

# Houston Department of Health and Human Services

## NOTICE OF PRIVACY PRACTICES

EFFECTIVE 09/2009

This notice tells you how the Houston Department of Health and Human Services (HDHHS) may use and release your health information. It also tells you how you can get access to this information and about your rights.

PLEASE REVIEW CAREFULLY

### **You have the right to:**

- Ask for a limit on certain uses and releases of your information. However, (HDHHS) is not required to agree to the request.
- Receive health information in a private manner.
- Look at and obtain a copy of your health record. HDHHS may charge a reasonable fee to cover costs.
- Make written request for changes to your health record.
- Obtain a list of who received copies of your record.
- Determine how and where you may be contacted. For example, no appointment messages by mail, only contact by cell phone.
- Make written request to take back your approval to use or share information.

### **HDHHS' Duty to Protect Your Information**

- HDHHS is required by law to protect the privacy of your information. This means that HDHHS will not use or share your information without your permission except in the ways we explain to you in this notice.
- HDHHS will ask you for a written approval to use or share your information in ways other than those stated in this notice. You may take back your approval. HDHHS will not be liable for uses or releases made before you took back your approval.
- If HDHHS changes the content of this notice, the new notice will be made available at our facilities and on our website

within 30 days of the effective date. The new notice will apply to all records kept by HDHHS, no matter when we received or created it.

### **How HDHHS May Use and Share Your Information:**

- **Treatment**  
HDHHS may use or share your record to provide, coordinate, or manage health care or related services. This includes providing care to you and consulting with another health care provider about you. For example, HDHHS can release your record to refer you to a high-risk clinic or a hospital for services. HDHHS may also contact you to remind you of an appointment or to tell you about other information that you may need.
- **Payment**  
HDHHS may use or share your record for payment. For example, HDHHS can use or share your record to bill your insurance company or Medicaid. The Texas Department of State Health Services and other funding sources may also receive your information for payment.
- **Health Care Operations**  
HDHHS may use or share information about you for health care operations. This may include quality reviews and audits. Your information may also be used to train healthcare professionals.
- **Family Member, Other Relative, or Close Personal Friend**  
HDHHS may share information about you to a family member or close friend when the information is related to that person's involvement with your care or payment. You will have an opportunity to stop or limit the release before it happens.

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- **Public Health**  
HDHHS may share information about you to a public health official to prevent or control disease, injury, or disability. Your information may be reported for vital statistics and problems with FDA regulated products or activities.
- **Victims of Abuse, Neglect, or Domestic Violence**  
If HDHHS believes you are the victim of abuse, neglect, or domestic violence we may share information about you to a governmental agency that requires reports of abuse, neglect, or domestic violence as required by Texas law.
- **Serious Threat to Health or Safety**  
HDHHS may use or share information about you if we believe the use or release is needed to prevent or lessen a serious and immediate threat to the health and safety of a person or the public.
- **As Required by Texas Law**  
HDHHS may use or share information about you when a law requires the use or release.
- **Contractors**  
HDHHS may share information about you with a contractor if the contractor needs the information to perform services for us. The contractor must agree to protect your privacy.
- **Research**  
HDHHS may use or share information about you for research if the HDHHS Review Committee approves the use. The committee will make sure that your privacy is protected when your information is used in research.
- **Marketing**  
HDHHS Does Not Use Your Information for Marketing Purposes.
- **Purposes Relating to Death**  
HDHHS may share information about you to hospitals for the purpose of organ transplants, coroners, medical examiners, and funeral directors.
- **Complaints or Questions**  
You have the right to file a complaint if you believe that HDHHS has violated your or anyone else's privacy rights. The complaint should be filed within 180 days of when you learned of the violation. You will not be penalized for filing a complaint. All complaints will be investigated. Complaints and questions can be sent to any of the agencies listed below.
  - HDHHS Privacy Officer  
8000 N. Stadium  
Houston, Texas 77054  
[hltpriavacy@cityofhouston.net](mailto:hltpriavacy@cityofhouston.net)  
832-393-4796
  - Office of Civil Rights, Region VI  
U.S. Department of Health & Human Services  
1301 Young Street, Suite 1169  
Dallas, Texas 75202  
214/767-4056
  - Office of Civil Rights  
U.S. DHHS  
200 Independence Avenue, S.W.  
Room 509F, HHH Building  
Washington, DC. 20201  
1-800-368-1019  
You can also file a complaint on-line at [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov).