

# BRAZOS COUNTY VOLUNTEER FIRE DEPARTMENTS

SOUTH BRAZOS COUNTY FD, DISTRICT TWO VFD, PRECINCT THREE VFD, PRECINCT FOUR VFD

## Notice of Privacy Practices

Effective 4/14/03

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.

1. **Legal requirements.** The Brazos County Volunteer Fire Departments (BCVFD) are legally required to maintain the privacy of certain confidential information about your health (referred to in this notice as “protected health information”) and to provide you with this notice of our legal duties and privacy practices with respect to protected health information. BCVFD is required to abide by the terms of this notice as long as it is in effect. BCVFD reserves the right to amend this notice and to make the amended provisions effective for all protected health information we maintain. Any changes to this notice will be posted at our facilities. You may obtain a copy of the latest version of this notice from the Privacy Officer identified below.

2. **Use and Disclosure of protected health information.** BCVFD maintains your protected health information in a confidential manner in accordance with legal requirements. However, BCVFD may use protected health information as necessary, without your consent, for the purposes of treatment, payment and health care operation. Some examples are:

- **Treatment.** This involves oral and written information we will obtain and share among health care providers involved in your care and transportation. For example, we will create a written record of the care you receive.
- **Healthcare operations.** This involves our use of information about you to improve the quality of care. For example, we will use information about you for training, quality control, and licensure purposes.

In addition, BCVFD is permitted to use and disclose protected health care information without your written authorization, or opportunity to object, in these ways:

- Any use or disclosure authorized or required by Federal, state or local law.
- To your parent or guardian or attorney ad litem if one is appointed for you.
- To your parent or guardian, if you are a minor.
- Any use or disclosure related to public health activities, as authorized or required by law.
- Use or disclosure in connection with judicial or administrative proceedings, lawsuits, subpoenas and disputes, as authorized and required by law.
- For law enforcement purposes, as authorized or required by law.
- In health care fraud and abuse detection activities, as authorized or required by law.
- For health oversight activities, investigations by a governmental entity or its contractor, and disciplinary or licensure proceedings, as authorized or required by law.
- For military, national defense and security, or law enforcement purposes, as authorized or required by law.
- To avert threats to health and safety, as authorized or required by law.
- For research and organ donation purposes, as authorized or required by law.
- Uses and disclosures that do not identify you.

3. **Other uses of protected health information.** We will use protected health information for other purposes, unless you ask for restrictions on a specific use or disclosure, for the following other purposes:

- To provide you information about the services we provide and the benefits that may be available to you.

Any other use or disclosure of protected health information (besides those described in paragraphs 2 and 3) will occur only with your written authorization. If you give us such an authorization, you may revoke it in writing at any time. Once you revoke such authorization no further use or disclosure by virtue of that revoked authorization will occur.

4. **Your rights.** You have the following rights regarding your protected health information, provided you make a written request to exercise these rights to the individual Brazos County Fire Department Officer identified below:
- **Right to request restriction.** You may request limitations on the information we use or disclose for health care treatment, payment, or operations, but we are not required to agree to your request. If we agree, we will comply with your request unless the information is needed to provide you with emergency treatment.
  - **Right to confidential communications.** You may request that we communicate with you in a certain manner or at a certain location, but you must specify how or where you wish to be contacted.
  - **Right to inspect a copy.** You have a right to inspect and copy most of the information we will maintain about you. We will normally provide access to information within 30 days and charge a reasonable fee for copying it. Under limited circumstances, we can deny your request for information. You may appeal certain denials.
  - **Right to request amendment.** If you believe that the information we have about you is incorrect or incomplete, you may request an amendment. We will generally amend your information within 60 days of receiving a written request specifying the specific amendment you request. We can deny your request only in certain situations, for example if we believe the information you have asked us to amend is correct and therefore should not be amended.
  - **Right to accounting of disclosure of protected health information.** You may request an accounting of certain disclosures of our protected health information we have made in the six years prior to the date of the request, but not prior to April 14, 2003. We are not required to provide an accounting of disclosures or uses that occurred for treatment, payment, or health care operations or our sharing of information with our business associates.
  - **Right to receive a copy of this notice.** You may request a paper copy of this notice from our Privacy Officer at any time.
  - **Exercising your rights.** To exercise any of the rights described in this notice, contact our Privacy Officer listed below.
5. **Complaints.** If you believe that your privacy rights have been violated, you may file a complaint with the individual BCVFD or with the Secretary of the United States Department of Health and Human Services. You will not be penalized or retaliated against in any way for making a complaint to the individual BCVFD or the Department of Health and Human Services.
6. **Contacting the Individual BCVFD.** You may contact the individual BCVFD's privacy officer at the following addresses to file a complaint, if you have questions about this notice, if you wish to request restrictions on uses and disclosure for health care treatment, payment, or operations, or if you wish to exercise your rights described above.

**South Brazos County Fire Department:**

Chet Barker  
P.O. Box 501  
Millican, TX 77866

**District Two VFD:**

Merrie Noak  
P.O. Box 32  
Kurten, TX 77862

**Precinct Three VFD:**

David J. Dibello  
P.O. Box 5453  
Bryan, TX 77805-5453

**Precinct Four VFD:**

Joe Dan Ondrasek  
P.O. Box 4186  
Bryan, TX 77805-4186