

## NOTICE OF PRIVACY RIGHTS

### Your Rights

**Get an electronic or paper copy of your medical record.** You can ask to see or get a copy of your medical record and other health information we have about you. We will provide the requested information within 30 days of your request. We may charge a 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. 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. **CJ MEDICAL CENTER** 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. **CJ MEDICAL CENTER** is 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 five years prior to the date you ask, who we shared it with, and why. **CJ MEDICAL CENTER** will charge a reasonable, cost-based fee.

**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. **CJ MEDICAL CENTER** will make sure the person has this authority and can act for you before we take any action.

**For certain health information, you can tell us your choices about what we share.** You have both the right and choice to allow us to share information with your family, close friends, or others involved in your care, share information in a disaster relief situation, or 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. **CJ MEDICAL CENTER** never will share your information for marketing, fundraising purposes, and/or sell your information.

**Our Responsibilities** **CJ MEDICAL CENTER** is required by law to maintain the privacy and security of your protected health information. Will be our responsibility to 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.

**Our Uses and Disclosures.** We typically use or share your health information in the following ways.

1- We can use your health information and share it with other professionals who are taking care of you.

2-We use health information about you to manage your treatment and services.

3-We can use and share your health information to bill and get payment from health plans or other entities.

4-We are allowed or required to share your information in other ways. We have to meet many conditions in the law before we can share your information for these purposes.

5-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, or preventing or reducing a serious threat to anyone’s health or safety

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

7-We will share information about you if state or federal laws require it, including with *DHHS* if it wants to see that we are complying with federal privacy law.

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

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

10-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, or for special government functions such as military, national security, and presidential protective services.

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

12-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 on our website. **Please direct any questions or**

**concerns to the Administrator at [cjmcenter.adm@cj-mcenter.com](mailto:cjmcenter.adm@cj-mcenter.com). A copy of this privacy notice is available upon request.**

*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.*