

Circumstances like when we believe the information you have asked us to amend is correct. If you wish to request that we amend the medical information that we have about you, you should contact our privacy officer.

The Right to Request and Accounting: You may request an accounting from us of certain disclosures of your medical information that we have made in the six years prior to the date of your request. We are not required to give you an accounting of information we have used or disclosed for purposes of treatment, payment, healthcare operations or when we share your health information with our business associates, like our billing company or a medical facility from/to which we have transported you. We are also not required to give you an accounting of our uses of protected health information for which you have already given us written authorization. If you wish to request an accounting, contact our privacy officer.

The Right to Request that we restrict the Uses and Disclosures of your PHI: You have the right to request that we restrict how we use and disclose your medical information that we have about you. Chester Ambulance Service is not required to agree to any restrictions you request, but any restrictions agreed to by Chester Ambulance Service in writing are binding on Chester Ambulance Service.

Internet, Electronic Mail and Your Right to Obtain a Copy of Paper Notice: As long as we maintain our web site, we will prominently post a full, five-page copy of our Privacy Practices on that site. If you allow us, we will forward you the same document by electronic mail or you can always request that a paper copy be sent.

Your Legal Right for Complaints: You also have the right to complain to us, or to the Secretary of the United States Department of Health and Human Services if you believe your privacy rights have been violated. You will not be retaliated against in any way for filing a complaint with us or to the government. Should you have any questions, comments, or complaints you may direct all inquiries to our privacy officer.

Revisions to this Notice: Chester Ambulance Service reserves the right to change the terms of this Notice at any time. The changes will be effective immediately and will apply to all protected health information that we maintain. Any material changes to the Notice will be promptly posted in our facilities and posted to our website. You can obtain a copy of the latest version of this Notice by contact our privacy officer.

Privacy Officer Contact Information:

Amanda Silva
Chester Ambulance Service
PO Box 370
130 Pleasant Street
Chester, VT 05143
802-875-2300 Office
802-875-8533 Fax
Email:
ambulance@chestervt.gov
or through our website at:
<http://www.chesterambulance.org>

Effective Date of Notice: April 14, 2003

Revision: October 15, 2021

Chester Ambulance Service “Notice of Privacy Practices”

This notice is a condensed version and describes how medical information about you may be used and disclosed and how you can obtain access to this information.

PLEASE REVIEW IT CAREFULLY!

Chester Ambulance Service is required by law to maintain the privacy of certain confidential health information known as Protected Health Information of PHI, and to provide you with a notice of our legal duties and privacy practices with respect to your PHI. Chester Ambulance Service is also required to abide by the terms of the version of this notice and our full statement of Privacy Practices currently in affect.

Uses and Disclosures of PHI: Chester Ambulance service may use PHI for the purposes of treatment, payment, and health care operations, in most cases without your written permission. Examples:

For Treatment: This includes obtaining verbal and written information about your medical condition and treatment from you as well as from others, such as doctors and nurses who give orders to allow us to provide treatment to you. We may give your PHI to other healthcare providers involved in your treatment and may transfer your PHI via radio or telephone to the hospital or dispatch center.

For Payment: This includes any activities we must undertake in order to get reimbursed for the services we provide to you, including submission of bills to insurance companies, making medical necessity determinations and collection of outstanding accounts.

For Health Care Operations: This includes quality assurance activities, licensing, and training programs to ensure that our personnel meet our standards of care and follow established policies, procedures, and guidelines as well as certain other management functions such as:

Reminders for Scheduled Transports and Information on Other Services: We may also contact you to provide you with a reminder of any scheduled appointments for non-emergency ambulance and medical transportation, or to inform you about other services that we may provide.

Use and Disclosures of PHI Without Your Authorization: Chester Ambulance Service is permitted to use PHI without your written authorization, or opportunity to object, in certain situations and unless prohibited by a more stringent state law, including:

- For the treatment, payment or health care operations activities of another health provider who treats you;
- For health care and legal compliance activities;
- To a family member, other relative, close personal friend or other individual involved in your care if we obtain your verbal agreement to do so or if we give you an opportunity to object to such a disclosure and you do not raise an objection, and in certain circumstances where we are unable to obtain your agreement and believe the disclosure is in your best interest;
- To a public health authority in certain situations as required by law (such as to report abuse, neglect or domestic violence);

- For health oversight activities including audits or government investigations, inspections, disciplinary proceedings and other or judicial actions undertaken by the government (or their contractors) by law to oversee the health care system;
- For judicial and administrative proceedings as required by a court or administrative order or in some cases in response to a subpoena or other legal process;
- For law enforcement activities in limited situations, such as responding to a warrant;
- For military, national defense and security and other special government function;
- To avert a serious threat to health and safety of a person or the public at large;
- For workers' compensation purposes and in compliance with workers' compensation laws;
- To coroners, medical examiners and funeral directors for identifying a deceased person, determining cause of death or carrying on their duties as authorized by law;
- If you are an organ donor, we may release health information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank as necessary to facilitate organ donation and transplantation;
- For research projects, but this will be subject to strict oversight and approvals;
- We may also use or disclose health information about you in a way that does not personally identify you or reveal who you are.

Any other use or disclosure of PHI, other than those listed, will only be made with your written authorization. You may revoke your authorization at any time, in writing, except to

the extent that we have already used or disclosed medical information in reliance on that authorization.

Patients Rights: As a patient, you have a number of rights with respect to your PHI, including;

The Right to Access, Copy or inspect your PHI: This means you may inspect and copy most of the medical information about you that we maintain. We will normally provide you with access to this information within 30 days of your request. We may also charge you a reasonable fee for you to copy any medical information that you have the right to access. In limited circumstances, we may deny you access to your medical information and you may appeal certain types of denials. We have available, forms to request access to you PHI and we will provide a written response if we deny you access and let you know your appeal rights. You also have the right to receive confidential communications of you PHI. If you wish to inspect and copy your medical information, you should contact our privacy officer.

The right to amend you PHI: You have the right to ask us to amend written medical information that we may have about you. We will generally amend your information within 60 days of your request and will notify you when we have amended the information. We are permitted by law to deny your requested to amend your medical information only in certain