NEW CASTLE FIRE DISTRICT NO. 1
HIPPA POLICY

1. **Purpose**: This Policy describes how medical information about members and employees may be used and disclosed, and how members and employees can get access to this information. The Fire District and the Fire Department are required by law to protect the privacy of health information that may reveal your identity (Protected Health Information: or PHI), and to provide you with a copy of this Policy which describes the health information privacy practices of the Fire District (including its volunteer firefighters and emergency medical personnel providing services in the field and its administrative staff at Fire District facilities) that jointly perform treatment, patient health care operations, and records administration. You may obtain additional copies of this Policy by contacting the Fire District Secretary.

2. **Scope**:

   A. The privacy practices described in this Policy will be followed by:

      (1) Any volunteer firefighter or emergency medical provider who treats you as a part of an emergency response for care made by the Fire District;

      (2) Any business associates of the Fire District (as defined in this Policy).

3. **Protected Health Information**:

   A. The Fire District is committed to protecting the privacy of information gathered about you while providing health-related services. This includes any information that may identify you in connection with your health care.

   B. Some examples of Protected Health Information are:

      (1) Information about your health condition (such as medical conditions and test results you may have);

      (2) Information about health care services you have received or may receive in the future;

      (3) Geographic information (such as where you live or work);

      (4) Demographic information (such as your race, gender, ethnicity, or marital status);

      (5) Unique numbers that may identify you (such as your social security number, your phone number, or your driver's license number);

(6) Biometric identifiers (such as fingerprints); and

(7) Full face photographs.

4. **Use and Disclosure of Your Health Information**:

A. The Fire District and its emergency medical staff, other health care professionals and professional trainees, may use your protected health information or share it with others to the extent that such information is necessary to treat your medical condition, and/or to carry out the Fire District's normal health care operations. Your protected health information may also be shared with other health care providers so that they may jointly perform certain treatment, payment activities, and health care operations along with the Fire District.

B. It is the Fire District's practice to request your written consent for disclosures to insurance companies.

C. It is also the practice of the Fire District not to charge patients for the services rendered. Thus, the Fire District will not release information for such purposes.

D. The Fire District may share your personal health information with caregivers at the Fire District who are involved in your care, and they may in turn use that information or share it with others outside the Fire District in order to diagnose or treat you.

E. In addition, with your consent, the Fire District may share your protected health information with health care practitioners or facilities that need to know with respect to your treatment outside of the Fire District. While the Fire District will take reasonable steps to safeguard the privacy of your personal health information, certain disclosures of your protected health information may occur during or as an unavoidable result of our otherwise permissible uses or disclosures of your protected health information. For example, during the course of a treatment session, other patients in the treatment area may see or overhear discussion of your protected health information. These incidental disclosures are permissible.

F. The Fire District may use and disclose your health information if it is unable to obtain your consent because of substantial communication barriers, and the Fire District believes that you would want the Fire District to treat you if it could communicate with you.

G. The Fire District may use or disclose your protected health information in order to conduct its health care operations, which include internal

administration and planning and various activities that improve the quality and cost effectiveness of the care that the Fire District delivers to you.

(1) For example, the Fire District may use your protected health information to evaluate the quality and competence of its emergency personnel.

(2) The Fire District may also use your protected health information to educate students and trainees in emergency health related professions.

(3) Other examples of health care operations include legal, accounting, and transcription services which may be performed through contracts with outside organizations designated as Business Associates. All such contracts will include assurances that the Business Associate also protects the privacy of your protected health information. In addition, the Fire District may share your health information with other health care providers who have provided services to you in order for them to conduct certain business activities such as activities designed to improve the quality of care or reduce health care costs, to conduct clinical training programs, and to evaluate the experience and performance of its medical staff.

H. The Fire District will not use your information for fundraising purposes. The Fire Department conducts fundraising activities as a volunteer Fire Department, but requests for assistance are sent to all residents and commercial interests in the Fire District. People receiving emergency assistance are never solicited based upon that status. You should contact the Fire District Secretary if you believe that you have been solicited based upon your status as a patient or person receiving emergency assistance.

5. **Family and Friends Involved In Your Care**:

A. The Fire District may disclose your protected health information to a family member, personal friend, or any other person identified by you, provided that you are present for or are otherwise available prior to the disclosure, you have the capacity to make your own health care decisions, you have been given an opportunity to object to the disclosure and have not done so.

B. If you are not present, you are incapacitated, or in an emergency circumstance, the Fire District may exercise its professional judgment to determine whether a disclosure is in your best interests, provided that the Fire District only disclose information that is directly relevant to the person's involvement with your health care or payment related to your health care.

