Medical Center Health System's Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

We are committed to providing you with the highest quality of care in an environment that protects your privacy and the confidentiality of your health information. This notice of privacy practices ("Notice") applies to Ector County Hospital District d/b/a Medical Center Health System and Medical Center Hospital, any health care facility, medical staff, medical group, or other health care entity it controls or which is under common control, any MCHS affiliates or subsidiaries including MCH Family Health Clinics, MCH Healthy Kids Clinic, MCH Women's Clinic, MCH TraumaCare, and all MCH ProCare locations and providers (together, these entities will be referred to as "MCHS").

Independent physicians on the Medical Center Hospital medical staff who provide services at the hospital or any MCHS location are legally separate and responsible for their own acts, but they will follow this Notice when they are providing services at an MCHS location. Other health care professionals, including residents, fellows, students, and trainees also will follow this Notice.

MCHS has established one or more organized health care arrangements ("OHCAs") with various affiliated entities, including Texas Tech University Health Science Center. Being part of an OHCA allows MCHS and these other affiliated entities to use and disclose your health information for purposes related to their joint operations, including the provision of treatment, for payment purposes, and for a broad scope of healthcare operations, which may include joint utilization review, credentialing, education, risk management, patient safety, and quality assessment and improvement activities.

How Will MCHS Use My Health Information? MCHS must use and disclose your health information to provide you with quality health care or as required by law. Health information that MCHS discloses may no longer be protected once received by others, depending on who receives the health information and the purpose for which it is being disclosed. MCHS typically shares or uses your health information in the following ways:

- **Treatment** – MCHS can use your health information and share it with professionals who are treating you. For example, your physician shares health information about your condition with the pharmacist to discuss appropriate medications.
- **Payment** – MCHS can use and share your health information to bill and get payment for your services. For example, MCHS sends your health information to your insurer to obtain payment for your treatment.
- **Operations** – MCHS can use and share your health information to run our practice, improve your care, and contact you when necessary. For example, MCHS uses your health information to manage your treatment and develop better services for you.
- **Other ways MCHS can share and disclose your health information** – MCHS is allowed or required to share your health information in other ways and 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 health information for these purposes.
    - **Help with public health and safety issues** – MCHS can share your health information for preventing serious threat to health or safety or for public health activities, disease prevention, injury or disability, reporting births and deaths, reporting reactions to medications, product recalls, infectious disease control, reporting abuse or neglect, and reporting suspected abuse, neglect, or domestic violence.
    - **Comply with the law** – MCHS will share your health information if state or federal law requires it, including with the Department of Health and Human Services when it reviews for compliance with federal privacy law.
    - **Address requests from workers' compensation, law enforcement, and other government requests** – MCHS can use or share health information about you for workers' compensation claims, for law enforcement purposes, for health oversight agencies for activities authorized by law, for special government functions such as military, national security, and presidential protective services, and to law enforcement institutions for inmates.
    - **Do research** – MCHS can use or share your health information for certain health research.
    - **Work with a medical examiner or funeral director or respond to organ donation requests** – MCHS can share your health information with a medical examiner, coroner, funeral director, and with organ procurement organizations.
    - **Respond to legal actions** – MCHS can share your health information in response to a court or administrative order, or in response to a subpoena.
    - **Business Associates** – We may share your health information with our business associates who perform services on our behalf such as legal services. We require the business associate to appropriately safeguard your health information.

Your Rights – When it comes to your health information, you have certain rights. This section explains your rights and some of MCHS's responsibilities to help you.

