

## Notice of Privacy Practices

Effective: July 1, 2009, Updated: April 12, 2013

**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.**

If you have any questions about this Notice, please contact the RIQI Privacy Officer at (888) 858-4815.

This Notice of Privacy Practices describes how RIQI may use and disclose your protected health information in CurrentCare to carry out treatment, payment or health care operations and for other purposes that are permitted or required by law. It also describes your right to access your protected health information. "Protected health information" is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health condition and related health care services.

**We are required to abide by the terms of this Notice. We may change the terms of our Notice of Privacy Practices at any time. The new Notice will be effective for all protected health information that we administer at that time. Upon your request, we will provide you with any revised Notice of Privacy Practices by calling the office and requesting that a revised copy be sent to you in the mail. A copy of the current Notice will be prominently displayed in our office at all times and on the RIQI website [riqi.org](http://riqi.org) and the CurrentCare website [CurrentCareri.org](http://CurrentCareri.org).**

### 1. USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION

#### Uses and Disclosures of Protected Health Information

Prior to disclosing your protected health information to health care providers, RIQI will obtain your authorization through your CurrentCare enrollment/authorization form.

**Treatment:** We will use and disclose your protected health information to healthcare providers who provide, coordinate, or manage your health care and any related treatment. This includes providers whom you have authorized on your CurrentCare enrollment/authorization form to have access to your protected health information, including in an emergency or unanticipated event.

**Health Care Operations:** We may use or disclose, as needed, your protected health information in the administration and general operation of CurrentCare. These activities include, but are not limited to, quality assessment activities, security and privacy assessments and other administrative activities.

We may use or disclose your protected health information with third party "business associates" that perform various activities for RIQI (e.g., software company or other consultants). Whenever an arrangement between us and a business associate involves the use or disclosure of your protected health information, we will have a written contract that contains terms that will protect the privacy of your protected health information. If our business associate discloses your health information to a subcontractor or vendor, the business associate will have a written contract to ensure that the subcontractor or vendor also protects the privacy of the information.

#### Uses and Disclosures of Protected Health Information Based upon Your Written Authorization

Other uses and disclosures of your protected health information will be made only with your authorization, unless otherwise permitted or required by law as described below. You may revoke your authorization at any time.

Uses and disclosures of any protected health information for marketing purposes require your written authorization if we will receive direct or indirect remuneration not reasonably related to our costs of making the communication.

Uses and disclosures that constitute the sale of protected health information require your written authorization. The sale of protected health information does not include a disclosure for public health purposes, for research where we will only receive remuneration for our costs to prepare and transmit the health information, for treatment and payment purposes, for the sale, transfer, merger, or consolidation of all or part of RIQI, for our business associates or its subcontractors to perform health care functions on our behalf or for other purposes as required or permitted by law.

Psychotherapy notes will only be used and disclosed with your written authorization.

#### Other Permitted and Required Uses and Disclosures that may be Made without your Consent or Authorization

**Required By Law:** We may use or disclose your protected health information to the extent that the use or disclosure is required by law. The use or disclosure will be made in compliance with the law.

**Public Health:** We may disclose your protected health information for public health activities to a public health authority that is permitted by law to collect or receive the information.

**Legal Proceedings:** We may disclose protected health information in response to a court order.

### 2. YOUR RIGHTS

**You have the right to obtain a copy of your confidential healthcare information. If you would like to receive an electronic copy of your health information, we will provide you a copy in the electronic form and format as requested as long as we can readily produce such**

information in the form requested. Otherwise, we will cooperate with you to provide a readable electronic form and format as agreed.

**You have the right to receive a disclosure report of disclosures made, if any, of your protected health information.** This right applies to disclosures for treatment and operations as described in this Notice of Privacy Practices.

**You have the right to have your physician amend your protected health information.** This means you may request an amendment of protected health information about you that your health care provider maintains. CurrentCare will include any amendments made by your health care provider to your CurrentCare record after it is received from your health care provider.

**You have the right to be notified if there is a probable compromise of your unsecured protected health information within sixty (60) days of the discovery of the breach. The notice will include a description of what happened, including the date, the type of information involved in the breach, steps you should take to protect yourself from potential harm, a brief description of the investigation into the breach, mitigation of harm to you and protection against further breaches and contact procedures to answer your questions.**

**You have the right to terminate your participation in CurrentCare at any time.**

### **3. COMPLAINTS**

You may contact the RIQI Security or Privacy Officers at (888) 858-4815 for further information about the complaint process.

You can complain to us or to the Rhode Island Department of Health or the Secretary of Health and Human Services if you believe your privacy rights have been violated. You may file a complaint with us by notifying our Privacy Officer of your complaint. We will not retaliate against you for filing a complaint.

**You have the right to obtain a paper or electronic copy of this Notice from us. We may change our privacy policies from time to time. If we do, we will revise this notice and post any revised notice on our website.**

**We reserve the right to change this notice at any time and to make the revised or changed notice effective in the future. We will notify you of any changes.**