



MASON COUNTY FIRE DISTRICT #4

TITLE: PRIVACY

CHAPTER: 2000 NUMBER: 2299 APPROVED: 10-07-2008

APPROVED: Signature on file Bob Burbridge, Chief

Mason County Fire District #4 is required by law to maintain the privacy of certain confidential health care information, known as Protected Health Information (PHI), and to provide a notice of our legal duties and privacy practices with respect to PHI.

Uses and Disclosures of PHI: The fire district may use PHI for the purpose of treatment, payment, and health care operations, in most cases without written permission. Examples of our use of PHI:

For treatment: This includes such things as obtaining verbal and written information about medical condition and treatment from the patient as well as from others, such as first responders, doctors and nurses who give orders to allow us to provide treatment to the patient. We may give PHI to other health care providers involved in the patients treatment, and may transfer PHI via radio or telephone to the hospital or dispatch center.

For payment: This includes any activities we must undertake in order to get reimbursed for the services we provide, including such things as submitting bills to insurance companies, making medical necessity determinations and collecting outstanding accounts.

For health care operations: This includes quality assurance activities, certification/licensing, and training programs to ensure that our personnel meet our standards of care and follow established policies and procedures, as well as certain other management functions.

Use and Disclosures of PHI Without Authorization: Mason Fire District #4 is permitted to use PHI without written authorization, or opportunity to object, in certain situations, and unless prohibited by a more stringent state law, including:

- For the treatment, payment or health care operations activities of another health care provider who treats the patient;
- For health care and legal compliance activities;



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- To a family member, other relative, or close personal friend or other individual involved in or around patient care if we obtain verbal agreements to do so or if we give an opportunity to object to such a disclosure and the patient does not raise an objection, and in certain other circumstances where we are unable to obtain patient agreement and believe the disclosure is in the patients best interests;

To a public health authority in certain situations as required by law (such as to report abuse, neglect or domestic violence);

For health oversight activities including audits or government investigations, inspections, disciplinary proceedings, and other administrative or judicial actions undertaken by the government (or their contractors) by law to oversee the health care system;

For judicial and administrative proceeding as required by a court or administrative order, or in some cases in response to a subpoena or other legal process;

For law enforcement activities in limited situations, such as when responding to a warrant;

For military, national defense and security and other special government functions;

To avert a serious threat to the health and safety of a person or the public at large;

For workers' compensation purposes, and in compliance with workers' compensation laws;

To coroners, medical examiners, and funeral directors for identifying a deceased person, determining cause of death, or carrying on their duties as authorized by law;

If the patient is an organ donor, we may release health information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ donation and transplantation;

For research projects, but this will be subject to strict oversight and approvals;

We may also use or disclosure health information in a way that does not personally identify the patient or reveal who the patient is.

Any other use or disclosure of PHI, other than those listed above will only be made with the patients written authorization. The patient may revoke authorization at any time, in writing, except to the extent that we have already used or disclosed medical information in reliance on that authorization.



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Patient Rights: As a patient, there are a number of rights with respect to PHI, including:

The right to access, copy or inspect PHI. This means the patient may inspect and copy most of the medical information about them that we maintain. We will normally provide the patient with access to this information within 30 days of their request. We may also charge a reasonable fee of \$10.00 to copy any medical information that the patient has right to access. In limited circumstances, we may deny access to medical information, and the patient may appeal certain types of denials. The patient has the right to request access to PHI, and we will provide a written response if we deny the patient access and let the patient know their appeal rights. The patient has the right to receive confidential communications of their PHI.

The right to amend PHI. The patient has the right to ask us to amend written medical information that we may have about them. We will generally amend information within 60 days of their request and will notify the patient when we have amended the information. We are permitted by law to deny request to amend medical information only in certain circumstances, like when we believe the information the patient has asked us to amend is correct.

The right to request an accounting. The patient may request an accounting from us of certain disclosures of their medical information that we have made in the six years prior to the date of their request. We are not required to give an accounting if information we have used or disclosed for purposes of treatment, payment or health care operations, or when we share their health information with our business associates, like our billing company or a medical facility from/to which we have transported the patient. We are also not required to give an accounting of our uses of protected health information for which the patient has already given us written authorization. If the patient wishes to request an accounting, contact our privacy officer.

The right to request that we restrict the uses and disclosures of PHI. The patient has the right to request that we restrict how we use and disclose medical information that we have about the patient. MASON FIRE DISTRICT #4 is not required to agree to any restrictions requested, but any restrictions agreed to by MASON FIRE DISTRICT #4 in writing are binding on MASON FIRE DISTRICT #4.

Internet and the Right to Obtain Copy of Paper Notice on Request. A copy of this Notice will be posted on the Brewster Fire Department website. The patient may also request a paper copy of the Notice by mail.

Revisions to the Notice. MASON FIRE DISTRICT #4 reserves the right to change the terms of this Notice at any time, and the changes will be effective immediately and will apply to all protected health information that we maintain. Any material changes to the Notice will be promptly posted in our facilities and posted to our MASON FIRE DISTRICT #4 web site. The patient can get a copy of the latest version of this Notice by contacting our privacy officer.



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Legal Rights and Complaints. The patient has 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 rights has been violated. The patient will not be retaliated against in any way for filing a complaint with us of to the government.