



This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully. We are required by law to maintain the privacy of your medical information and to provide you with notice of our legal duties and privacy practices. We reserve the right to change our privacy practices and this notice and the changes will be effective for all medical information we maintain. If or when this notice is changed, the revised policy will be available at the Clinic. You have the right to a paper copy of this notice and you may request a copy of this notice by contacting the Executive Director or their designee of the Temple Community Clinic.

Permitted Uses

Treatment:

- We may use health care information about you to provide you with medical treatment, or for other treatment services provided by Temple Community Clinic. This includes coordination of your health care with other providers, consultation with other health care providers and referral to other health care providers.
- We may contact you before an appointment to remind you of this appointment.
- We may call you by name in the waiting room when it is time for your appointment.
- We may contact you by telephone, text, or mail to provide appointment reminders, information about treatment plans and alternatives, or other health related benefits and services that may be of interest to you.
- We may disclose to a member of your family, a relative, a close friend or any other person you identify, your healthcare information to the extent necessary to help with your health care.
- We will use our professional judgement and experience with common practice to allow a person to pick up filled prescriptions, medical supplies or other similar forms of healthcare information.

Healthcare Operations:

- We may use and disclose healthcare information about you for healthcare operations which are activities that support this Clinic and ensure that quality care is delivered. These activities include but are not limited to:
 - Employee or volunteer review activities
 - Training and education
 - Medical Review
 - Legal Services and Auditing
 - Business planning, development, management and general administrative activities

Disclosures based on your written authorization:

- You may give us written authorization to use your health care information or to disclose it to anyone for any purpose.
- An authorization from you will be needed before releasing your psychotherapy notes. Psychotherapy notes are notes made about conversations regarding a private, group, joint, or family counseling session. These notes are given a greater degree of protection than other health care information. Psychotherapy Notes do not include:
 - Medication prescription and monitoring
 - Counseling session start and stop times
 - Modalities and frequencies of treatment furnished.
 - Results of Clinic tests
 - Any summary of diagnosis, functional status, treatment plan, symptoms, prognosis and process to date.

You may revoke these authorizations at any time in writing. Without your written authorization, we cannot use or disclose your health care information for any reason other than those described in this notice.



Disclosures without Authorizations:

We may use and disclose medical information about you without your specific authorization:

- When required to do so by federal, state or local law
- When necessary to prevent a serious threat to your health and safety or the health and safety of the public of another person
- For workers' compensation or similar programs
- To report child abuse or neglect, or to report to adult protective service
- To report reactions to medication, problems with products, or to notify people of recalls of products they may be using
- To courts and law enforcement officials pursuant to subpoenas and other lawful processes
- To military and federal officials for national security and intelligence activities
- Health oversight activities and agencies
- Psychotherapy notes may be disclosed when needed to defend a lawsuit against the therapist by the individual who is the subject of the notes

Patient Rights:

You have the following rights regarding health care information we maintain about you:

- You have the right to inspect and copy your health care information. You must submit your request in writing. We will act on your request within fifteen (15) days after we receive it. If your request is denied, we will send you a written denial. If this happens you may request a review of the denial.
- You have the right to request an accounting of certain disclosures we have made of your health information. This right applies to disclosures for purposes other than treatment or health care operations as described in this notice. You must request this accounting in writing. This accounting is maintained for a period of 6 years beginning on the effective date of this notice.
- You have the right to request restrictions or limits on how your healthcare information is used or disclosed for treatment or healthcare operations. We do not have to agree with this restriction, but if we do agree, we will comply with your request except under emergency circumstances. You must make this request in writing.
- You have the right to request to receive confidential communication from us by alternative means or at an alternative location. We will accommodate reasonable request. You must make this request in writing.
- You have the right to request that your health care information be amended if you believe that it is incorrect or incomplete. We will act on your request within sixty (60) days. Your request must be in writing and must include a reason to support the amendment. Your request may be denied if we believe that the information is complete and accurate, if the information is not apart of the medical information that you would be permitted to inspect or copy, or if we did not create the information.
- You have the right to file a complaint if you believe that we have violated your privacy rights. You may file a complaint by using the contact information listed below. You may also file a complaint with the Secretary of the Department of health and Human Services. You will not be penalized for complaining.
- Forms for all requests that are to be submitted in writing are available from the Clinic's privacy officer or their designee using the contact information noted below:

Temple Community Clinic Privacy Officer
1905 Curtis B Elliott Drive
Temple, Texas 76501

U.S. Department of Health and Human
Services, Region VI
1301 Young Street, Suite 1169
Dallas, Texas 75202
Phone: 214-767-4056
Fax: 214-767-0432