

# PRIVACY NOTICE

Kent County Health Department

**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 care about the privacy of your medical records.  
The Kent County Health Department is committed to the privacy of your health information.  
We will follow all laws to keep your information safe.

## Your health information privacy rights

You have the right to make a written request to:

- **Privacy Notice** - You can get a paper copy of the Privacy Notice by asking for one at any of the Health Department service sites, or by calling the Privacy Manager at the phone number below.
- **Confidential Communications** - You may ask to get your confidential communications by other methods, or sent to other sites; such as using e-mail instead of a phone, or at work, but not home.
- **View Or Copy** - You may ask to look at and/or get a copy of your health record; such as viewing all or part of your clinic or home visit medical record. A small copy fee may be charged.
- **Amend** - You may ask to amend your health record; such as correcting your birth date, or adding more health history details.
- **Restrict** - You may ask to limit certain uses and/or releases of your information; such as not sending your records to your employer, a relative or insurance company.
- **Accounting** - You may ask for a list of the places your protected health information was sent. A small copy fee may be charged.
- **Release** - You may ask that your medical record be sent to someone, or ask that your medical record at another site be sent to the Health Department; such as your doctor, a lawyer, or relative. A small copy fee may be charged.

## Complaints

If you think your privacy rights were violated or privacy rules were broken, you can complain to:

- **Kent County Health Department**; call the Privacy Manager (see below) for a blank complaint form to fill out.
- **United States Department of Health and Human Services** (see below for address and phone).

**You will not be retaliated against for filing a complaint.  
You will not lose your benefits or be denied services if you complain.**

For questions, complaints, or to receive additional copies of this notice, contact:

**Privacy Manager**  
Kent County Health Department  
700 Fuller, NE  
Grand Rapids, MI 49503  
Phone: (616) 632-7120  
Fax (616) 632-7084

**Director - Office of Civil Rights**  
Region V – Dept. of Health & Human Services  
233 North Michigan Ave – Suite 240  
Chicago, IL 60601  
Phone: (312) 886-2359  
Fax (312) 886-1807  
TDD (312) 353-5693

## How the Health Department May Use or Disclose Your Protected Health Information

- **Treatment** - The Health Department may use your health information to provide you with treatment or health services; such as a disease screening, laboratory testing or to prescribe drugs. For example, information on past immunizations may tell what future vaccines you may need.
- **Payment** - The Health Department may share your information to get payment for treatment and services that you received. For example, we may bill your HMO or an insurer like Medicaid. The bill may contain your name and diagnosis; for example, hepatitis status, lab test, pregnancy.
- **Health Care Operations** - The Health Department may use and release shared health information about you for management purposes; such as quality reviews, audits or licensing. For example, your health information may be used by public health nurses, doctors, or social workers to:
  - evaluate the work of our staff; such as for public health accreditation;
  - assess the quality of your care; such as for quality assurance reviews; and
  - learn how to improve our clinics and services; such as for studying clinic attendance patterns.
- **Public Health** - Your health information may be used or released for public health prevention, promotion, protection, and disease control activities; such as reporting vaccine-preventable diseases, nutrition education, mapping infant deaths, or investigating food poisoning.
- **Business Partners** - The Health Department uses agencies to provide services to you outside the expertise of the health department; for example, billings, x-rays or language interpretation.
- **Health and Safety** - Your health information may be given to police, fire or ambulance workers to stop a serious threat to the health or safety of you or other persons; for example, bomb threats, false fire alarms, or helping heart attack victims.
- **Required by Law** - The Health Department may use and release your health information to:
  - Respond to a demand for evidence in a court trial or hearing; such as subpoenas;
  - Assist law enforcement in their enforcement duties; such as supplying disease history;
  - Comply with mandatory reporting for victims of abuse, neglect or domestic violence; such as reporting to child protective services, testifying in abuse hearings; and
  - Help jail health workers; such as giving a prison inmate's TB status.
- **Government Oversight Functions** - Your health information may be released for government oversight functions; such as audits, license renewals, fraud cases, or civil rights investigations.
- **Special Government Functions** - The Health Department may release your information for special government functions; such as for veterans benefits claims, security clearance requests, military intelligence investigations, or to protect the president.
- **Research** - The Health Department may use your health information for research after the research project is approved by an institutional review board or privacy board; for example, investigating disease clusters, mapping toxins in the environment, or studying the benefits of home visits.
- **Organ/Tissue Donation** - Your health information may be used or given to a body organ bank or hospital for donating body parts; such as an eye, kidney or heart.

## Use or Disclosure of Your Protected Health Information (Continued)

- **Death Investigation** - Health information may be released to funeral directors or coroners to help with their jobs; such as completing a death certificate, autopsy of a body, or reviewing a child's death.
- **Appointments** - The Health Department may use your health information to provide appointment reminders that may help you keep your next clinic visit.
- **Marketing** - The Health Department may use your health information to tell you about other services that may be of interest to you; such as flu shots, internet forms, or new health classes, by mailing you a newsletter, postcard or letter.
- **Workers' Compensation** - Your health information may be used or released in order to comply with laws and regulations related to Workers' Compensation.
- **UPON YOUR REQUEST** - Other uses and releases will be made ONLY with your written approval. You may take back the approval at any time, except when the Health Department has already used or sent your information.

## Duties of the Health Department

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The Health Department must:

- Follow the rules of the current Privacy Notice;
- Keep your protected health information private;
- Train our staff to help you use your privacy rights;
- Give you this Privacy Notice listing our duties and privacy practices;
- Tell you if we are unable to agree to your request to view, copy, amend, restrict or release your health information, and offer you a chance to respond to a denial of your request;
- Find reasonable ways to send your confidential health information to you by other means or to other sites that help you;
- Quickly change this Privacy Notice if there is a major change in HIPAA rules, new legal duties, better privacy practices, or more ways you can use your privacy rights; and
- Follow strict Michigan laws for select diseases, such as HIV/AIDS, substance abuse, mental health, and some sexually transmitted diseases. Michigan and federal confidentiality laws will be followed when they are more strict than HIPAA privacy rules.

Kent County Health Department reserves the right to change its Privacy Notice and to make new policies and procedures that protect your health information. Revised notices will be given to you by handing you a copy of the new Privacy Notice during your next visit, or you can see and print the new Privacy Notice on the County of Kent web site at:

[www.accesskent.com/government/departments/health\\_publications.htm#hdr](http://www.accesskent.com/government/departments/health_publications.htm#hdr).

Privacy Manager  
Kent County Health Department  
700 Fuller N.E.  
Grand Rapids, MI 49503

Place stamp  
here  
Proper U.S.  
postage  
required

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# PROOF OF RECEIPT

My signature proves that I received the Kent County Health Department's  
**PRIVACY NOTICE**

\_\_\_\_\_  
Name of client or representative (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Relationship to client if representative

\_\_\_\_\_  
Date

\_\_\_\_\_ **Please do not write below this line.** \_\_\_\_\_

Date signature sheet received: \_\_\_\_\_ Initials: \_\_\_\_\_ Site: \_\_\_\_\_

Good faith effort used to get signature: Asked, Called, Mailed, Faxed, Other \_\_\_\_\_

Date: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Initials: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Reasons Sheet Not Signed: Refused, No ID, No Parent, Emergency, Other: \_\_\_\_\_

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HIPAA Privacy Notice Signature Form - Last Revised, April 2003

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