

## **VIA CHRISTI CLINIC, P.A. NOTICE OF PRIVACY PRACTICES**

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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.*

Via Christi Clinic provides health care services and products to those we serve in cooperation with physicians and other professionals and organizations involved in your care. Our privacy practices govern the following:

- Health care professionals at our ministries;
- Workforce, students, and volunteers at our ministries; and
- Business Associates with whom we share your protected health information or "PHI".

### **We are required by law to:**

- Maintain the privacy of your PHI;
- Provide you this notice of our legal duties and privacy practices with respect to PHI;
- Abide by our current Notice of Privacy Practices ("NPP"); and
- Follow the more stringent state law or federal law.

Via Christi Clinic reserves the right to change our NPP at any time. Changes apply to PHI we already maintain. When we make a significant change to our policies or privacy practices, we post the new NPP in clear and prominent locations in our ministry and on our web site at [www.viachristiclinic.com](http://www.viachristiclinic.com). You may request a copy of the current NPP at any time. The NPP is provided no later than date of first service. You are required to acknowledge in writing that you received this NPP.

### **Permissible Uses and Disclosures of PHI:**

- We are permitted to use and disclose PHI for treatment. For example, we may provide PHI to another provider such as a specialist as part of a referral or another provider who has been asked to be involved in your care.
- We are permitted to use and disclose PHI to obtain payment for treatment. For example, we may send PHI as part of the billing information to your insurance company or payer.
- We are permitted to use and disclose PHI for use in health care operations. For example, we may use PHI to improve quality of our care or operations or to evaluate our staff's performance while caring for you.
- Subject to certain limitations, we are permitted to use and disclose PHI without your prior authorization for public health purposes, reporting on abuse, neglect, or domestic violence health oversight activities, funeral arrangements, organ donations, law enforcement activities, research purposes, workers compensation purposes, prevention of serious threats to health or safety, or when required by federal, state, or local law.
- We are permitted to contact you for appointment reminders or to inform you about treatment options, alternatives, health-related benefits, or services that may be of interest to you.
- We are permitted to disclose PHI to a friend, family member, or other individual who you identify as being involved in your medical care or payment for care. In situations where you are incapacitated or unable to make this decision, we will use our professional judgment in making such disclosures.
- We are permitted to disclose PHI to disaster relief authorities, so that your family may be notified of your location and condition.

Except as previously described, we must obtain your written authorization before using or disclosing your PHI. You can later revoke any authorization by notifying us in writing of your decision.

### Your Rights and Responsibilities regarding PHI:

- In most cases, you have the right to review or obtain a copy of your PHI by submitting a written request. If you request a copy, either paper or electronic, we may charge a reasonable fee for this service. If your request is denied, you may submit a written request for review of that decision.
- If you believe information in your record is incorrect or missing, you may request an amendment to the record by submitting a written request. If your request is denied, you may appeal, in writing, the decision not to amend a record. You may also ask that your written statement requesting an amendment be placed in your medical record.
- You have the right to request an accounting of the disclosures of your PHI made outside of our ministries. This does not include the permitted disclosures for treatment, payment, and health care operations. The request must state the time period desired for the accounting of disclosure, but no more than 6 years prior to the current date. You may request the accounting be provided in paper or electronic form. One accounting of disclosure in a 12-month period is free; additional requests are billed based on the cost of production. We will inform you of the fee for this service before any charges occur.
- We will agree to your request to restrict PHI disclosed to a health plan for payment or healthcare operations (i.e., non-treatment) purposes if the information is about a health care service or product for which you paid us, out-of-pocket, in full.
- You may request that we communicate with you in a specific manner. Such special requests must be submitted in writing.
- You may request additional restrictions regarding the use and disclosure of your PHI. Although not legally required to comply with your request, we carefully review all such requests and provide notification of our decision.
- If you obtained this NPP electronically, you have the right to a paper copy.
- We may contact you for fundraising activities. You may opt out of fundraising communications by completing an opt-out form available with this notice.

### Questions and Concerns:

- Written requests or appeals should be submitted to the Privacy Officer listed below.
- If you wish to file a complaint because you believe that your privacy rights may have been violated, please contact the Privacy Officer.
- You also may send a written complaint to the U.S. Department of Health and Human Services Office of Civil Rights.
- Retaliation or retribution for making complaints or raising concerns is prohibited.

Via Christi Clinic, PA  
Coquette C. O'Rourke  
Compliance/Privacy Officer  
3311 E. Murdock  
Wichita, Kansas 67208  
316.689.9917  
316.689.9089 (fax)  
**Hotline, 800.794.9027**

U.S. Dept. of Health & Human Services  
Office of Civil Rights  
200 Independence Ave., S.W.  
Washington, DC 20201