FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

NOTICE OF PRIVACY PRACTICES

THE EFFECTIVE DATE OF THIS NOTICE IS JANUARY 1, 2017.

Your Information.
Your Rights.
Our Responsibilities.

This notice describes how health information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

Our Uses And Disclosures

We may use and share your information as we:

- Treat you
- Bill for your services
- Run our organization
- Help with public health and safety issues
- Do research
- Comply with the law
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions.

➢ ***See pages 2 and 3***
for more information on these uses and disclosures

Your Choices

You have some choices in the way that we use and share information as we:

- Send appointment reminders
- Include you in a membership directory
- Provide other YMCA services
- Market our services
- Raise funds

➢ ***See pages 2 and 3***
for more information on these choices and how to exercise them

Your Rights

You have the right to:

- Get a copy of your paper or electronic health record
- Correct your paper or electronic health record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

➢ ***See pages 4 and 5***
for more information on these rights and how to exercise them

How YMCA May Use and/or Share Your Health Information.

Except where prohibited by federal or state laws that require special privacy protections, YMCA may share your health information without your authorization for the following purposes. Below, YMCA has provided examples of certain purposes; **however, not every permissible use or disclosure is listed in this Notice.**

Treatment Purposes. YMCA may use or share your health information to provide and coordinate treatment and other healthcare services you receive. *For example*: YMCA may disclose your health information to doctors and other personnel involved in your health care. YMCA may also disclose your health information to third parties whom YMCA uses to provide certain chronic disease preventive services to you.

Payment. YMCA may use or share your health information to bill for the services you receive at YMCA and to collect payment from you, an insurance company, or another third party. *For example*: YMCA may need to give your health plan information about services you receive at YMCA so your health plan will pay YMCA. YMCA may also tell your health plan about a service you are going to receive to determine whether your plan will cover the service.

Health Care Operations. YMCA may use or share your health information for YMCA operations, to improve your care and to contact you when necessary. *For example*: YMCA may use or disclose your health information (1) to conduct quality assessment and improvement activities; (2) to evaluate the performance of staff providing services to you; (3) to manage, plan or develop YMCA's services and budget; (4) to create or provide individualized services; or (5) to cooperate with private and federal auditors.

Appointment Reminders and Health Service Alternatives. YMCA may contact you to remind you of appointments or to provide information about other health-related benefits and services that may be of interest to you or your family.

Public Health and Safety Issues. YMCA may share health information about you with public health authorities for public health activities such as: preventing or controlling disease, injury or disability; tracking and maintaining vital records; avoiding a serious threat to health or safety of a person or the public; and reporting suspected abuse, neglect, or domestic violence to governmental or social services agencies. YMCA may also share your health information with a governmental agency authorized to oversee government health care programs.

Research. YMCA may use or share your information for health research in limited circumstances where the information will be protected by the researchers.

Philanthropy. As permitted by applicable law, YMCA may contact you to raise funds to sustain the YMCA mission, but you may contact us and request not to receive any future fundraising communications. YMCA does not engage in selling or renting of health information.

As Required by Law. YMCA will share your health information when required by state or federal law.

Workers' Compensation, Law Enforcement and other Government Requests. YMCA may use or share information about you:

- For workers' compensation claims or similar programs established by law;

- To a law enforcement official or correctional institution for law enforcement and health and safety purposes; and
- For special government functions, such as military, national security, and presidential protective services.

Health Oversight Activities. YMCA may share health information about you to an oversight agency for activities authorized by law. These oversight activities include audits, investigations, inspections, and credentialing, as necessary for licensure and for the government to monitor the health care system, government programs and compliance with civil rights laws.

Lawsuits and Legal Actions. YMCA may share health information about you in response to a court or administrative order, or in response to a subpoena.

Other Uses of Health Information that Require Your Authorization.

Specific uses and disclosures requiring Authorization. YMCA must obtain your written authorization for the use or disclosure of psychotherapy notes, use or disclosure of your health information for marketing, and for sale, except in limited circumstances where applicable law allows such uses or disclosure without your authorization.

