
 - for governmental use as allowed by law such as workers' compensation, the Department of Health and health oversight activities, military activities, national security, and presidential protective services.
 - for lawsuits in response to properly served court orders and subpoenas.

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- ◇ Uses and disclosures not described in this Notice will be made only with the patient's written authorization.
 - ◇ We will never sell or share your protected information for marketing purposes without your written consent.
 - ◇ We will never share your psychotherapy notes without your written consent except with a valid court order.
 - ◇ Additionally, Substance Use Disorder prevention and treatment records are provided additional protection under the law and the Code of Federal Regulations 42 CFR Part 2 (Part 2), relating to the access, use and disclosure of such records. A court order is required for disclosure of your Part 2 information without your consent except in medical emergencies, to the Food and Drug Administration (FDA) in response to product or medication recall, qualifying research, audit and evaluation by a program administrator, funder or third-party payor, suspected child abuse or neglect, and investigations into crimes and threats on property or against any Premier Care Team member. All such disclosures will be documented in detail in your patient record. Violation of 42 CFR Part 2 is a federal crime. Suspected violations of this regulation may be reported directly to the United States Attorney for the judicial district where it occurred.
 - ◇ PCHG reserves the right to change the terms of this Notice at any time. Patients will be notified when material changes to the Notice are made.