C. The Fire District may also disclose your protected health information to disaster relief organization in order to notify (or assist in notifying) such family members or friends of your location, general condition, or death.

D. Information may also be shared with a legally authorized Personal Representative, such as the parent or guardian of a minor, a health care agent, a DNR surrogate, or court appointed guardian with health care decision-making authority.

E. However, portions of the medical record relating to sexual activity, sexual conduct, tests for sexually transmitted diseases, contraception, family planning, abortion, or mental health services may not be accessible to the parent or guardian of a minor unless specific written authorization from the minor patient is received, except as otherwise provided in this Policy.

F. Moreover, the Fire District will not share your protected health information with third parties, including parents or legally appointed guardians of children or adults, if the attending physician determines that access to the information requested would pose a serious risk to the mental or physical well-being of the patient or third party, or be detrimental to the relationship between the parents/guardians and the patient.

6. **Disclosures Permitted or Required By Law**:

A. The Fire District may use your personal health information and share it with others, as required by law. These include, but are not limited to, the following:

(1) The Fire District may disclose your personal health information pursuant to an order of a court of record requiring disclosure upon a finding by the court that the interest of justice significantly outweigh the need for confidentiality.

(2) The Fire District may disclose your personal health information to Mental Hygiene Legal Service if they are acting as your personal representative.

(3) The Fire District may disclose your protected health information to the attorney(s) who may represent you in any involuntary hospitalization proceeding if the attorney has made a good faith attempt to provide you with a written Policy explaining the proceeding and gives you the opportunity to object to the proceeding.

(4) The Fire District may disclose your protected health information to the Medical Review Board of the New York State Commission of Correction when the Medical Review Board has requested such information in the event of your death.

(5) If your treating psychiatrist or psychologist has determined that you may present a serious and imminent danger to an individual, the Fire District may disclose your protected health information to that individual and to law enforcement.

(6) As Authorized by the Department of Mental Health, the Fire District may disclose your protected health information to:

(a) Persons and agencies needing information to locate missing persons or to a law enforcement agency in connection with criminal investigations, provided that such information will be limited to identifying data;

(b) Appropriate persons and entities when necessary to prevent imminent serious harm to you or another person; and

(c) A District Attorney in connection with and necessary to conduct a criminal investigation of patient abuse.

7. **Disclosure to Public Health Officials**:

A. The Fire District may disclose your protected health information to authorized public health officials (or a foreign governmental agency collaborating with such officials) so that they may carry out their public health activities. These include, but are not limited to, the following:

(1) The Fire District may share your personal health information with government officials that are responsible for controlling disease, injury, or disability.

(2) The Fire District may also disclose your personal health information to a person who may have been exposed to a communicable disease, or be at risk for contracting or spreading the disease, if the law permits it to do so.

B. The Fire District may release your personal health information to a public health authority that is authorized to receive reports of abuse, neglect, or domestic violence. For example, the Fire District may report your information to government officials if the Fire District reasonably believes that you have been a victim of abuse, neglect, or domestic violence. The Fire District will make every effort to obtain your permission before releasing this information, but in some cases the Fire District may be required or authorized to act without your permission.

8. **Disclosures to Government Officials**:

A. The Fire District may release your personal health information to government agencies authorized to conduct audits, investigations, and inspections of the Fire District and the emergency medical services it performs. These government agencies monitor the operation of the health care system, government benefit programs such as Medicare and Medicaid, and compliance with government regulatory programs and civil rights laws.

B. Excluding mental health services patients, the Fire District may disclose your protected health information to authorized federal officials who are conducting national security and intelligence activities or providing protective services to the President or other important officials.

9. **Legal and Law Enforcement Disclosures**:

A. Excluding mental health services patients, the Fire District may disclose your protected health information in the course of a judicial or administrative proceeding in response to a legal order or other lawful process.

B. Excluding mental health services patients, the Fire District may disclose your protected health information to law enforcement officials for the following reasons:

(1) To comply with a court order, grand jury subpoena, or administrative subpoena that is legally enforceable;

(2) To report certain types of wounds or physical injuries if required to do so by law;

(3) To assist law enforcement officers with identifying or locating a suspect, fugitive, witness, or missing person, provided that only limited personal health information will be disclosed;

C. The Fire District may disclose your protected health information if you are the victim of a crime and:

(1) The Fire District has been unable to obtain your consent because of an emergency or your incapacity;

(2) Law enforcement officials represent that they need this information immediately to carry out their law enforcement duties;

(3) In the Fire District's professional judgment disclosure to these officers is in your best interests;

(4) In the event of your death, if the Fire District suspects that your death resulted from criminal conduct;

(5) It is necessary to report a crime that occurred on our property; or

(6) It is necessary to report a crime discovered by the Fire District when providing offsite emergency medical care.

