



Notice of Privacy Practices (HIPAA)

Effective Date: June 5, 2023

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.

Our Responsibilities

We are required by law to maintain the privacy and security of your protected health information (PHI). We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information. We must follow the duties and privacy practices described in this notice and give you a copy of it upon request.

How We May Use and Disclose Your Information

We may use and share your information in the following ways:

- Treatment – To provide, coordinate, or manage your healthcare and related services.
- Payment – To bill and collect payment for services provided to you.
- Healthcare Operations – For practice management, quality assessment, and improvement activities.
- As required by law – We may disclose information when required to do so by federal, state, or local law.

Other Uses and Disclosures

We may share your information with public health authorities, law enforcement, or when necessary to prevent a serious threat to your health and safety or the health and safety of others. Other uses and disclosures not described in this Notice will be made only with your written authorization.

Your Rights

You have the right to:

- Get an electronic or paper copy of your medical record.
- Ask us to correct your record if you believe it is incomplete or incorrect.
- Request confidential communications (alternative addresses or phone numbers).

- Ask us to restrict certain uses and disclosures of your information. (we may not be able to agree if it affects your care or legal obligations).
- Get a list (accounting) of those with whom we've shared your information in the past 6 years (not including treatment, payment, or operations).
- Receive a copy of this Notice upon request.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with us at the contact information below, or with the U.S. Department of Health and Human Services (HHS), Office for Civil Rights. We will not retaliate against you for filing a complaint.

Contact Information

Barlow Health Services
ATTN Privacy Officer
301 W Main St, Thurmont, MD 21788
Phone: 301-660-3095

You may also file a complaint with:

Office for Civil Rights (OCR), U.S. Department of HHS

Website: <https://www.hhs.gov/ocr/privacy/hipaa/complaints>

Acknowledgment of Receipt

Patients will be asked to sign an acknowledgment that they received this Notice.