

## **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.**

### **Your Rights**

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

### **Your Choices**

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

### **Our Uses and Disclosures**

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Do research
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

## 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 or paper 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, and we may say “no” if it would affect your care.
- 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.

### **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.

### **File a complaint if you feel your rights are violated**

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- 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, D.C. 20201, calling 1-877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://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, talk to us. 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
- Include your information in a hospital directory

*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.*

In these cases we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In the case of fundraising:

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

## **Our 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](http://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:

- Preventing disease
- 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 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.

## **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.

## **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 of your information.
- We must follow the duties and privacy practices described in this notice and 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.

For more information see: [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html).

## **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 web site.

## **California health and medical privacy laws**

### **a. Confidentiality of Medical Information Act (CMIA)**

California's Confidentiality of Medical Information Act (CMIA) provides stronger privacy protections for medical information than HIPAA. [Cal. Civ. Code §§ 56-56.37](http://california.gov/civcode/56-56.37)

CMIA's primary purpose is to protect an individual's medical information, in electronic or paper format, from unauthorized disclosure. For more information, see PRC's guide [How is Your Health and Medical Information Used and Disclosed \(California Medical Privacy Series\)](#).

### **What information does CMIA cover?**

CMIA applies to *medical information*. CMIA defines medical information as *individually identifiable* health information about a patient's medical history, mental or physical condition, or treatment.

To be individually identifiable, information must include a data element that identifies a person such as a name, address, email address, telephone number, or Social Security number. Information is also individually identifiable if it can be combined with other publicly available information to reveal a person's identity. [Cal. Civ. Code § 56.05\(j\)](#)

### **Who must comply with CMIA?**

CMIA applies to health care providers, health insurers, and individuals or businesses they contract with that have access to medical information (called *contractors*).

Note that CMIA's definition of *provider of health care* is much broader than under HIPAA. For example, any business that offers software or hardware, including mobile apps, that is designed to maintain medical information is considered a provider of health care. [Cal. Civ. Code § 56.06](#).

CMIA also requires employers who receive medical information to safeguard that information, and prohibits them from disclosing medical information without employee authorization (though there are exceptions). [Cal. Civ. Code §§ 56.20 – 56.245](#).

### **Can you bring a lawsuit if your information is disclosed in violation of CMIA?**

Yes, under certain circumstances. Unlike HIPAA, CMIA provides individuals a private right of action. Consult an attorney for more information. [Cal. Civ. Code §§ 56.35 – 56.37](#).

### **b. Information Practices Act (IPA)**

The Information Practices Act (IPA) applies to state government agencies and limits collection, maintenance, and disclosure of personal information (including medical information). The IPA gives you the right to review your personal information in state agency records. You may also find out who has accessed the information and request that inaccurate or irrelevant information be changed. [Cal. Civ. Code. §§ 1798-1798.78](#)

### **c. Patient Access to Health Records Act (PAHRA)**

The Patient Access to Health Records Act (PAHRA) gives you the right to see and copy your medical records (with some exceptions, such as psychotherapy notes) maintained by health care providers. You may also submit written addendums to records that you believe are inaccurate or incomplete. [Cal. Health & Safety Code §§ 123100-123149.1](#)

See the [Medical Board of California website](#) for more information.

### **d. Insurance Information and Privacy Protection Act (IIPPA)**

The Insurance Information and Privacy Protection Act (IIPPA) establishes standards for collection, use, and disclosure of information gathered in connection with insurance transactions such as applications and claims. The IIPPA also allows you to obtain the reasons for adverse underwriting decisions. [Cal. Ins. Code §§ 791-791.29](#)

### **e. Data breach notice**

- **Businesses and state and local agencies** must notify you if your *personal information* has been (or is believed to have been) acquired by an unauthorized person. Personal information includes medical and health insurance information. [Cal. Civ. Code §§ 1798.29, 1798.82](#)

The law applies to businesses and agencies that maintain unencrypted, computerized personal information, including medical and health insurance information. However, breaches of encrypted data must be reported if there is a reasonable belief that the encryption key was also acquired.

Data breach notices must be written in plain language and follow a specific format. Cal. Civ. Code §§ [1798.29\(d\)\(1\)](#) and [1798.82\(d\)\(1\)](#)

- **Health care providers, health plans, and health care clearinghouses (*covered entities*)** must comply with HIPAA's data breach notice requirements. For more information see the [HHS website](#) and [45 CFR §§ 164.400-164.414](#).
- **Additional breach notice requirements for clinics, health facilities, home health agencies, and hospices**  
Clinics, health facilities, home health agencies, and hospices must prevent unlawful or unauthorized access to, and use or disclosure of medical information. If your medical information is breached, they must notify you and the California Department of Public Health within 15 days of detection. [Cal. Health & Safety Code § 1280.15](#)

To learn more about data breach notifications, see PRC's guide, [What to do When You Receive a Data Breach Notice](#).

#### **f. Collection of medical information for direct marketing**

A business that wants to collect your medical information for direct marketing purposes must clearly disclose how the information will be used and must also get your written consent (which it may obtain online). [Cal. Civ. Code § 1798.91](#)

Note that this code section does not apply to fundraising activities by tax exempt charitable or religious organizations or political fundraising or communications.

#### **g. Shine the Light**

California's Shine the Light law allows you to learn about how businesses sell your personal information, including certain types of health and medical information. [Cal. Civ. Code § 1798.83](#)

For more information on Shine the Light, see PRC's guide, [California's "Shine the Light" Marketing and Junk Mail Law](#).

#### **h. Online Privacy Protection Act**

The Online Privacy Protection Act requires websites or online services that collect personally identifiable information to conspicuously post a privacy policy that identifies the data it collects and discloses with whom that data is shared. [Cal. Bus. & Prof. Code § 22575\(a\)](#)

For more information on the Online Privacy Protection Act, see the CA AG Office's publications, [Making Your Privacy Practices Public](#) and [How to Read a Privacy Policy](#).

#### **i. Privacy protections for psychiatric records**

The California Welfare and Institutions Code protects the confidentiality of records of people who are voluntarily or involuntarily detained for psychiatric evaluation or treatment. [Cal. Welfare & Institutions Code § 5328](#)

#### **j. Privacy protections for HIV blood tests**

The California Health and Safety Code contains provisions to protect the privacy of people who are subject to HIV blood testing. [Cal. Health & Safety Code § 120975 – 121020](#)

#### **k. Office of Health Information Integrity**

The California Health and Safety Code established the [California Office of Health Information Integrity](#)(CalOHII). [Cal Health & Safety Code § 130200](#).

CalOHII provides oversight and assistance to California state departments to ensure that they comply with health privacy laws and safeguard health information.

#### **4. Additional Resources**

To find the full text of California laws, visit [California Legislative Information](#).

##### **California Office of the Attorney General**

[Privacy Education and Policy Unit](#)

File a consumer complaint [here](#).

For more information on California and federal health information privacy laws and regulations, see the [California Health Information Law Identification \(CHILI\) website](#).

For more information about HIPAA, visit [U.S. Department of Health and Human Services](#) or call (866) 627-7748.

### **Your Privacy is Very Important to Us!**

- Please contact our Privacy Officer right away should you have any concerns. Hilary Sharrar can be reached at the office (209) 682-5228 or by email at [hilarysharrar@gmail.com](mailto:hilarysharrar@gmail.com)