# **Notice of Privacy Practices**

This notice describes the privacy practices of the City of Memphis Fire Department. It describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

The City of Memphis Fire Services Division is required by law to protect the privacy of your health information. We are also required to send you this notice, which explains how we may use information about you and when we can give out or "disclose" that information to others. You also have rights regarding your health information that are described in this notice.

### Uses and Disclosures of Your Protected Health Information (PHI) We Can Make Without Your Authorization

**Treatment.** This includes such things as verbal and written information that we obtain about you and use pertaining to your medical condition and treatment provided to you by us and other medical personnel (including doctors and nurses who give orders to allow us to provide treatment to you). It also includes information we give to other healthcare personnel to whom we transfer your care and treatment, and includes transfer of PHI via radio or telephone to the hospital or dispatch center as well as providing the hospital with a copy of the written record we create in the course of providing you with treatment and transport.

**Payment.** This includes any activities we must undertake in order to get reimbursed for the services that we provide to you, including such things as organizing your PHI, submitting bills to insurance companies (either directly or through a third party billing company), managing billed claims for services rendered, performing medical necessity determinations and reviews, performing utilization reviews, and collecting outstanding accounts.

**Healthcare Operations.** This includes quality assurance activities, licensing, and training programs to ensure that our personnel meet our standards of care and follow established policies and procedures, obtaining legal and financial services, conducting business planning, processing grievances and complaints, creating reports that do not individually identify you for data collection purposes, fundraising, and certain marketing activities.

**Business Associates.** We may contract with third parties to perform certain services for us, such as billing services, copy services or consulting services. These third party service providers, referred to as Business Associates, may need to access your PHI to perform services for us. They are required by contract and law to protect your PHI and only use and disclose it as necessary to perform their services for us.

#### We may also use and disclose your PHI without your prior authorization for the following purposes

- To a public health authority in certain situations (such as reporting a birth, death or disease, as required by law), as part of a public health investigation, to report child or adult abuse, neglect or domestic violence, to report adverse events such as product defects, or to notify a person about exposure to a possible communicable disease, as required by law;
- For health oversight activities including audits or government investigations, inspections, disciplinary proceedings, and other administrative or judicial actions undertaken by the government (or their contractors) by law to oversee the healthcare system;
- For judicial and administrative proceedings, as required by a court or administrative order, or in some cases in response to a subpoena or other legal process;
- For law enforcement activities in limited situations, such as when there is a warrant for the request, or when the information is needed to locate a suspect or stop a crime;
- For military, national defense and security and other special government functions;
- To avert a serious threat to the health and safety of a person or the public at large;
- For workers' compensation purposes, and in compliance with workers' compensation laws;
- To coroners, medical examiners, and funeral directors for identifying a deceased person, determining cause of death, or carrying on their duties as authorized by law;
- For research projects, where there is minimal risk to your privacy and adequate safeguards are in place in accordance with the law;
- ❖ Where the health care information that we disclose does not personally identify you;
- ❖ If you are an organ donor, we may release health information to organizations that handle organ procurement or organ, eye or tissue transplantation, or to an organ donation bank, as necessary to facilitate organ donation and transplantation; and

## Uses and Disclosures of Your PHI That Require Your Written Authorization

Any other use or disclosure of PHI, other than those listed above, will only be made with your written authorization (the authorization must specifically identify the information we seek to use or disclose, as well as when and how we seek to use or disclose it). You may revoke your authorization at any time, in writing, except to the extent that we have already used or disclosed medical information in reliance on that authorization.

#### Your Rights Regarding Your PHI

- **Right to access, copy or inspect your PHI**. You have the right to inspect and copy most of the medical information that we collect and maintain about you. In limited circumstances, we may deny you access to your medical information, and you may appeal certain types of denials. We will provide a written response if we deny you access and let you know your appeal rights.
- We will normally provide you with access to this information within 30 days of your written request. If we maintain your medical information in electronic format, then you have a right to obtain a copy of that information in an electronic format. In addition, if you request that we transmit a copy of your PHI directly to another person, we will do so

provided your request is in writing, signed by you (or your representative), and you clearly identify the designated person and where to send the copy of your PHI.

