

**McLaren Print System Order** 

Order No: 43603 Reprint Previous Order No: 6843 Order Date: 2019-03-14 **User: Mary Bitzer** Phone: 5179136575

Ship Location: Mclaren MMP Family Medicine & Lipidology 1540 Lake Lansing Rd, Suite 202 Lansing, MI 48912

Forms Quantity: 2500 Paragon Dept No: 54502 Dept Name: MMP Family Medicine and Lipidology **Company Number: 810** 

Order Total Price: 170.50

Item Number: MHCC-10327 Item Description: Notice of Privacy Practices (English) Revision Date: 5/2018 Print: 2 sided black and white Paper: 70# White Text Size: 11 x 17 Fold: Bi-Fold (1/2) **Finish: None Drill: None** Misc Info: 11x17 folds to 8.5x11

## NOTICE OF PRIVACY PRACTICES

McLaren

YOUR RIGHTS REGARDING HEALTH INFORMATION ABOUT YOU

Access and Copies: In most cases, you have the right to took at or get a copy of health information that we use to make decisions about your care. If you request copies of the information, however, we may charge a less fur coel of copying, making or share related supplies. If we dety your request to look at the information or get a copy of it, you may give us a withen request for a neview of that decision. In some instances your anothin information may not be available due to our networks poly.

Correct or Update: If you believe that information in our records about you is incorrect or if important information is maximg, you have the right to request that we change the records. By submitting a request in writing and including your reason for requesting the change. You may dear your request is change a record if the information was not created by u.t. If is not part of the health information kept by u.t. or if we determine the record is a complete and correct. If we deary your request is change, you may submit a arithm request to review that derival.

List of Disclowares: You have the right to ask for a list of disclowares made after April 14, 2003. This list will not include the times that information was disclosed for treatment; payment, or health care operations, or information provided directly its you or your family, or information that was disclosed with your authorization.

Confidentiality: You have the right to request that health information about you be shared with you in a confidential manner, such as sending mail to an address other than your home.

Notification of a Breach: If our actions result in a breach of your unsecured health information we will notify you of that breach.

Restrict Disclosures to Your Health Plan: You may request that we not share health information with your health plan about care or services you monived, if you pay in full out of pocket for those services and make the request in writing at the time the services are provided.

Copies of Our Natice of Privacy Practices: You may ask for a copy of our current Natice at any time. If the Natice was sent to you electronically, you may request a paper copy.

Complaints: If you have any questions about his Notice of Privacy Practices, or questions or complaints about the handling of your health information, you may contact the information Privacy Office, in writing or out or submit a report to our Complaince Line. You may also send a writime complaint to the Secretary of the United States Department of Health and Human Services. You will not be penalized for filing a constant.

Whe to Contact: To exercise any of the rights described above, please send a written request to our information Privacy Office at the address inted below. or download and complete the Privacy Request from located on wear-induced negliginary. If you do not have access to a computer, then you may call our Complement Line and request a form the mailed to you. Completed from may be mailed to our address below, emailed to privacy@mclaren.org or faxed to 910-342-1450.

McLaren Health Care Information Privacy Office One McLaren Parkeay Grand Blanc, MI 45429 Compliance Line: 1-656-642-2007

NOTICE OF PRIVACY PRACTICES



THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

## WHO WILL FOLLOW THE PRACTICES OUTLINED IN THIS NOTICE?

McLaren Health Care ("McLaren") provides health care to our petients in partnership with physiciana, health care providen, and other professionals and organizations in an organized health care amogament (henvirushir refered to as we, our or us). This is a joint Notice of our information privacy practices. The practices in the Notice will be followed by:

- Any health care professional who participates in an organized health care arrangement with us to assar in privating treatment to you. These professionals may include, but are not limited to, physicians, alled health professionals, and other loaneed health care professionals;
  All subsidiaries and departments of our organization, except our health plans, including hospital, emergency department; subpatient services, mobile units, skilled numming, clinical-hospital owned physician protocles, urged care centers, home health, hospice, cancer centers, and read outlets as well as those outside our system with whom we've contracted for assistance in providing services.

Our employees, staff and volunteers, including corporate offices and affiliates.

A complete list of McLaren organizations covered by this Notice may be found on our Website: If you do not have a computer you may request a list by calling our Compliance Line.

## OUR PLEDGE TO YOU

We understand that health information about you is private and personal, and we are committed its protecting it. Each time you visit a hospital, physician or other health care provider, a record of your visit is made. This Motios applies to the records of your care at Mutchares, whether conseted by locality wind or your personal physician. Other health care providers providing treatment to you may have different practices or Netions regarding their use and disclosure of health information about you maintained in their oun offices or clinics.

are required by law to make sure that health information that identifies you is kept private, give you Notice of our legal dubies and privacy practices concerning your health information, and follow the in of the Notice that is ournering in effect.

## CHANGES TO THIS NOTICE

We may change our practices from time to time. Changes will apply to health information we already hold, as well as new information after the change occurs. If we make a significant change in our practices, see will change our Notice and post the new Notice in prominent locations in our facilities and on our Hiebsite at wew mcDirencioghtmacy.