

# Enabld Health Insurance Portability and Accountability Act (HIPAA) Privacy Notice

---

---

**THIS NOTICE DESCRIBES HOW YOUR MEDICAL INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

---

---

## About the Notice

This notice tells you about your privacy rights, Enabld's duty to protect health information that identifies you, and how we may use or disclose health information that identifies you without your written permission. This notice does not apply to health information that does not identify you or anyone else.

In this Privacy Notice, "medical information" means the same as "health information."

Health information includes any information that relates to:

- 1) your past, present, or future physical or mental health or condition.
- 2) providing health care to you; or
- 3) the past, present, or future payment for your health care.

## Your Privacy Rights

The law gives you the right to:

- ❖ Look at or get a copy of the health information that Enabld has about you, in most situations. We may require that your request for information be in writing.
- ❖ Ask Enabld to correct certain information, including certain health information, about you if you believe the information is wrong or incomplete. You must submit your request in writing to our office or program that has the information. If Enabld denies your request to change the information, you can have your written disagreement placed in your record.
- ❖ Ask for a list of the times Enabld has disclosed health information about you for reasons other than treatment, payment, health care operations, and certain other reasons as provided by law, except when you have authorized or asked that Enabld disclose the information. You must put this request in writing and must include the name(s) of the facility from which a list of disclosures is requested.
- ❖ Ask Enabld to limit the use or disclosure of health information about you more than the law requires. However, the law does not require us to agree to limit uses and disclosures.
- ❖ Tell Enabld where and how to send you messages that include health information about you, if you think sending the information to your usual address could put you in danger. You must put this request in writing, and you must be specific about where and how to contact you.
- ❖ Ask for and get a paper copy of this notice from Enabld; and
- ❖ Withdraw permission you have given Enabld to use or disclose health information that identifies you, unless we have already acted based on your permission. You must withdraw your permission in writing.

You may exercise any of the rights described above by contacting our office or program that has health information about you, or by contacting the company Privacy Officer as described at the end of this notice.

## Enabld Duty to Protect Health Information that Identifies You

- ❖ Enabld is required by law to protect the privacy of your health information. This means that we will not use or disclose your health information without your authorization except in the ways we tell you in this notice. Enabld will safeguard your health information and keep it private.
- ❖ Enabld will ask you for your written authorization to use or disclose your health information in ways other than those stated in this notice. If you give such an authorization, you may revoke it at any time, but Enabld will not be liable for uses or disclosures made before you revoked your authorization.

- ❖ If you receive home or community-based services from Enabld, we are required to provide you with this notice of its legal duties and privacy practices, and to ask you to sign a form saying that you have received this notice. Otherwise, we are required to provide you with this notice upon your request. If Enabld changes the contents of this notice, it will make the new notice available at its facilities and on its website, [www.enabld.net](http://www.enabld.net), within 30 days of the effective date of the changed notice. The new notice will apply to all health information maintained by Enabld, no matter when we got or created the information.
- ❖ Enabld employees must protect the privacy of your health information as part of their jobs with us. Enabld does not give employees access to your health information unless they need it as part of their job. Enabld will punish employees who do not protect the privacy of their health information.

## **How Enabld Uses and Discloses Health Information that Identifies You**

### ***1. Treatment***

Enabld may use or disclose your health information to provide, coordinate, or manage health care or related services. This includes providing care for you, consulting with another health care provider about you, and referring you to another health care provider. For example, Enabld can use or disclose your health information to refer you to another community program for services. Enabld may also contact you to remind you of an appointment or to tell you about treatment alternatives, additional benefits, or other health-related information that may be of interest to you.

### ***2. Payment***

Enabld may use or disclose health information about you to pay or collect payment for your care. For example, we can use or disclose your health information to bill your insurance company for health care provided to you.

### ***3. Health care operations***

Enabld may use or disclose health information about you for health care operations. Health care operations include:

- ❖ Conducting quality assessment and improvement activities.
- ❖ Reviewing the competence, qualifications, and performance of qualified professionals or care plans.
- ❖ Training qualified professionals and others.
- ❖ Conducting accreditation, certification, licensing, or credentialing activities.
- ❖ Carrying out activities related to the creation, renewal, or replacement of a contract for health insurance or health benefits.
- ❖ Providing medical review, legal services, or auditing functions; and
- ❖ Engaging in business management or the general administrative activities of Enabld.

For example, Enabld may use or disclose your health information to make sure providers bill only for care you receive.

### ***4. Family member, other relative, or close friend***

Enabld may disclose health information about you to a family member, other relative or close friend when:

- ❖ The health information is related to that person's involvement with your care or payment for your care; and
- ❖ You have had an opportunity to stop or limit the disclosure before it happens.

