



NOTICE OF PRIVACY PRACTICE

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THAT INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

In accordance with federal and state law, Urgent Care of Idaho, is committed to maintaining the privacy of your Protected Health Information ("PHI"). Your PHI includes information about your health condition and the care and treatment you receive from Urgent Care of Idaho. This notice explains how your PHI may be used and disclosed to third parties. This notice also informs you of your rights regarding your PHI.

I. HOW URGENT CARE OF IDAHO (URGENT CARE OF IDAHO) MAY USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION

- (a) **Treatment.** To provide you with the health care you require, URGENT CARE OF IDAHO may use and disclose your PHI to those health care professionals, whether on Urgent Care of Idaho' staff or not, so that it may provide, coordinate, plan and manage your health care.
- (b) **Healthcare Operations.** To operate in accordance with applicable law and insurance requirements, and to provide quality and efficient care, URGENT CARE OF IDAHO may need to compile, use, and disclose your PHI. For example, URGENT CARE OF IDAHO may use your PHI to evaluate the performance of the Urgent Care's staff in providing care to you.
- (c) **Payment.** To get paid for services provided to you, URGENT CARE OF IDAHO may provide your PHI, directly or through a billing service, to a third party who may be responsible for your care, including insurance companies and health plans. If necessary, URGENT CARE OF IDAHO may use your PHI in other collection efforts with respect to all persons who may be liable for Urgent Care of Idaho' bills related to your care. For example, URGENT CARE OF IDAHO may need to provide your insurance with information about health care services that you received at the Urgent Care so that URGENT CARE OF IDAHO can be reimbursed. URGENT CARE OF IDAHO may also need to tell your insurance plan about the treatment you are going to receive so that it can determine whether or not it will cover the treatment expense.
- (d) **Appointment Reminders.** URGENT CARE OF IDAHO may contact you to provide appointment reminders or information about treatment alternatives or other health related benefits and services that may be of interest to you. These appointment reminders may include letters or telephoning your home and leaving a message on your answering machine or with the individual answering the phone.
- (e) **Individuals Involved in Your Care or Payment for Your Care.** When appropriate, we may share Health Information with a person who is involved in your medical care or payment for your care, such as your family or a close friend. We also may notify your family about your location or general condition or disclose such information to an entity assisting in a disaster relief effort.

II. OTHER USE AND DISCLOSURES WHICH MAY BE PERMITTED OR REQUIRED BY LAW

- (a) **As Required by Law.** We will disclose Health Information when required to do so by international, federal, state, or local law.
- (b) **De-identified Information.** URGENT CARE OF IDAHO may use and disclose health information that may be related to your care but does not identify you and cannot be used to identify you.
- (c) **Business Associate.** URGENT CARE OF IDAHO may use and disclose PHI to a business associate if URGENT CARE OF IDAHO obtains satisfactory written assurance, in accordance with applicable law, that the business associate will appropriately safeguard your PHI. A business associate is an entity that assists URGENT CARE OF IDAHO in undertaking some essential function.
- (d) **Personal Representative.** URGENT CARE OF IDAHO may use and disclose PHI to: a person who, under applicable law, has the authority to represent you in making decisions related to your health care.
- (e) **Emergency Situations.** URGENT CARE OF IDAHO may use and disclose PHI: for the purpose of obtaining or rendering emergency treatment to you provided that URGENT CARE OF IDAHO attempts to obtain your consent as soon as possible; or to a public or private entity authorized by law or by its charter to assist in disaster relief efforts, for the purpose of coordinating your care with such entities in an emergency situation.
- (f) **Public Health Activities.** URGENT CARE OF IDAHO may use and disclose PHI when authorized by law to provide information if it believes that the disclosure is necessary to prevent serious harm.
- (g) **Abuse, Neglect or Domestic Violence.** URGENT CARE OF IDAHO may use and disclose PHI when required by law to provide information if it believes that the disclosure is necessary to prevent serious harm.
- (h) **Health Oversight Activities.** URGENT CARE OF IDAHO may use and disclose PHI when required by law to provide information if it believes that the disclosure is necessary to prevent serious harm. URGENT CARE OF IDAHO may use and disclose PHI when required by law to provide information in criminal investigations, disciplinary actions, or other activities relating to the community's health care system.
- (i) **Judicial and Administrative Proceeding.** URGENT CARE OF IDAHO may use and disclose PHI in response to a court order or a lawfully issued subpoena.
- (j) **Law Enforcement Purposes.** URGENT CARE OF IDAHO may use and disclose PHI, when authorized, to a law enforcement official.
- (k) **Coroner, Medical Examiner, or Funeral Director.** URGENT CARE OF IDAHO may use and disclose PHI to a coroner or medical examiner for the purpose of identifying your or determining your cause of death.
- (l) **Research.** URGENT CARE OF IDAHO may use and disclose PHI subject to applicable legal requirements if URGENT CARE OF IDAHO is involved in research activities.
- (m) **Avert a Threat to Health or Safety.** URGENT CARE OF IDAHO may use and disclose PHI if it believes that such disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public and the disclosure is to an individual who is reasonably able to prevent or lessen the threat.
- (n) **Specialized Government Functions.** URGENT CARE OF IDAHO may use and disclose PHI when authorized by law with regard to certain military and veteran activity.
- (o) **Workers' Compensation.** URGENT CARE OF IDAHO may use and disclose PHI if you are involved in a Workers' Compensation claim, to an individual or entity that is part of the Workers' Compensation system.
- (p) **National Security and Intelligence Activities.** URGENT CARE OF IDAHO may use and disclose PHI to authorized governmental officials with necessary intelligence information for national security activities.
- (q) **Protective Services for the President and Others.** We may disclose Health Information to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state or to conduct special investigations.

