

Oklahoma State Department of Health HIPAA Privacy Notice

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.

It is the policy of the Oklahoma State Department of Health (OSDH) to keep all of your medical and personal information confidential. We will only use or disclose your information for the following reasons:

Treatment: We will share your medical information with other medical providers who are involved in your care (including hospitals and clinics), to refer you for treatment, and to coordinate your care with others. For instance, if you are getting maternity services from us, we will share your Protected Health Information (PHI) with the doctor who delivers your baby. We also participate in Electronic Health Information Exchanges, which may make your PHI available statewide and nationwide. In order to provide you with a continuum of health care services across program providers, OSDH also participates in a Master Person Index (MPI). You may at any time request in writing to be removed from the index. We will only authorize this information to be shared for your treatment purposes. For example, if you are in another city or state, it may be possible to share treatment information with a doctor who needs that information. If we use or disclose your psychotherapy notes, OSDH must obtain your written permission, unless the use is for treatment.

Payment: We may use and disclose PHI when it is needed to receive payment for services provided to you. For example, if you have Medicaid benefits or private insurance, we will release the minimum information necessary for the Medicaid program to pay us. OSDH utilizes the services of a health care clearing house to process payment for applicable services.

Health Care Operations: We will use and disclose PHI when it is needed to make sure we are providing you with good service. For instance, we may review your records in order to make certain quality service was given. We may also share PHI to a health plan for the plan's Health Plan Employer Data and Information Set (HEDIS). For example, your insurance company may want to know if you have had immunizations in an effort to make improvements in their service and quality of care.

OSDH may contact you to provide appointment reminders. If you wish to receive communication through text or email, you will be given the opportunity to opt-in. If you select this primary form of communication, please remember to keep your information updated at OSDH.

OSDH is considered a "hybrid covered entity," which means that only certain parts of the agency have health care components and others do not. This Notice and the rights outlined herein apply to only the parts of the agency that are health care components.

Other uses or disclosures of your PHI that may occur include:

- If you have given us permission in writing to release part of your information;
- When ordered to do so by a valid court order;
- When cases of child abuse or neglect are investigated;
- Immunization information is shared with schools and childcare centers;
- When business associates of OSDH, such as community clinics, sign agreements to protect your privacy;
- The SoonerStart Program shares information with the State Department of Education;
- When required by state law. For instance, when reporting injuries and disease as required by the Public Health codes or to prevent the spread of diseases such as tuberculosis (TB) or when reporting suspected child abuse or neglect to the Department of Human Services-
- We can share your information with anyone as necessary, consistent with Oklahoma law and the Oklahoma State Department of Health's policies and procedures, if we believe there is imminent danger. For example, we will release the minimum information necessary if we believe it will prevent or lessen a serious and imminent threat to the health and safety of a person or the public.
- Research: We may release your PHI to researchers when an IRB has reviewed and established protocols to ensure privacy of your health information.
- Consistent with applicable law, we may release PHI for the purposes of tissue donation and transplant.
- We may release your PHI to Coroners, Medical Examiners or Funeral Directors if it is necessary. Example of necessary release may include but are not limited to the identification of a deceased person or to determine cause of death.
- We will only maintain and share genetic information in accordance with Public Law 110-233, Genetic Information Nondiscrimination Act (GINA)
- We may release your information as directed to Health & Human Services (HHS)
- In special circumstances we may release your PHI to Workers' Comp, FDA, Military, and/or Special Government Functions.

Emergency Coordination: We will share your medical information with other medical providers who are involved in your care to coordinate your care with others (such as emergency relief workers or others who can help in finding you appropriate health services). We can share your information (location, general condition, or death) as necessary to identify, locate and notify family members, guardians, or anyone else responsible for your care. For example, if it is necessary, we may notify the police, the press, or the public at large to the extent necessary to help locate, identify or otherwise notify family members and others as to your location and general condition.

Any Other Use or Disclosure of Your PHI Requires Your Written Authorization:

Under any circumstances other than those listed above, OSDH will ask for your written authorization before we use or disclose your PHI. Specifically, OSDH must obtain your written authorization for the use and disclosure of psychotherapy notes, marketing, and the sale of PHI. OSDH will not sell PHI without your written authorization. You can later cancel your authorization in writing and we will not disclose your PHI after we receive your cancellation, except for disclosures which were processed before we received your cancellation

Your Rights

You have the right to:

- Receive a list of persons or organizations, other than those listed above, to whom we released your information.
- Request limits on how your information is used or disclosed; however, we are not required to agree to those limits unless you pay out of pocket in full for a service. If you pay out of pocket in full for a service and you request we not share information for that service with your insurance company we will honor your request.
- Ask that we not contact you at home.
- Inspect and copy your medical records except in cases involving certain psychotherapy notes.
- Receive electronic copies of your PHI: if the information is maintained in Electronic Health Record (EHR) or MPI, you have the right to receive a copy of such information in an electronic format upon written request. In addition, you may request your information be sent directly to a 3rd party of your choice. (HITECH Act 13405(e))
- Amend incorrect information in your medical record.
- Revoke your written permission for release of information.
- Receive notification if your unsecured health information is breached. If you have email/text, we may notify you via electronic notification.
- Receive a paper copy of this privacy notice.
- Request confidential communication.

Our Responsibilities

Federal law requires the Oklahoma State Department of Health and its entities to:

- Maintain the confidentiality of your protected health information.
- Provide you with a copy of this notice.
- Abide by the terms of this notice.
- Only change this notice as permitted by federal rules.
- Provide you with a way to file complaints regarding privacy issues.

For further information regarding this notice and your rights, or to report any complaints regarding privacy issues, contact:

HIPAA Privacy Officer
Community Health Services
Oklahoma State Department of Health
123 Robert S. Kerr Ave.
Oklahoma City, OK 73102-6406
(405) 426-8454
privacyofficer@health.ok.gov

You may also report complaints directly to the Secretary of Health and Human Services at the following address:

[The U.S. Department of Health and Human Services](#), the Office of Civil Rights
1301 Young Street, Suite 1169, Dallas, TX 75202
Telephone: (214)767-4056, (214)767-8940 (TDD)

Changes to privacy notice:

The OSDH reserves the right to revise this Privacy Notice effective for health information the OSDH already has about you as well as any information received in the future. We will provide you with a copy of the revised Privacy Notice at your next visit following the effective date of the revised Privacy Notice. In addition, you may ask for a copy of our current Privacy Notice any time you visit an OSDH facility for treatment or health care services.

You may request translation or reading of this Privacy Notice. When possible, a written translation will be provided.