### ***5. Government programs providing public benefits***

Enabld may disclose health information about you as needed to administer a government benefit program, such as Medicaid.

### ***6. Health oversight activities***

Enabld may sometimes use or disclose health information about you for health oversight activities. Health oversight activities include:

- ❖ Audits or inspections.
- ❖ Investigations of possible fraud.
- ❖ Investigations of whether someone employed by Enabld is providing good care; and
- ❖ Other activities are necessary for oversight of the health care system, government benefit programs, or to enforce civil rights laws.

### ***7. Public health***

Enabld may disclose health information about you to:

- ❖ A public health authority for purposes of preventing or controlling disease, injury, or disability, or to report vital statistics.
- ❖ An official of a foreign government agency who is acting with the public health authority.
- ❖ A government agency allowed to receive reports of child abuse or neglect.
- ❖ The Food and Drug Administration (FDA) to report problems with FDA-regulated medications, products, or activities.
- ❖ A person who may have been exposed to a communicable disease or who is at risk of contracting or spreading a disease or condition; or
- ❖ A person or agency investigating work-related illness or injury or conducting workplace medical surveillance.

## ***8. Victims of abuse, neglect, or domestic violence***

If Enabld believes you are the victim of abuse, neglect, or domestic violence, we may sometimes disclose health information about you to a government agency that receives reports of abuse, neglect, or domestic violence if:

- ❖ A law requires disclosure.
- ❖ You agree to the disclosure.
- ❖ A law allows the disclosure, and the disclosure is needed to prevent serious harm to you or someone else; or
- ❖ A law allows disclosure, you are unable to agree or disagree, the information is needed for immediate action, and the information will not be used against you.

If Enabld makes a report under this section, we will tell you or your representative about the report unless it believes that telling you would place you at risk of harm.

## ***9. Serious threat to health or safety***

Enabld may use or disclose health information about you if it believes the use or disclosure is needed:

- ❖ To prevent or lessen a serious and immediate threat to the health and safety of a person or the public.
- ❖ For law enforcement authorities to identify or catch an individual who has admitted participating in a violent crime that resulted in serious physical harm to the victim, unless the information was learned while initiating or while counseling or therapy; or
- ❖ For law enforcement authorities to catch an individual who has escaped from lawful custody.

## ***10. For other law enforcement purposes***

Enabld may disclose health information about you to a law enforcement official for the following law enforcement purposes:

- ❖ To comply with a grand jury subpoena, summons, investigation, or similar lawful process.
- ❖ To identify and locate a suspect, fugitive, witness, or missing person.
- ❖ In response to a request for information about an actual or suspected crime victim.
- ❖ To alert a law enforcement official of a death that we suspect is the result of criminal conduct.
- ❖ To report evidence of a crime on Enabld property.
- ❖ To provide information learned while providing emergency treatment to an individual regarding criminal activity; or

## ***11. For judicial or administrative proceedings***

Enabld may disclose health information about you in response to an order or subpoena issued by a regular or administrative court.

## ***12. As required by law***

Enabld may use or disclose health information about you when a law requires the use or disclosure.

## ***13. Contractors***

Enabld may disclose health information about you to a Enabld contractor if the contractor:

- ❖ Needs the information to perform services for Enabld; and
- ❖ Agrees to protect the privacy of the information.

## ***14. Secretary of Health and Human Services***

Enabld must disclose health information about you to the Secretary of Health and Human Services when the Secretary wants it to enforce privacy protections.

## ***15. Purposes relating to death***

Enabld may disclose health information about you to:

- ❖ Coroners or medical examiners for the purpose of identifying a deceased person or determining the cause of death;
- ❖ Funeral directors for the purpose of preparing a deceased person for burial or cremation; or
- ❖ Organ procurement organizations for the purpose of organ, eye, or tissue donation.

## ***16. Research***

Enabld doesn't disclose information for research purposes.

## ***17. Other uses and disclosures***

Enabld may use or disclose health information about you:

- ❖ To create health information that does not identify any specific individual.
- ❖ For purposes of lawful national security activities.
- ❖ For security clearances and medical suitability determinations required by the U.S. government.
- ❖ To comply with workers' compensation laws or similar laws; and
- ❖ To tell or help in telling a family member or another person involved in your care about your location, general condition, or death.

## **Complaint Process**

If you believe that Enabld has violated your privacy rights, you have the right to file a complaint with the:

- ❖ Enabld, Administrator by mail at 107 Stone Creek Dr., Marion, NC 28752; or by electronic mail address indicated on Enabld Internet website at [www.Enabld.net](http://www.Enabld.net); or by phone at 828-442-7872
- ❖ U.S. Secretary of Health and Human Services by telephone at (800) 368-1019; or
- ❖ NC Division of Facility Services by telephone at (800) 624-3004.

**There will be no retaliation for filing a complaint**