- (r) **Military and Veterans.** URGENT CARE OF IDAHO may use and disclose PHI if you are a member of the armed forces, as required by the military command authorities
- (s) **Organ and Tissue Donation.** If you are an organ donor, we may use or release Health Information to organizations that handle organ procurement or other entities engaged in procurement, banking or transportation of organs, eyes or tissues to facilitate organ, eye or tissue donation and transplantation.
- (t) **Data Breach Notification Purposes.** We may use or disclose your Protected Health Information to provide legally required notices of unauthorized access to or disclosure of your health information.
- (u) **Lawsuits and Disputes.** If you are involved in a lawsuit or a dispute, we may disclose Health Information in response to a court or administrative order. We also may disclose Health Information in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

III. AUTHORIZATION

Uses and/or disclosures, other than those described above will be made only with your written authorization.

IV. YOUR RIGHTS

You have the right to:

- (a) Revoke any Authorization or consent you have given to URGENT CARE OF IDAHO, at any time. To request a revocation, you must submit a written request to URGENT CARE OF IDAHO.
- (b) Request restrictions on certain uses and disclosure of your PHI as proved by law. Except in certain instances, URGENT CARE OF IDAHO may not be obligated to agree to any requested restrictions. To request restrictions, you must submit a written request to URGENT CARE OF IDAHO. In your written request, you must inform URGENT CARE OF IDAHO of what information you want to limit, whether you want to limit Urgent Care of Idaho' use, disclosure, or both, and to whom you want the limits to apply. If URGENT CARE OF IDAHO agrees to your request, URGENT CARE OF IDAHO will comply with your request unless the information is needed in order to provide you with emergency treatment.
- (c) Inspect and copy your PHI as provided by law.
- (d) You have the right to be notified upon a breach of any of your unsecured Protected Health Information.
- (e) If you paid out-of-pocket (or in other words, you have requested that we not bill your health plan) in full for a specific item or service, you have the right to ask that your Protected Health Information with respect to that item or service not be disclosed to a health plan for purposes of payment or health care operations, and we will honor that request.
- (f) You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you by mail or at work. To request confidential communications, you must make your request, in writing, to URGENT CARE OF IDAHO. Your request must specify how or where you wish to be contacted. We will accommodate reasonable requests.
- (g) Amend your PHI as provided by law. To request an amendment, you must submit a written request to URGENT CARE OF IDAHO. You must provide a reason that supports your request. URGENT CARE OF IDAHO may deny your request if it is not in writing, if you do not provide a reason in support of your request, if the information to be amended was not created by URGENT CARE OF IDAHO (unless the individual or entity that created the information is no longer available), if the information is not part of your PHI maintained by URGENT CARE OF IDAHO, if the information is not part of the information you would be permitted to inspect and copy, and/or if the information is accurate and complete.
- (h) Receive an accounting of disclosures of your PHI as provided by law.

- (i) Receive a paper copy of this Privacy Notice from URGENT CARE OF IDAHO upon request.
- (j) Complain to URGENT CARE OF IDAHO or to the Secretary of HHS if you believe your privacy rights have been violated.
- (k) Unless you object, we may disclose to a member of your family, a relative, a close friend or any other person you identify, your Protected Health Information that directly relates to that person's involvement in your health care. If you are unable to agree or object to such a disclosure, we may disclose such information as necessary if we determine that it is in your best interest based on our professional judgment.
- (l) We may disclose your Protected Health Information to disaster relief organizations that seek your Protected Health Information to coordinate your care, or notify family and friends of your location or condition in a disaster. We will provide you with an opportunity to agree or object to such a disclosure whenever we practically can do so.

V. URGENT CARE OF IDAHO' REQUIREMENTS

Urgent Care of Idaho:

- (a) Is required by federal law to maintain the privacy of your PHI and to provide you with this Privacy Notice detailing Urgent Care of Idaho' legal duties and privacy practices with respect to your PHI.
- (b) May be required by State law to maintain greater restrictions on the use or release of your PHI than that which is provided for under federal law.
- (c) Is required to abide by the terms of this Privacy Notice.
- (d) Reserves the right to change the terms of this privacy Notice and to make the new Privacy Notice provisions effective for your PHI that it maintains.
- (e) Will distribute any revised Privacy Notice to you prior to implementation.
- (f) Will not retaliate against you for filing a complaint.

VI. EFFECTIVE DATE

This notice is in effect as of June 1, 2022. We reserve the right to change this notice and make the new notice apply to Health Information we already have as well as any information we receive in the future. We will post a copy of our current notice at our office.

VII. HOW TO FILE COMPLAINTS

You will not be penalized for filing a complaint. Complaints against Urgent Care of Idaho, regarding the privacy of PHI, should be sent to:

U.S. Department of Health and Human Services
200 Independence Ave., SW Room 509F
HHH Building
Washington, D.C. 20201
1-800-368-1019

For more information on HIPAA privacy requirements, HIPAA electronic transactions and code sets regulations and the proposed HIPAA security rules, please visit ACOG's web site, www.acog.org, or call (202) 863-2584.