

# Notice of Privacy Practices

## YOUR RIGHTS REGARDING MEDICAL INFORMATION ABOUT YOU

You have the following rights regarding medical information about you:

### Right to Inspect and Copy:

You have the right to inspect and copy medical information that may be used to make decisions about your care. Usually, this includes medical and billing records, but does not include psychotherapy notes.

To inspect and copy medical information that may be used to make decisions about you, you must submit your request in writing to the Health Information Services Dept., c/o Cary Medical Center, 163 Van Buren Rd., Caribou, ME 04736.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed. Another licensed health care professional chosen by the hospital will review your request and denial. The person conducting the review will not be the person who denied your request.

We will comply with the outcome of the review.

### Right to Amend:

If you feel that medical information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the hospital.

To request an amendment, your request must be made in writing and submitted to the Director, Health Information Services, c/o Cary Medical Center, 163 Van Buren Rd., Caribou, ME 04736.

We may deny your request for information if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that was not created by

us, unless the person or entity that created the information is no longer available to make the amendment; is not part of the medical information kept by or for the hospital; is not part of the information which you would be permitted to inspect and copy; or is accurate and complete.

### Right to An Accounting of Disclosures:

You have the right to request an "accounting of disclosures" once per year without charge. This is a list of the disclosures we made of medical information about you for reasons other than treatment, payment, or health care operations.

To request this list of accounting of disclosures, you must submit your request in writing to the Health Information Services Department, c/o Cary Medical Center, 163 Van Buren Rd., Caribou, ME 04736.

### Right to Request Restrictions:

You have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like family members or friends.

We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment.

### Right to Request Confidential Communication:

You have the right to request that we communicate with you about medical matters in a certain way or at a certain location.

### Right to a Paper Copy of This Notice:

You have the right to a paper copy of this notice in its entirety. You may ask us to give you a copy of the full notice including specific disclosure examples at any time. (You may also obtain a copy of this notice at our website, [www.carymedicalcenter.org](http://www.carymedicalcenter.org)).

## COMPLAINTS

First, please talk with your nurse, or ask for his/her supervisor to speak to, or call hospital administration at 207-498-1244, or TTY: 207-498-2024. Next, if you still have concerns, complaints can be sent to the licensing authority or the Joint Commission. The Joint Commission requires the hospital to inform you on how to make a complaint. The hospital further informs its staff and medical staff that it will take no disciplinary action because an employee or physician reports safety or quality of care concerns to the Joint Commission. As advocates for the safety and quality at our hospital, we would like you to know that you should let us know if you have any concerns. If you speak with a representative at the hospital and you do not feel that the issue has been handled appropriately, you can contact the **Joint Commission** at:

[www.jointcommission.org](http://www.jointcommission.org)  
or call 1-800-994-6610;

or contact the State Bureau of Medical Services, Division of Licensing and Regulatory Services at 1-800-383-2441;  
or TDD: Maine relay 711.

You will not be penalized for filing a complaint.

## OTHER USES OF MEDICAL INFORMATION

Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose medical information about you, you may revoke that permission, in writing, at any time. If you revoke that permission, we will no longer use or disclose medical information about you for the reasons covered in your written authorization.

This Notice Describes How Medical Information About You May Be Used and Disclosed & How You Can Get Access To This Information. Please Review It Carefully.

If you have any questions about this notice, please contact Health Information Services at Cary Medical Center 163 Van Buren Rd., Caribou, ME 04736 (207) 498-3111



Effective January 1, 2013



## WHO WILL FOLLOW THIS NOTICE:

This notice describes our hospital's practices and that of:

- Any health care professional authorized to enter information into your hospital chart.
- All departments and units of the hospital.
- Any member of a volunteer group we allow to help you while you are in the hospital.
- All employees, hospital-based physician practices, staff and other hospital personnel.
- All owned subsidiary practices of Cary Medical Center will follow this privacy notice.

