



## Tiburcio Vasquez Health Center, Inc.

### SUMMARY NOTICE OF PRIVACY PRACTICES

**Effective Date: September 1, 2013**

*This summary is provided to assist you in understanding our Notice of Privacy Practices.*

THE NOTICE OF PRIVACY PRACTICES CONTAINS A DETAILED DESCRIPTION OF HOW THIS HEALTH CENTER WILL PROTECT YOUR HEALTH INFORMATION, YOUR RIGHTS AS A PATIENT, AND OUR COMMON PRACTICES IN DEALING WITH PATIENT HEALTH INFORMATION. PLEASE REVIEW THIS SUMMARY AND THE FULL NOTICE CAREFULLY.

#### **Our Pledge Regarding Health Information.**

We understand that your health information is personal and we are committed to protecting that health information. We create a record of the care and services you receive at the health center to provide you with quality care and to comply with certain legal requirements. This notice will tell you about the ways in which we may use and disclose your health information. We also describe your rights and certain obligations we have regarding the use and disclosure of medical information. It also describes your rights with respect to your health information, and tells you how to exercise them.

#### **Who Will Follow the Notice of Privacy Practices.**

Any health care professional who provides services to you within our facilities; all sites, locations, departments and units of the health center; all employees, staff, consultants, volunteers and other personnel.

#### **Uses and Disclosures of Health Information.**

We will use and disclose your health information in order to treat you or to assist other health care providers in treating you. We will also use and disclose your health information in order to obtain payment for our services or to allow insurance companies to process insurance claims for services rendered to you by us or other health care providers. Finally, we may disclose your health information for certain limited operational activities such as quality assessment, licensing, accreditation and training.

#### **Uses and Disclosures Based on Your Authorization.**

Except as stated in more detail in the Notice of Privacy Practices, we will not use or disclose your health information without your written authorization.

In the following circumstances, we may disclose your health information without your written authorization:

- To family members or close friends who are involved in your health care;
- For certain limited research purposes;
- For purposes of public health and safety;
- To Government agencies for purposes of their audits, investigations and other oversight activities;
- To government authorities to prevent child abuse or domestic violence;
- To law enforcement authorities to protect public safety or to assist in apprehending criminal offenders;
- When required by court orders, search warrants, subpoenas and as otherwise required by the law.

#### **Patient Rights.**

As our patient, you have the following rights:

- To have access to and/or a copy of your health information;
- To receive an accounting of certain disclosures we have made of your health information;
- To request restrictions as to how your health information is used or disclosed;
- To request that we communicate with you in confidence;
- To request that we amend your health information;
- To receive notice of our privacy practices.

A copy of this notice is available at the reception desk and on our website: [www.tvhc.org](http://www.tvhc.org)

#### **Uses and Disclosures Not Requiring Your Authorization.**

Form: 01-002-ENG (12/18); Summary Notice of Privacy Practices