- We may also charge you a reasonable cost-based fee for providing you access to your PHI, subject to the limits of applicable state law.
- *Right to request an amendment of your PHI*. You have the right to ask us to amend protected health information that we maintain about you. When required by law to do so, we will amend your information within 60 days of your request and will notify you when we have amended the information. We are permitted by law to deny your request to amend your medical information in certain circumstances, such as when we believe that the information you have asked us to amend is correct or if we are not the author of PHI you wish to amend.
- *Right to request an accounting of uses and disclosures of your PHI.* You have the right to receive an accounting of certain disclosures of your PHI made within six (6) years immediately preceding your request. But, we are not required to provide you with an accounting of disclosures of your PHI: (a) for purposes of treatment, payment, or healthcare operations; (b) for disclosures that you expressly authorized; (c) disclosures made to you, your family or friends, or (d) for disclosures made for law enforcement or certain other governmental purposes.
- *Right to request restrictions on uses and disclosures of your PHI.* You have the right to request that we restrict how we use and disclose your medical information for treatment, payment or healthcare operations purposes, or to restrict the information that is provided to family, friends and other individuals involved in your healthcare. However, we are only required to abide by a requested restriction under limited circumstances, and it is generally our policy that we will not agree to any restrictions unless required by law to do so.

Memphis Fire Department is required to abide by a requested restriction when you ask that we not release PHI to your health plan (insurer) about a service for which you (or someone on your behalf) have paid Memphis Fire Department in full. We are also required to abide by any restrictions that we agree to. Notwithstanding, if you request a restriction that we agree to, and the information you asked us to restrict is needed to provide you with emergency treatment, then we may disclose the PHI to a healthcare provider to provide you with emergency treatment.

A restriction may be terminated if you agree to or request the termination. Most current restrictions may also be terminated by Memphis Fire Department as long we notify you. If so, PHI that is created or received after the restriction is terminated is no longer subject to the restriction. But, PHI that was restricted prior to the notice to you voiding the restriction must continue to be treated as restricted PHI.

- *Right to request confidential communications.* You have the right to request that we send your PHI to an alternate location (*e.g.*, somewhere other than your home address) or in a specific manner (*e.g.*, by email rather than regular mail). However, we will only comply with reasonable requests when required by law to do so.
- *Notification of a Breach your Health Information.* You have the right to be notified if your health information is breached. If we discover that there has been a breach of your unsecured PHI, we will notify you immediately no later than 60 days as required by law.

We do not participate in the following activities. Therefore, we do not use or disclose your health information in these instances: fundraising or marketing, psychotherapy notes, or sale of PHI.

## **Revisions to the Notice**

Memphis Fire Department is required to abide by the terms of the version of this Notice currently in effect. However, Memphis Fire Department reserves the right to change the terms of this Notice at any time, and the changes will be effective immediately and will apply to all PHI that we maintain. Any material changes to the Notice will be promptly posted in our facilities and on our web site, if we maintain one.

### **Exercising Your Rights**

You may make a written request for information regarding your health information listed in the section entitled **Your Rights** in this notice. You may also obtain a paper copy of this notice. Please send a description of your request to: Custodian of Records, Memphis Fire Department EMS, 65 S. Front Street, Memphis, TN 38103. You may also reach our Custodian of Records by calling (901) 636-7573.

### Filing a Complaint

If you believe your privacy rights have been violated, you may file a written complaint with our Privacy Officer by writing to ATTN: HIPAA Privacy Officer, Division of Fire Services, 65 S. Front Street, Memphis, TN 38103. You may also reach our Privacy Officer by calling (901) 636-1400.

You may also file a complaint with the Secretary of Health and Human Services. We will not retaliate against your for filing a complaint with the City of Memphis Fire Services Division or the Secretary of Health and Human Services Department.

Effective Date: 9/1/2014 Date of Revision: 01/30/2020