# Mid-Iowa Community Action, Inc. NOTICE OF PRIVACY PRACTICES

IMPORTANT: THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT OUR CONSUMERS MAY BE USED AND DISCLOSED AND HOW THEY CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

<u>Purpose of this Notice</u>: MICA is required by law to maintain the privacy of certain confidential health care information, known as Protected Health Information (PHI), and to provide you with a notice of our legal duties and privacy practices with respect to consumers' PHI. This Notice describes legal rights, advises of our privacy practices and outlines how MICA is permitted to use and disclose PHI about our consumers.

MICA is also required to abide by the terms of the version of this Notice currently in effect. In most situations we may use this information as described in this Notice without permission, but there are some situations where we may use it only after we obtain our consumers written authorization, if we are required by law to do so.

## Uses and Disclosures of PHI Without Your Permission

- Treatment We may disclose medical information about you to coordinate your health care. For example, we may share medical information with your doctor if requested.
- Payment We may use and disclose information so the care about you can be properly billed and paid for.
- Business Operations We may need to use and disclose information for our business and program operations. For example, we will share required information with our funders as required.
- As Required by Law We will release information when required by law to do so. Examples
  include for law enforcement, subpoenas or other court orders, communicable disease reporting,
  disaster relief or because of a serious threat to health or safety in other emergencies.

## Uses and Disclosures of PHI With Your Permission

For uses and disclosures for reasons other than those listed above, we must have your written permission. This permission must specifically identify the information we seek to use or disclose, as well as when and how we seek to use or disclose it. This permission may be revoked at any time in writing, but we cannot recoup any disclosures already made with your permission.

#### Notification of Breach

MICA is required by law to notify our consumers in case of a breach of their unsecured protected health information when it has been or is reasonably believed to have been accessed, acquired or disclosed as a result of a breach.

## **Your Privacy Rights**

You have the following rights. All requests must be in writing using the appropriate forms. MICA will use established processes and legal guidelines to determine whether or not your requests will be allowed.

- The right to access, copy or inspect your records. In most cases you have the right to look at and/or get copies of your records, but there are exceptions.
- The right to change (amend) your records. You may ask us to change your records if you feel that there is a mistake. We can deny your request for certain reasons, but we must give you a written reason for our denial.

- The right to a list of disclosures. You can ask for a list of disclosures made over a period of time for purposes other than treatment, payment or health care operations. This list will not include information already provided directly to you or information that was sent with your authorization.
- The right to request that we restrict the uses and disclosures of your records. You have the right to ask for limits on how your information is used or disclosed. We are not required to agree to such requests.
- The right to request a different form of communication. You have the right to ask that we share information with you in a certain way or in a certain place. For example, you may ask us to send information by email instead of by letter or calling. MICA will not be held responsible for the security of information shared if you choose insecure methods of communication. We are not required to agree to all requests.

## Revisions to the Notice of Privacy Practices (Notice)

MICA reserves the right to revise this Notice as needed. If the Notice is revised, new Notices must be posted at our facilities, but revised Notices do not need to be distributed to those who have already received a prior copy of a Notice.

## **Your Legal Rights and Complaints**

Our consumers have the right to complain to us, or to the Secretary of the United States Department of Health and Human Services if they believe their privacy or security rights have been violated. Consumers will not be retaliated against in any way for filing a complaint, either with us or the federal government.

Questions, comments or complaints may be made directly to MICA by contacting the Privacy Officer:

Maternal Child Adolescent Health Coordinator

Mid-Iowa Community Action, Inc.

1001 South 18<sup>th</sup> Ave.

Marshalltown, IA 50158

Phone: 641.752.7162

If you have any questions or need help filing a civil rights, conscience or religious freedom, or health information privacy complaint, you may email OCR at <a href="https://ocr.ncbi.nlm.ncbi.

Alternative formats (such as Braille and large print), auxiliary aids and services (such as a relay service), and language assistance are available.

Mailing Address:
Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201