



# Notice of Privacy Practices

(HIPAA 45 CFR 164.520 – Effective April 16, 2003)

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED OR DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

- We can release your confidential healthcare information to other healthcare professionals within the hospital for the purpose of providing you with quality healthcare.
- We can release your confidential healthcare information to your insurance provider so that the hospital can receive payment for providing you with needed healthcare services.
- We can release your confidential healthcare information to the public or law enforcement officials if there is an investigation in which you are a victim of abuse, a crime or domestic violence.
- We can release your confidential healthcare information to other healthcare providers if you need emergency care.
- We can release your confidential healthcare information to a public health or federal organization in the event of a communicable disease or to report a defective device or unexpected event involving a biological product (food or medication).
- We can release your confidential healthcare information for any other reason only after receiving written authorization from you. You may revoke your permission to release confidential healthcare information at any time.
- We can **not** release your confidential healthcare information for any other purpose than that which is identified in the Notice.
- You may be contacted by the hospital to remind you of any appointments, healthcare treatment options or other health services that may be of interest to you.
- You may be contacted by the hospital for the purposes of raising funds to support the hospital's operations.
- You have the right to restrict the use of your confidential healthcare information. However, the hospital may choose to refuse your restriction if it conflicts with providing you with quality healthcare or if it is an emergency situation.
- You have the right to receive confidential communication about your protected healthcare information.
- You have the right to review and photocopy any/all portions of your healthcare information.
- You have the right to amend or make changes to your healthcare information.
- You have the right to have a copy of the complete Notice of Privacy Practices upon request. You can have this copy by electronic transmission or on paper.
- The hospital is required by law to protect the privacy of its patients. It will keep confidential any and all patient healthcare information and will provide patients with a list of duties or practices that protect confidential healthcare information.
- The hospital will abide by the terms of this notice. The hospital reserves the right to make changes to this notice and continue to maintain the confidentiality of all healthcare information.
- You have the right to complain to the hospital or the Secretary of Health and Human Services if you believe your rights to privacy have been violated. If you feel your privacy rights have been violated, please mail your complaint to the hospital or to the Department of Health and Human Services.

## **COPLEY HOSPITAL**

Director of Medical Records  
528 Washington Highway  
Morrisville, VT 05661

## **DEPARTMENT OF HEALTH & HUMAN SERVICES**

Secretary, Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, DC 20201

- All complaints will be investigated. No personal issue will be raised for filing a complaint with the hospital.
- For further information about this Notice of Privacy Practices, please contact:

Privacy Officer  
Health Information Management Department  
Copley Hospital  
(802) 888-8350