

DANE COUNTY DEPARTMENT OF HUMAN SERVICES
COMPREHENSIVE COMMUNITY SERVICES PROGRAM
NOTICE OF PRIVACY RIGHTS AND DEPARTMENT PRACTICES
REGARDING PROTECTED HEALTH INFORMATION

The law protects the privacy of protected health information.

This notice is to inform you of the practices protecting the health information managed by the Comprehensive Community Services Program. **This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please read it carefully.**

LIMITED DISCLOSURES WITHOUT CONSENT

The Dane County Department of Human Services will maintain the confidentiality of your protected health information obtained in the course of providing services to you. Your protected health information will not be sold or used for marketing, however the department may authorize using your personal information in order to send you information about services that may benefit you. Unless authorized by law, your protected health information will not be used or released without your authorization. The following describes how the department may use and disclose your health information without your specific authorization. **This information will only be used and disclosed to the extent and in the manner authorized by state and federal law.**

1. Disclosure or Use for Benefit Determination and Payment Functions. We may use or disclose health information about you to determine your eligibility for benefits, to facilitate payment for treatment and services, and to coordinate benefits.
2. Disclosure or Use for Treatment and Care. We may exchange confidential information with other subunits of the department or with those providing services to you under a contract with us, as necessary to enable the persons providing services to perform their duties or to coordinate the delivery of services to you.
3. Disclosure to Authorized Representatives. We may exchange confidential information with your authorized representative, such as your agent under an activated health care power of attorney, your guardian, or, if you are a minor, your parent.
4. Disclosure for Management, Audit, Research and Oversight Activities. We may disclose your health information in response to lawful state and federal requests for investigation, research, certification, licensing, inspection, audit, data collection, monitoring, evaluation and oversight purposes. We may also use your health information for internal management, training, investigative, research, inspection, audit, data collection, monitoring, evaluation and oversight purposes.
5. Public Health Functions. We may disclose your health information within the department or to other public authorities to prevent or control diseases, injuries, disabilities, or abuse. The following are examples of when health information may be shared with public authorities:
 - a. Reports to Child Protection Services regarding suspected child abuse or neglect.
 - b. Reports to officials investigating Elder-At-Risk or Adult-At-Risk allegations.
 - c. Reports to Adult Protective Services.
 - d. Reports to protection and advocacy agencies or ombudsman programs.

6. Disclosure in Judicial and Administrative Hearings. We may use and disclose your health information in the course of litigation as authorized. The following are examples of when health information may be shared in judicial or administrative hearings:
 - a. Health information may be disclosed to the court and authorized parties in guardianship, protective services, protective placement, and mental commitment proceedings.
 - b. Health information may be obtained to maintain a child in substitute care. Such information may be disclosed to the assigned social worker and subsequently shared with the court and parties in court reports, permanency plans, or as otherwise authorized in the course of juvenile court proceedings.
 - c. Health information may be disclosed to court ordered evaluators.
 - d. Health information may be disclosed in response to lawful demands for production in judicial and administrative proceedings.
7. Disclosure to Correctional Institutions and Detention Facilities. We may disclose your private health information to correctional or law enforcement officers having custody of you, to assist in providing for the health and safety of you and others.
8. Disclosure to Coroners, Medical Examiners and Investigators. We may disclose your health information to coroners, medical examiners and law enforcement officers for identification or determination of cause of death.
9. Disclosures for Public Safety. We may disclose your health information if we determine it is necessary to prevent or lessen a serious and imminent threat to your safety or the safety of another. We may also disclose limited health information necessary to report crimes.

YOUR RIGHTS

Except as authorized by law in the examples as provided above, you have the following rights with regard to your health records maintained by the Dane County Department of Human Services:

1. The Right to Control Access to Your Protected Health Information. We will not release your protected health information without your written authorization. You may revoke any written authorization previously given, except to the extent that it has already been relied on, by giving the department your written statement of revocation.
2. The Right to Request Restrictions. You have the right to request restrictions of the department's uses and disclosures of your health information. The department does not have to agree to the restrictions and only division managers may authorize such restrictions on behalf of the department. All agreed upon restrictions will be reduced to writing.
3. The Right to Accommodations to Ensure Confidential Communications. You have the right to receive your health information through reasonable alternative means or at alternative locations, if necessary to protect your privacy. We may ask you to put this request in writing.
4. The Right to Inspect and Copy. You have the right to inspect and copy your protected health information. You should make your requests in writing and, unless waived, you will be charged a reasonable fee to cover the associated expenses. If you are denied access, you will be provided the basis for the denial in writing, and will have the right to have this decision reviewed by filing a complaint as provided below.
5. The Right to Request Correction. You have the right to request that the department correct health information concerning you that you believe is incorrect or incomplete. The department is not required to change your health information, however, you will be informed of the action taken in

response to your request. Your request should be in writing and should specifically state the reason for your request.

6. Right to an Accounting of Disclosures. You have the right to receive an accounting of certain disclosures of your protected health information made by the department to outside sources within the three-year period before the request for electronically stored records and within the six year period before the request for paper records. The first accounting within a twelve-month period is free. There will be a fee for subsequent requests.
7. The Right to be Informed in the event of a breach of your protected health information.
8. The Right to a Copy of this Notice. You have a right to receive a paper copy of this notice at any Dane County Human Services office. You may also access this notice at our website, <http://www.danecountyhumanservices.org>

WHO TO CONTACT

Requests for access to your health care records, to correct your records, and for accommodations in reviewing your health information, may be sent to:

Julie Meister, CCS Administrator, 1202 Northport Dr., Madison, WI 53704, phone number (608) 242-6413 or directly to the Agencies providing your services under your recovery plan.

You may also file a complaint with the Secretary of the federal Department of Health and Human Services. Filing a complaint will not affect the quality of services provided to you. This notice is effective June 1, 2015. The department must comply with the terms of this notice, but we reserve the right to change its terms and to give them retroactive application. Whenever we make material changes to this notice we will notify all persons immediately affected. We will also update this notice in copies available at department offices and on our website.