Family Health Centers of San Diego
Notice of Privacy Practices

This notice describes how your medical information may be used and shared, and how you can access this information. Please review it carefully.

- Family Health Centers of San Diego is required by law to protect the privacy and security of your protected health information. The law allows us to share your patient information to obtain payment from third party payers, for treatment purposes, and for health care operations.
- We are also allowed and often required to share your information in other ways, including: to help with public health and safety issues; research; to comply with the law; to respond to organ and tissue donation requests; to work with a medical examiner or funeral director; to respond to workers’ compensation, law enforcement and other government requests; and to respond to lawsuits and legal actions. California state laws may limit the sharing of information for protected classes, such as HIV/AIDS status, mental health treatment, disability, and drug abuse. We will obey these laws.
- We will not share your psychotherapy notes in most cases, share your information for marketing purposes, or sell your information without your written permission. We may contact you for fundraising efforts, but you can tell us not to contact you again.
- We will obtain your written permission to use or share your information for any reason other than those reasons detailed above. Once given, you may revoke your permission at any time.
- We will promptly notify you if a breach occurs that compromises the privacy and security of your information.

**Patient Rights**

1. You have the right to see or get an electronic or paper copy of your medical record. You must follow our health center process to access your medical record. You may be charged a fee for the cost of copying and mailing your record.
2. You may request amendments or changes to your medical record if the record is incorrect or incomplete. We may deny your request, but we will tell you why in writing within 60 days.
3. You may make reasonable requests on how you’d like us to contact you (for example, home or office phone.)
4. You may ask us not to use or share certain information as stated above. We are not required to agree to your request. If you fully pay for a service or item with your own money, you can ask us not to share that information with your health insurer. We will honor your request unless a law requires us to share the information.
5. You can request a list of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why. We will provide one list a year for free, but will charge a fee if you ask for another list within 12 months.
6. You may choose someone to act for you if you give them medical power of attorney or they are your legal guardian.
7. You may allow us to share information with your family, close friends, others involved in your care, or in a disaster relief situation. If you are not able to tell us your preference, we may share your information if we believe it is in your best interest. We may also share your information to lessen a serious and imminent threat to health or safety.
8. You may request a written copy of this Notice of Privacy Practices.

**Filing a Complaint**

*If you believe your privacy has not been protected, you may file a compliant with the following sources. We will not retaliate against you for filing a complaint.*

Family Health Centers of San Diego Privacy Officer U.S. Dept of Health and Human Services- Office for Civil Rights
823 Gateway Center Way, San Diego, CA 92102 200 Independence Ave., SW, Washington, DC 20201
619-515-2452 Email: Privacy@fhcsd.org 877-696-6775 www.hhs.gov/ocr/privacy/hipaa/complaints/

Family Health Centers of San Diego can change the terms of this notice at any time, and the changes will apply to all your information. The new notice will be available upon request, in our health centers, and on our website.

*Effective September 23, 2013*