All these entities, sites and locations follow the terms of this notice. In addition, these entities, sites and locations may share medical information with each other for treatment, payment or health care operations purposes described in this notice. Organized health care arrangements include but are not limited to all active, courtesy and consulting medical staff as well as Allied Health Professionals. A list is available in the medical staff office.

## OUR PLEDGE REGARDING MEDICAL INFORMATION:

We understand that medical information about you and your health is personal and private and we are committed to protecting that medical information about you. We create a record of the care and services you receive at the hospital. We need this record to provide you with quality care and to comply with certain legal requirements.

This notice applies to all of the records your care generated by the hospital, whether made by hospital personnel or your personal doctor. Your personal doctor may have different policies and notices regarding the doctor's use and disclosure of your medical information created in the doctor's office or clinic.

This notice will tell you about the way in which we may use and disclose medical information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of medical information.

### We are required by law to:

- Make sure that medical information that identifies you is kept private;
- Give you this notice of our legal duties and privacy practices with respect to medical information about you; and
- Follow the terms of the notice that is currently in effect.

## HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU

The following categories describe different ways that we use and disclose medical information. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall into one of the categories.

### For Treatment:

We may use medical information about you to provide you with medical treatment or services. We may disclose medical information about you to doctors, nurses, technicians, medical students, or other hospital personnel who are involved in taking care of you at the hospital.

### For Payment:

We may use and disclose medical information about you so that the treatment and services you receive at the hospital may be billed and payment may be collected from you, an insurance company or a third party.

## For Health Care Operations:

We may use and disclose medical information about you for hospital operations. These uses and disclosures are necessary to run the hospital and make sure that all our patients receive quality care.

We also participate in a state-wide health information exchange (called HealthInfoNet), with other hospitals and providers in the state of Maine. This exchange makes available certain limited electronic health information that may be relevant to your care, such as allergies, prescription medications, laboratory test results, diagnostic study results, and medical and clinical conditions and diagnoses. If you are seen at another hospital or in another physician practice that participates in the exchange, the exchange will help those who treat you to see information from your Cary Medical Center and Pines Health Services providers and facilities. When your information is needed, ready access to your health information means better care for you.

Mental health, substance abuse and HIV information is not shared with HealthInfoNet and is not made available to other participants in the exchange. You may choose to not make your information available to the health information exchange by completing an "opt-out" election form available upon request and sending it to HealthInfoNet at the address designated on the form. In addition you may also go to the Internet at the Web address of <http://www.hinfonet.org/choice.html> and electronically fill out the form for immediate action on your choice. You should be aware that while the choice to "opt-out" is reversible, data documented prior to your election to "opt-in" will not be available to other participating providers and facilities in the health information exchange. You may reverse an "opt-out" decision by going to the same HealthInfoNet internet address at <http://www.hinfonet.org/choice.html>. For more information about HealthInfoNet please go to their website at [www.hinfonet.org](http://www.hinfonet.org), or contact a representative by telephone at 866-592-4352 or 207-541-9250.

## CHANGES TO THIS NOTICE

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in the hospital with a current effective date.

## TYPES OF DISCLOSURES OF PROTECTED HEALTH INFORMATION

### With Consent / Authorization:

Armed Forces	Railroad
Attorneys	Retirement
Clergy	Relative of patient
Commercial Insurance	Schools
Credit Investigations	Veterans Administration
Disability Determination	Food & Drug Administration
Foster Parents	Employer except if Workers' Compensation
Hospitals	Law Enforcement Agencies except as noted
Internal Revenue	
Physicians	
Prisons	

### Without Consent / Authorization

Accrediting and Licensing Agencies
Medicare and Medicaid
Peer Review Organizations
Workers' Compensation
Victims
Coroner or Medical Examiner
Appointment Reminders
Individuals Involved in Your Care or Payment of Care
To avert serious threat to health or public safety
National Security & Intelligence Activities As Required By Law

Unless expressly prohibited by individual - brief status of condition to media, clergy, and other emergency services, health care and relief services, correctional facilities, or branch of federal or state military forces; member of public.