NOTICE OF PRIVACY PRACTICES AND STATEMENT OF RIGHTS

The United Methodist Children's Home is committed to protecting the privacy of all individuals admitted into any United Methodist Children's Home (UMCH) program. We believe it is important for you to know how we handle protected health information (PHI) may be used and disclosed, and how you may gain access to this information.

We may revise our privacy practices from time to time as we add new features or as laws change that may affect our services. If we may material changes to this Notice of Privacy Practices, we will post a new version number at the end of this Notice consisting of the date (month and year) the Notice was revised.

It is of the utmost importance for staff to divulge as little information as possible relating to all individuals admitted into any UMCH program. It is not always possible to avoid sharing information with other persons and providers. A law that went into effect on April 14, 2003 provides guidelines for Releasing "protected health information" about our clients and residents.

Protected Health Information (PHI): This refers to information, general or specific, that may identify you and that relates to your past, present, or future physical or mental health or condition and related health care services.

SECTION 1 – Disclosure of Protected Health Information

The following information outlines how UMCH may use and disclose information about you.

1. Required By Law: UMCH staff may use or disclose health information about you when it is required by law. For example, if a judge issues a subpoena for your record or we are audited by a federal or state UMCH.
2. For Treatment Purposes: UMCH staff may use or disclose health information about you to provide treatment, arrange needed treatment services, or to facilitate needed treatment services. For example, we may need to disclose information about you to your doctor, nurse, school counselor, or other persons involved in your care and treatment.
3. To Receive Payment For Our Services: UMCH staff may divulge information about you necessary to obtain payment for our services. For example, we have to provide your Medicaid Number and Diagnosis when we bill for payment.
4. Public Health Needs: UMCH staff may divulge information about you if there is a public health need or risk involved.
5. To Support Our Business Activities: UMCH staff may divulge information about you in order to support our business activities. For example, a DHR Quality Assurance Team may choose your record for review.
6. Law Enforcement: UMCH may divulge information about you to law enforcement personnel. For example, if you were taken to Juvenile Detention, we would share information about you for their records and follow-up care and treatment.
7. Legal Proceedings & Administrative Hearings: UMCH may divulge information about you in legal proceedings and/or administrative hearings. For example, if we you are applying for SSI, we would provide the information needed for a decision to be made.

8. For Identification In Case Of Death: UMCH staff may divulge information about you if needed for identification in case of death, or for determining a cause of death.
9. Family Members: UMCH staff may disclose information about you to a parent, other family member, friend, or caregiver who is involved in your health care. UMCH may only disclose such information as necessary to achieve treatment goals.
10. Emergency Situations – UMCH staff may disclose your "protected health information" in an emergency treatment situation, if, in the professional judgment of staff, the use or disclosure is in your best interests. We will only disclose the information that is needed to facilitate and obtain the needed emergency treatment.
11. For Prevention Of A Criminal Activity Or To Lessen Criminal Activity Which May Pose A Threat To Personal Or Public Safety: For example, UMCH staff may disclose information about you to prevent or to lessen your involvement in any criminal activity, which may pose risk or imminent harm to the health or safety of a person or persons.
12. Child Abuse/Neglect: UMCH staff may disclose health information about you to authorities or other relevant persons if a staff member has knowledge of any instances of child abuse/neglect that involve you.

SECTION 2 – Rights Regarding Health Information About You

1. In any instance not covered by this notice, we will ask for your written permission before using or disclosing health information about you.
2. You may have the right to look at or get a copy of the information about you in our record, when you submit a written request. Requests may denied for good cause. If your written request is denied, you may request, in writing, a review of the decision.
3. You have the right to request restrictions on the disclosure or use of "protected health information" for the purposes **other than** for the reasons stated in Section 1. You may request that any part of your "protected health information" not be disclosed to family members or others who may be involved in your case. The UMCH is not required to agree to the restriction if it is in the professional judgment of UMCH staff that is in your best interests to disclose or permit the disclosure of the "protected health information." If UMCH agrees to the restriction, "public health information" may not be used or disclosed in violation of that restriction.
4. You have the right to confidential communications. You may request that certain communications be treated as confidential and the UMCH will accommodate any reasonable request that is not in opposition to treatment goals or your ISP.
5. You have a right to a list of those instances where the UMCH has disclosed information about you other than for treatment, payment, or healthcare operations, or where you authorized a disclosure. You must submit a written request for this list. The first request in a 12-month period is free. Other requests will be charged according to the UMCH's cost of producing the list. You will be informed of the cost before you incur any costs.

SECTION 3 – Complaints

If you are concerned that your privacy rights may have been violated, please contact:

UMCH Privacy Officer
P. O. Box 830
Selma, Alabama 36702-0830

You may send a written complaint to:

U.S. Department of Health & Human Services - Office of Civil Rights
61 Forsyth Street
Suite 31370
Atlanta, Georgia 30301

Under no circumstances will you be penalized for filing a complaint.

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Web Site Information