Other uses and disclosures. YMCA must obtain your written authorization before using or disclosing your health information for purposes other than those described in this Notice or otherwise permitted by law. You may revoke an authorization in writing at any time. Upon receipt of the written revocation, YMCA will stop using or disclosing your health information, except to the extent that YMCA has already taken action in reliance on the authorization.

Our Responsibilities.

- YMCA is required by law to maintain the privacy and security of your health information.
- YMCA will notify you as required by law when there is a breach of your unsecured protected health information. In some circumstances, another entity may provide the notification to you on behalf of YMCA.
- YMCA may use e-mail to inform you of a breach if you have provided YMCA with a current e-mail address. YMCA also may provide notification to you by other methods if appropriate.
- YMCA must follow the duties and privacy practices described in this Notice and provide a copy of it, when requested.
- YMCA will not use or share your information for any purposes not described in this Notice without your written permission. If you do authorize YMCA to use or disclose your health information, in most cases, you may revoke your written authorization at any time. Your revocation will be effective from the date YMCA receives the revocation.

Your Health Information Rights. This section explains your rights and some of YMCA's responsibilities with respect to your health information.

- **Obtain a Copy of Your Health Records**. You may ask YMCA to view or have YMCA send you a paper or electronic copy of your health records and other health information. YMCA will provide you with a copy or summary of your health information. However, safety or other legal reasons may limit the information you may see. YMCA may charge a reasonable, cost-based fee for copies requested.

- **Amend Your Health Records**. You may ask YMCA to change health information about you that you think is incorrect or incomplete. YMCA may not make the changes or additions if YMCA believes the information is accurate or complete, or for other reasons. If YMCA does not agree to change your information, YMCA will provide you with a written explanation within 60 days of receiving your request. Any request you make to change your information, and YMCA's response, will be noted in your record.

- **Communicate Confidentially**. You may request in writing that YMCA communicate with you by a reasonable means or at a reasonable alternative location. For example: you may request that YMCA communicate with you by e-mail rather than by telephone, or at home instead of the office. YMCA will agree to all reasonable requests.

- **Restrict the Use and Disclosure of Your Health Information**. You may ask YMCA to not use or share certain health information for treatment, payment or certain YMCA operations. Your request must be in writing and state the restriction(s) you would like. YMCA will consider your request but is not required to agree to it, and YMCA may say "no" if it would negatively affect your care. If you pay for a service or item out-of-pocket in full, you may request that YMCA not share that information with your health insurance company for the purpose of payment or for YMCA operations. YMCA will agree to your request unless a law requires YMCA to share that information.

- **List of Persons Who Received Your Health Information**. You may ask YMCA for a list of the times YMCA shared your information with others in the six years prior to the date of your request, who YMCA shared the information with, and why the information was shared. You must make your request in writing. The law does not require YMCA to list every situation in which YMCA shared your information. For example: YMCA does not have to list the times when it shared your information for treatment, payment, or health care operations, or when YMCA shared your information pursuant to an authorization signed by you or your representative. YMCA will provide you with one accounting per year for free, but will charge a reasonable, cost-based fee if you request another accounting within 12 months.

- **Request a Copy of this Privacy Notice**. You are entitled to a paper copy of this Notice at any time, even if you have agreed to receive the Notice electronically. An electronic version of this Notice is available on the YMCA website:YMCAonline.org

- **Choose Someone to Act on Your Behalf**. You may give someone a medical power of attorney or a legal guardian may be appointed for you to exercise your rights and make choices about your health. Before YMCA takes any action, YMCA will confirm the person has this authority and can act on your behalf.

- **File a Complaint**. If you believe your privacy rights have been violated by YMCA, you have the right to complain to YMCA or to the Secretary of the U.S. Department of Health and Human Services. You may file a complaint with the YMCA's Compliance Officer, within

180 days of the suspected violation, at the address where you receive services or the address on any attachment that may be provided to you with this form. You also may file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. YMCA will not retaliate against you for filing a complaint with either YMCA or with the U.S. Department of Health and Human Services.

To request additional copies of this Notice or to receive more information about YMCA's privacy practices or your rights, please contact the Compliance Officer at the following address: 118 W. First ST. Suite 300 Dayton, OH 45402.