

## GRANDVILLE FIRE DEPARTMENT PRIVACY NOTICE

**IMPORTANT: This Notice describes how medical information about you may be used and how you can get access to this information. Please review it carefully.**

The Grandville Fire Department is required by law to maintain the privacy of your confidential health information, known as Protected Health Information ("PHI"), to provide you with a notice of your legal rights and our legal duties and privacy practices with respect to your PHI, and to notify affected individuals following a breach of unsecured PHI. Grandville Fire Department is also required to abide by the terms of the version of this Notice currently in effect.

**We respect your privacy, and treat all health care information about our patients with care under strict policies of confidentiality that all of our staff are committed to following at all times.**

Please read this Notice. If you have any questions about it, please contact Mr. Michael May, our Fire Chief and Privacy Officer at 616-530-6211.

*Purpose of this Notice.* This Notice describes your legal rights, advises you of our privacy practices, and lets you know how the Grandville Fire Department may use and disclose PHI about you.

*Uses and disclosures of PHI.* The Grandville Fire Department may use PHI for the purpose of treatment and health care operations, in most cases without your written permission. Examples of our use of your PHI:

*For treatment.* This includes verbal and written information that we obtain about you and your medical condition and use for treatment provided by us and other medical personnel, (including other health care professionals who give orders to allow us to provide treatment to you). It also includes information we give to other health care personnel to whom we transfer your care and treatment, and includes transfer of PHI via radio or telephone to the hospital or dispatch center as well as providing the hospital, transporting EMS agency and Medical Control Authority a copy of the written record we create in the course of providing you with treatment.

*For health care operations.* This includes quality assurance activities, licensing and training programs to ensure that our EMS personnel meet our standards of care and follow established protocols and procedures, obtaining legal and financial services, conducting business planning, processing grievances and complaints, and creating reports that *do not* individually identify you for data collection purposes.

*Use and Disclosure of PHI Without Your Authorization:* The Grandville Fire Department is permitted to use PHI *without* your written authorization, or opportunity to object in certain situations, including:

- For the Grandville Fire Department's use in treating you, or in other health care operations.
- For the treatment activities of another health care provider.
  - To another health care provider or entity for the payment activities of the provider or entity that receives the information as long as the provider or entity receiving the information has or had a relationship with you and the PHI pertains to that relationship.
  - For health care fraud and abuse detection or for activities related to compliance with the law.
  - To a relative, friend or other individual involved in your care if we obtain your verbal agreement to do so or if we give you an opportunity to object to such a disclosure and you do not raise an objection. We may also disclose health information to relative, friend or other individual involved in your care if we infer from the circumstances that you would not object. For example, we may assume you agree to our disclosure of your PHI to your spouse when your spouse has called an ambulance for you. In situations where you are not capable of objecting, (because you are not present or due to your incapacity or medical emergency), we may, in our professional judgment, determine that a disclosure to a relative or friend is in your best interest. In that situation, we will disclose only health information relevant to that person's involvement in your care. For example, we may inform the person who accompanies you that you have certain symptoms and we may give that person an update on your vital signs and treatment that is being administered by our personnel or the ambulance crew.
    - To a government authority in certain situations such as reporting a birth, death or disease as required by law, as part of a public health investigation, to report child or adult abuse or neglect or domestic violence, to report adverse events such as products defects, or to notify a person about exposure to a possible communicable disease as required by law.
    - 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 proceedings as required by a court of 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 there is a warrant for the request, or when the information is needed to locate a suspect or stop a crime.
    - 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 you are 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 and health information will be released only when there is a minimal risk to your privacy and adequate safeguards are in place in accordance with the law.

- We may use or disclose health information about you that does not personally identify you or reveal who you are.

Any other use or disclosure of PHI, other than those listed above, will only be made with your written authorization. The authorization must specifically identify the information we seek to use or disclose, as well as when and how we seek to use or disclose it. **You may revoke your authorization at any time, in writing, except to the extent that we have already used or disclosed medical information in reliance on that authorization.**

Patient Rights: As a patient, you have a number of rights with respect to the protection of your PHI, including:

*The right to access, copy or inspect your PHI.* You may come to our offices and inspect and copy most of the medical information about you that we maintain. We will normally provide you with access to this information within 30 days of your request. We may also charge you a reasonable fee for you to copy any medical information that you have the right to access. In limited circumstances, we may deny you access to your medical information, and you may appeal certain types of denials. All requests to access your PHI must be made in writing to the Privacy Officer listed at the end of this Notice. We will provide a written response if we deny you access and let you know your appeal rights.

*The right to amend your PHI.* You have the right to ask us to amend written medical information that we maintain. We will generally amend your information within 60 days of your request and will notify you when we have amended the information. We are permitted by law to deny your request to amend your medical information in certain circumstances, like when we believe the information you have asked us to amend is correct. To amend your medical information, contact the Privacy Officer listed at the end of this Notice in writing.

*The right to request an accounting of our use and disclosure of your PHI.* You may request an accounting from us of certain disclosures of your medical information that we have made in the last six years prior to the date of your request, but not prior to April 14, 2003. We are not required to give you an accounting of any disclosure that is

permitted by this Notice or for which you gave a written authorization. To request an accounting of disclosures, contact the Privacy Officer listed at the end of this Notice in writing.

*The right to request that we restrict the uses and disclosures of your PHI.* You have the right to request that we restrict how we use and disclose your medical information. If you request a restriction and the information you asked us to restrict is needed to provide emergency treatment, then we may use or disclose the PHI to a health care provider to provide you with emergency treatment. Grandville Fire is not required to agree to any restrictions you request, except if the disclosure is to a health plan for the purpose of carrying out payment and health care operations and the PHI pertains solely to health care for which the individual has paid in full, but any restrictions agreed to by Grandville Fire in writing are binding on Grandville Fire. All requests for restrictions must be made in writing to the Privacy Officer listed at the end of this notice.

*Internet Posting and the Right to Obtain Copy of Paper Notice on Request.* We will prominently post a copy of the Notice and make it available electronically on our web site. You may always request a paper copy of this Notice.

*Revisions to the Notice.* Grandville Fire 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 on our web site. You can get a copy of the latest version of this Notice by contacting the Privacy Officer identified below.

*Your Legal Rights and Complaints.* You also have the right to complain to us or the Secretary of the United States Department of Health and Human Services if you believe your privacy rights have been violated. You will not be retaliated against in any way for filing a complaint with us or the government. Should you have any questions, comments or complaints you may direct all inquires to the Privacy Officer listed at the end of this Notice.

If you have any questions or if you wish to file a complaint or exercise any rights listed in this Notice, please contact:

Chief Michael W. May  
Grandville Fire Department  
3215 Wilson SW  
Grandville, MI 49418

**Effective date of this Notice: February 1, 2014**

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