CASCADE MEDICAL

You have the right to complain to Cascade Medical if you believe your rights to privacy have been violated. Please contact us about your complaint at:

Cascade Medical ATTN: Privacy Officer 817 Commercial St Leavenworth, WA 98826

or by calling:

509-548-5815

All complaints will be investigated.



817 Commercial Street Leavenworth, WA 98826 Hospital: (509) 548-5815 Clinic: (509) 548-3420 Physical Therapy: (509) 548-3421

For additional information about this Privacy Notice, please contact:

Privacy Officer, 509-548-5815

Last Updated: 7/2/2021



NOTICE OF PRIVACY PRACTICES Cascade Medical

THE FOLLOWING NOTICE DESCRIBES
CASCADE MEDICAL'S HIPAA PRIVACY
PRACTICES, HOW YOUR MEDICAL
INFORMATION MAY BE USED AND
DISCLOSED, AND HOW YOU CAN ACCESS
THIS INFORMATION. PLEASE REVIEW
THE INFORMATION CAREFULLY.

- Your confidential healthcare information may be released to other healthcare professionals for the purpose of providing you with quality healthcare. This includes providers within our organization, as well as, other providers outside our organization that are involved in your care.
- Your confidential healthcare information may be release to you upon your verbal instruction after we have verified your identity.
- Your confidential healthcare information may be released to your insurance provider for the purpose of the organization receiving payment for providing you with needed healthcare services.
- Your confidential healthcare information may be released to public or law enforcement officials in the event of an investigation in which you are a victim of abuse, a crime or domestic violence.
- Your confidential healthcare information may be released to other healthcare providers in the event you need emergency care.
- Your confidential health information is available through an
 electronic patient portal. If you choose to create an account or
 choose to link someone to your account, you and the person
 linked will have access to Protected Heath Information (PHI) and
 may receive chart documents to your specified e-mail.
- Your confidential healthcare information may be released to a
 public health organization or federal organization in the event of a
 communicable disease or to report a defective device or
 untoward event to a biological product (food or medication).
- Your confidential healthcare information may <u>not</u> be released for any other purpose than that which is identified in this notice.
- Disclosure of the following PHI requires your written authorization: use of psychotherapy notes, disclosure of PHI for marketing, and disclosures that constitute a sale of PHI. You may revoke your permission to release confidential healthcare information at any time.
- You may be contacted by Cascade Medical staff to remind you of any appointments, healthcare treatment options or other health services that may be of interest to you.
- You may be contacted by Cascade Medical for the purposes of raising funds to support the organization's operations. You may opt out of receiving such communications by calling 509-548-

- 5815 (Privacy Officer) or by following the directions provided on the fundraising materials.
- You have the right to restrict the use of your confidential healthcare information. However, Cascade Medical may choose to refuse your restriction if it is in conflict of providing you with quality healthcare or in the event of an emergency situation.
- You have the right to receive confidential communication about your health status.
- You have the right to review and photocopy any or all portions of your healthcare information.
- You have the right to request amendments to your healthcare information.
- You have the right to know who has accessed your confidential healthcare information and for what purpose.
- You have the right to restrict disclosure to your health plan of any PHI created from a service that you have paid for out of pocket.
- You have the right to possess a copy of this Privacy Notice upon request. This copy can be in the form of an electronic transmission or on paper.
- Cascade Medical is required by law to protect the privacy of its patients. It will keep confidential any and all patient healthcare information and will provide patients with a list of duties or practices that protect confidential healthcare information.
- Cascade Medical will notify patients when a reportable breach is discovered. Notification will be made to the patients as soon as possible and no later than 60 days from when the breach is discovered.
- Cascade Medical shall abide by the terms of this notice. The organization reserves the right to make changes to this notice and continue to maintain the confidentiality of all healthcare information.
- Health plans are prohibited from using or disclosing genetic information of an individual for underwriting purposes.

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