

Austin Christian Fellowship (ACF) Privacy Notice - Protected Health Information

Protected Health Information (PHI), as that term is defined by state and federal law, includes individually identifiable health information received by a covered entity that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.

To the extent that Austin Christian Fellowship (ACF) receives your PHI, ACF will not use, or disclose such information except as permitted or required by state and federal law. ACF is generally permitted or required to use or disclose PHI in the following contexts:

- In disclosure to another covered entity for the purposes of, e.g.:
 - Enforcement.
 - Payment.
 - Health care operations.
- Public health activities, including but not limited to:
 - Reporting incidents of abuse or neglect.
 - Workers' compensation purposes.
 - Health oversight audits or inspections.
- Law enforcement, including but not limited to:
 - In response to a court order or other legal process.
 - In relation to a criminal investigation or prosecution.
 - About the victim of a crime under restricted circumstances.
 - About a death that may be the result of criminal conduct.
 - In circumstances relating to reporting information about a crime.
- Lawsuits and disputes involving ACF or its employees, including but not limited to:
 - In the course of a judicial or administrative proceeding.

ACF may be required in some circumstances to obtain a separate authorization from you or your authorized representative, including but not limited to, circumstances in which the electronic disclosure of your PHI is necessary for purposes other than those described above. If you have questions about this policy or believe that we have acted in violation of this policy, please contact the Office of the Attorney General us at public.information@texasattorneygeneral.gov or write or call them at:

Office of the Attorney General
Public Information & Assistance Division, MC-027
P.O. Box 12548
Austin, TX 78711-2548
Tele: (512) 463-2007 or (800) 252-8011

Overview of Your Rights under State and Federal Laws

Right of Access to Health Records

State and federal laws give you the right to ask to review and obtain a copy of your health records from most health care providers such as doctors, hospitals, pharmacies and nursing homes, as well as from your health plan. Your provider may have a form you can use to request your records. In a few special cases, such as instances in which your doctor decides that information in the file may endanger you, you may not be able to obtain all of your information.

A provider may charge for the reasonable costs of copying and mailing your records if you request copies and mailing but may not charge a retrieval fee.

Texas law specifies that if the provider is using an electronic health records system capable of fulfilling the request, the records must be provided not later than the 15th business day after the date your provider receives your written request. The records must be provided to you in electronic form unless you have agreed to accept the records in another form.

Right to amend information in your health records

If you believe that information in your medical records is incorrect, you have the right to request that the provider or health plan correct or amend the record and they must respond to your request. If the provider or health plan does not agree to make your requested corrections, they must notify you in writing and tell you why your request was denied. You have the right to submit a statement of disagreement that the provider or plan must add to your record.

Right to know how your personal health information will be used and shared and to limit who gets to see it

Your provider or health plan must give you a notice of their privacy practices that informs you of three things: (1) the uses and disclosures of your PHI which they are permitted to make; (2) other disclosures which require your authorization; and (3) that in the event of a breach of unsecured PHI, you will receive a notice of that breach. This notice of privacy practices will generally be provided on your first visit to a provider or in the mail from your health plan. You can also obtain a copy at any time that you request it.

In general, your health information cannot be used or shared for other purposes including sales calls or advertising, unless you first give your permission by signing a form authorizing such use. The authorization form must tell you who will get your information and what your information will be used for. Generally, this type of authorization is not required if the disclosure of your health information is for the purpose of treatment, payment, health care operations or performing certain insurance or health care maintenance organization functions.

Under certain circumstances, a covered entity may disclose PHI without the authorization of the person who is the subject of the protected information. Those circumstances include, but are not limited to, disclosures made to or in connection with a health oversight agency for audits and investigations, a threat to public safety, and situations involving victims of abuse or neglect. Also, if you are incapacitated or in an emergency, providers sometimes may use or disclose your PHI without your authorization if, in the exercise of medical judgment, they determine it is in your best interests. Your PHI may also be disclosed without your authorization if the disclosure is required by law, including a subpoena or court order.

Right to limit marketing uses of protected health information

In general, your health information cannot be used or shared for marketing communications without your authorization. Certain exceptions apply including face to face communications between a covered entity and an individual.

If your PHI is used or disclosed to send a written marketing communication through the mail, that mailing must include the name and toll free number of the entity which sent you the marketing communication and an explanation of your right to have your name removed from the sender's mailing list. In addition, the mailing must be in an envelope which shows only the name and address of the sender and recipient.

OTHER TEXAS LAWS

Other Texas laws also serve to protect from disclosure specific types of medical records and information including certain doctor-patient communications, genetic information, test results for HIV and AIDS, hospital records, pharmacy records, donor records, regulatory records and mental health records. To learn more about those laws, visit https://www.oag.state.tx.us/consumer/health_info_privacy_laws.shtml.