

**Maric Healthcare**  
**Privacy Notice**  
**Your Information. Your Rights. Our Responsibilities.**

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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.**

This notice describes the practices of:

- Maric Healthcare.
- Any health care professionals authorized to enter information into your medical record maintained by Maric Healthcare.
- Any employees of Maric Healthcare that have access to your medical record in order to do their jobs.

**We understand that medical information about you is personal, and we are committed to protecting it.**

We are required by law to create a record of the care and services you receive from Maric Healthcare in order to provide you with quality care. This notice applies to all of the records of your care and billing for that care that are created or kept by Maric Healthcare. Other health care providers who treat you at different locations may have different policies about confidentiality and disclosure of your medical information.

## **Your Rights**

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communications
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

## **Our Uses and Disclosures**

We may use and share your information without your consent as we:

- Treat you
- Bill for services we provide to you
- Run our organization
- Respond to medical emergencies
- Do research

- Comply with the law
- Conduct audit and evaluation activities
- Address public health and safety issues
- Work with a medical examiner or funeral director
- Address law enforcement and other government requests
- Respond to lawsuits and legal actions

## Your Rights

**When it comes to your health information, you have certain rights.** This section explains your rights and some of our responsibilities to help you.

### Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee for the copy or summary.

### Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

### Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say “yes” to all reasonable requests.

### Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our health care operations. We are not required to agree to your request, and we may say “no” if agreeing to your request would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information with your health insurer for the purpose of payment or our health care operations. We will say “yes” unless a law requires us to share that information.

### Get a list of those with whom we’ve shared your information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, with whom we shared it, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one

accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

### **Get a copy of this privacy notice**

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

### **Choose someone to act for you**

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

### **File a complaint if you feel your rights are violated**

- You can complain if you feel we have violated your rights by contacting the Program Director at [phone number or e-mail address].
- Additional assistance is available by contacting the Chief Compliance Officer of Maric Healthcare LLC at 832-377-8268.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/).
- We will not retaliate against you for filing a complaint.

## **Our Uses and Disclosures**

### **How do we typically use or share your health information?**

We typically use or share your health information, without your consent, in the following ways.

- **To treat you**
  - We can use your health information and share it with other professionals within Maric Healthcare who are treating you.
  - *Example: A Maric Healthcare doctor discusses your progress with your counselor*
  - If we need to share your health information with other providers who are treating you outside of Maric Healthcare, we first will obtain your written consent.
- **To bill for health care items and services we provide you**
  - We can use and share your health information to bill and get payment from health plans or other entities.

- *Example: We give information about your treatment to your health insurance plan so it will pay for your services.*
- **To run our organization (for our health care operations)**
  - We can use and share your health information to run our practice, improve your care, and contact you when necessary. We can share this information with others at Maric Healthcare or at Maric Healthcare, LLC, which owns and provides administrative services to *Maric Healthcare*.
  - *Example: We use health information about you to manage your treatment and to develop new services that may be helpful to your care.*

## **How else can we use or share your health information?**

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html).

**To qualified service organizations.** We can share your health information without your consent with people who provide services to Maric Healthcare where those services involve the receipt, review, or storage of your information, so long as those people sign a contract with Maric Healthcare agreeing to protect the confidentiality of your information.

**For medical emergencies.** We can share your health information without your consent with physicians and providers outside of Maric Healthcare as needed to respond to a medical emergency.

**To notify you about a threat to your health.** We can share your health information without your consent with medical personnel at the Food and Drug Administration who notify us that a manufacturing or labeling error has occurred which may threaten your health.

**To do research.** We can use or share your health information without your consent for scientific research with qualified researchers who will not identify you in any report published about the results of the research.

**For audit and evaluation activities.** We can share your health information without your consent with authorized people who perform financial or quality audits on behalf of agencies that pay for the services we provide to you or regulate *Maric Healthcare*' activities.

**To help with public health and safety issues.** We can share your health information without your consent to treat a condition which poses an immediate threat to health and which requires immediate medical intervention. We also can share your information without your consent to the extent State law requires us to report suspected child or elder abuse and neglect.

**To a medical examiner or funeral director.** We can share your health information without your consent with a coroner, medical examiner, or funeral director to determine the cause of your death or if such sharing is required by law to collect vital statistics.

**To law enforcement.** We can share your information without your consent with law enforcement if the information is directly related to a crime you committed on our premises or against an Maric Healthcare employee. We may only share your name, address, last known whereabouts, and your patient status.

**To respond to court orders.** We can share health information about you without your consent in response to specific types of court orders.

***All other uses and disclosures of your health information will require us to get your written consent, or the written consent of your next of kin if you are deceased, before we can make the use or disclosure.***

Of note, we will not disclose psychotherapy notes about you, use your information for certain marketing purposes, or share your health information with your family, close friends, or others involved in your care without your written authorization.

## **Our Responsibilities**

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html).

## **Changes to the Terms of this Notice**

We can change the terms of this notice at any time, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and posted on our web site.

## **Contact**

**For more information, contact the Chief Compliance Officer at Maric Healthcare, LLC at 832-377-8268.**

## **Effective Date**

**This notice is effective as of November 1, 2016.**