



NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW CIFIC HEALTH MAY USE AND/OR DISCLOSE HEALTH INFORMATION ABOUT YOU, HOW YOU CAN ACCESS TO THIS INFORMATION, YOUR RIGHTS CONCERNING YOUR HEALTH INFORMATION AND OUR RESPONSIBILITIES TO PROTECT YOUR HEALTH INFORMATION. PLEASE REVIEW IT CAREFULLY.

CIFIC Health's Commitment to Your Privacy

CIFIC Health is dedicated to maintaining the privacy of your Protected Health Information (PHI). In conducting our business, we will create records regarding you and the treatment and services we provide you. We are required by law to maintain the confidentiality of health information that identifies you. CIFIC Health also participates in a number of activities and programs designed to promote better overall health and to allow us to serve you better. Part of these efforts includes screening some consumers for behaviors or habits that might make them less healthy or put them at risk. CIFIC Health's own staff, and its contracted health educators, may ask you various questions about your habits and day-to-day activities as part of the information intake screening for your treatment. This will help us treat you and allow us to provide you with the best options for other services that you may wish to utilize. Information that you share with our clinicians, or health educators, will become part of your record.

We are required by law to provide you with this Notice of our legal duties and the privacy practices that we maintain at CIFIC Health concerning your PHI. According to federal and state law, we must follow the terms of the Privacy Notice that we have in effect at the time. This Notice will take effect on August 1, 2013, and will remain in effect until it is amended or replaced by CIFIC Health.

CIFIC Health reserves the right to change its privacy practices as the law permits. CIFIC Health will amend this Notice to reflect any change(s) and make any new Notices available upon request. Any changes to our privacy practices will be effective for all health information maintained, created and/or received by us before the date changes were made.

You may request a copy of CIFIC Health's Notice of Privacy Practices at any time by contacting our CIFIC Staff Attorney/Compliance Officer and CIFIC Health Privacy & Security Officer Daniel Labrecque, Esq. at 203-743-9760 x3403 120 Main Street, 4th Floor, Danbury, CT 06810

CIFIC Health WILL KEEP YOUR HEALTH INFORMATION CONFIDENTIAL, USING IT ONLY FOR THE FOLLOWING PURPOSES. PLEASE NOTE THAT THE FOLLOWING USES AND DISCLOSURES DO NOT REQUIRE YOUR AUTHORIZATION.

Treatment: While we are providing you with health care services, we may share your protected health information (PHI), including electronic protected health information (ePHI), with other health care providers, business associates and their subcontractors or individuals who are involved in your treatment, billing, administrative support, or data analysis. These business associates and subcontractors are required by Federal law to protect your health information. For example, we may ask you to have laboratory tests (such as blood or urine), and we may use the results, to help us reach a diagnosis. We may use your PHI in order to write a prescription for you, or we may disclose your PHI to a pharmacy when we order a prescription for you. We have established "minimum necessary" or "need to know" standards that limit various staff members' access to your health information according to their primary job functions. Additionally, everyone on our staff is required to sign a confidentiality statement.

Payment: We may use and disclose your PHI to seek payment for services we provide to you. For example, we may contact your health insurer to certify that you are eligible for benefits (and for what range of benefits), and we may provide your insurer with details regarding your treatment to determine if your insurer will cover, or pay for, your treatments. This disclosure involves our business office staff and may include insurance organizations, collections or other third parties that may be responsible for such costs, such as family members.

Healthcare Operations: We may use and disclose your PHI to operate our business. For example, we may use your PHI to evaluate the quality of care you received from us, to evaluate the implementation of our compliance programs, and/or to conduct cost-management or business planning activities.

Abuse or Neglect: We may disclose your PHI to appropriate authorities if we reasonably believe that you are a possible victim of abuse, neglect, or domestic violence or the possible victim of other crimes. This information will be disclosed only to the extent necessary to prevent a serious threat to your health or safety or that of others.

You have the right to file a complaint with us if you feel we have not complied with our Privacy Policies. Your complaint should be directed to our Privacy Officer, whose contact information is listed below. If you feel we may have violated your privacy rights, or if you disagree with a decision, we made regarding your access to your health information, you can complain to us in writing. You may obtain a Complaint Form from our Privacy Officer. We support your right to the privacy of your information and will not retaliate in any way if you choose to file a complaint with us or with the U.S. Department of Health and Human Services.

NOTE: This is an abbreviated version of CIFIC Health's Notice of Privacy Practices. The full notice lists: (1) additional ways CIFIC Health may use your health information; (2) situations when your authorization is required for release; and (3) your rights regarding PHI. A full notice is available at all CIFIC Health sites. To receive a copy of the full and complete CIFIC Health Notice of Privacy Practices, please contact School Based Health Center Staff.

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