- **Right to request limitations on use or disclosure.** You may request limitations on your health information we use or disclose for treatment, payment, or operations. For example, you may ask us not to disclose that you have had a particular surgery. MCHS is not required to agree to your request and may not follow a request if it would affect your care. If you pay for a service out-of-pocket and in full, you may request to restrict certain disclosures of your health information. MCHS will agree unless law requires disclosure.
- **Right to confidential communications.** You may request communications in a certain way, for example, at a home, office, or cellphone number. We will say yes to all reasonable requests and must agree if you notify MCHS you would be in danger if we did not.
- **Right to inspect and copy.** You have the right to view and request electronic or paper copies of your medical records and other health information MCHS has about you. We will provide a copy or a summary of your health information as provided by law. We may require your request to be in writing and we may charge a reasonable, cost-based fee. Under limited circumstances, MCHS may deny your request. To request copies of your medical records, you may visit https://www.mchodessa.com/patients-visitors/medical-record-request/ , or contact Health Information Management directly at 432-640-1107.
- **Right to request an amendment.** If you believe that the health information we have about you is incorrect or incomplete, you may request an amendment on the form provided by MCHS. We are not required to accept the amendment, but we will tell you why in writing within 60 days.
- **Right to an accounting of disclosures.** You may request a list of the disclosures of your health information that have been made in the six years prior to the date you ask, who we shared it with, and why. We will include all disclosures except for those about treatment, payment, health care operations, and certain other disclosures such as disclosures we made to you. We will provide one accounting per year free of charge and will charge a reasonable fee for any additional requests.
- **Right to a copy of this Notice.** You may request a paper copy of this Notice at any time, even if you have been provided with an electronic copy. You may obtain an electronic copy of this Notice on our website at www.MCHodessa.com.
- **Right to 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 if you become incapacitated and unable to make your own medical decisions. We will make sure the person has authority and can act for you before we honor their request.
- **Right to file a complaint if you feel your rights have been violated.** You can file a complaint with MCHS if you feel your rights have been violated by contacting the MCHS Chief Compliance and Privacy Officer at 432-640-1106. You can also file a complaint with the U.S. Department of Health and Human Services. We will not penalize or retaliate against you in any way for filing a complaint.

Your Choices – For certain health information, you can tell us your choices about what we share. If you have a preference for how MCHS shares your health information for the below situations, please contact us and tell us your preferences.

- **You have the right and choice to tell MCHS to:**
    - Share your health information with your family members, friends, or others involved in your care and whether to share your health information in a disaster relief situation.
    - Include your health information in the hospital directory, which may include your name, room number, general condition, and religious affiliation. This information, excluding religious affiliation, can then be shared to those who ask for you by name. Your religious affiliation can be shared with a member of the clergy including the hospital chaplain.
    - We may use or disclose certain limited amounts of your health information to send you fundraising materials. You have a right to opt out of receiving such fundraising communications.
- **MCHS always requires your written permission to share your health information for marketing purposes, sale of your health information, and most sharing of your psychotherapy notes.**

MCHS Responsibilities – MCHS is required to meet certain requirements regarding your health information.

- We are required by law to maintain the privacy and security of your health information, follow the duties and privacy practices described in this Notice, and give you a copy of it.
- Let you know promptly if a breach occurs that may have compromised the privacy or security of your health information.
- Additional privacy protections apply to mental health information, certain disease-related information, genetic information, and substance use disorder treatment records. We will not share these types of information unless expressly authorized by law. We will not use or disclose genetic information for underwriting purposes. We will comply with the privacy protections for substance use disorder treatment records under 42 U.S.C. §290dd-2 and 42 C.F.R. Part 2.
- We will not use or share your health 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 this Notice – MCHS may change the terms of this Notice at any time. Any changes will be effective for all health information we have about you. The new notice will be available upon request and on our website at www.MCHodessa.com.

Other information for this Notice –

- MCHS participates in an electronic Health Information Exchange ("HIE"). A HIE allows participating health care providers to electronically share your health information. As part of the HIE, we store health information in a jointly shared electronic medical record with the other health care provider participants in HIE. For example, if you go to an emergency room, that hospital may be able to access parts of your MCHS electronic health record so it can treat you more efficiently. Your information will be automatically included in the HIE unless you contact the MCHS Chief Compliance and Privacy Officer to opt out at 432-640-1106.
- MCHS participates in Patient Assistance Programs with drug manufacturers wherein the manufacturers offer assistance in providing medications for patients who meet certain requirements. If you apply for or participate in a Patient Assistance Program, MCHS may use or share your health and financial information for applications and participation in these programs. You may revoke your participation in Patient Assistance Programs by contacting the MCHS Chief Compliance and Privacy Officer at 432-640-1106.
- For more information about your privacy rights, if you have a complaint, have questions about this Notice, you wish to request restrictions on uses and disclosures of your health information, or you wish to obtain a form to exercise your individual rights please contact the **MCHS Chief Compliance and Privacy Officer at 432-640-1106.**

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