D. The Fire District may use your personal health information or share it with others as necessary to prevent a serious threat to your health or safety, or the health or safety of another person or the public. The Fire District may also disclose your protected health information to law enforcement officers if you tell the Fire District that you participated in a violent crime that may have caused serious physical harm to another person (unless you admitted that fact while in counseling), or if the Fire District determines that you escaped from lawful custody (such as a prison or mental health institution).

E. If you are an inmate or a law enforcement officer detains you, the Fire District may disclose your protected health information to the prison officers or law enforcement officials if necessary to provide you with health care, or to maintain safety, security, and good order at the place where you are confined. This includes sharing information that is necessary to protect the health and safety of other inmates or persons involved in supervising or transporting inmates.

10. **Other Authorized Disclosures**:

A. The Fire District may disclose your personal health information to a person or company that is required by the Food and Drug Administration to:

(1) Report or track product defects or problems;

(2) Repair, replace, or recall defective or dangerous products; or

(3) Monitor the performance of a product after it has been approved for use by the general public.

B. Excluding mental health services patients, if you are in the Armed Forces, the Fire District may disclose your personal health information to appropriate military command authorities for activities the military deems necessary to carry out its military mission. The Fire District may also release your protected health information about foreign military personnel to the appropriate foreign military authority.

C. The Fire District may disclose your personal health information to the extent legally required for workers' compensation or similar programs that provide benefits for work-related injuries.

D. In the event of your death, the Fire District may disclose your personal health information to a coroner or medical examiner. This may be necessary, for example, to determine the cause of death. The Fire District also may release this information to funeral directors as necessary to carry out their duties.

E. In the event of your death, the Fire District may disclose your protected health information to organizations that procure or store organs, eyes or other tissues so that these organizations may investigate whether you are a candidate for organ or tissue donation under applicable laws.

F. In most cases, the Fire District will ask for your written authorization before using your protected health information or sharing it with others to conduct research.

(1) However, under some circumstances, the Fire District may use and disclose your protected health information without your authorization if the Fire District obtains approval through a special process to ensure, among other things, that research without your authorization poses minimal risk to your privacy and could not reasonably be performed without waiving your consent.

(2) Under no circumstances, however, would the Fire District allow researchers to use your protected health information publicly.

G. The Fire District also may release your personal health information without your authorization to people who are preparing a future research project, so long as any information identifying you does not leave the facility.

(1) In the event of your death, the Fire District may share your personal health information with people who are conducting research using the information of deceased persons, as long as they agree not to remove from the facility any information that identifies you.

11. **Completely De-Identified or Partially De-Identified Information**:

A. The Fire District may use and disclose your protected health information if the Fire District has removed any information that has the potential to identify you so that the health information is completely de-identified.

B. The Fire District also may use and disclose partially de-identified protected health information about you if the person who will receive the information signs an agreement to protect the privacy of the information as required by federal and state law.

C. Partially de-identified protected health information will not contain any information that would directly identify you (such as your name, street

address, social security number, phone number, fax number, electronic mail address, website address, or license number).

12. **Use and Disclosures Requiring Written Authorization**:

A. For any purposes other than the ones described in this Policy, the Fire District may only use or disclose protected health information when you give the Fire District your authorization on the Fire District's authorization form. For instance, you will need to execute an authorization form before the Fire District can send your protected health information to your life insurance company or to the attorney representing the other party in litigation in which you are involved.

B. Confidential HIV-related information (for example, information regarding whether you have ever been the subject of an HIV test, have HIV infection, HIV-related illness or AIDS, or any information which could indicate that you have ever been potentially exposed to HIV) will not be used or disclosed to any person without your specific written authorization, except to certain other persons who need to know such information in connection with your medical care, and, in certain limited circumstances, to public health or other government officials (as required by law), to persons specified in a court order, to insurers as necessary for payment for your care or treatment, or to public authorities in order to contact persons with whom you have had sexual contact or have shared needles or syringes (in accordance with a specified process set forth in New York State law). Federal regulation requires special authorization with respect to the disclosure of substance abuse treatment records.

13. **Inspection and Obtaining a Copy of Health Record**:

A. You, or your legally authorized representative, have the right to inspect and obtain a copy of any Fire District record that are used to make decisions about your care and treatment for as long as the Fire District maintains this information.

(1) To inspect or obtain a copy of any of these records, you must submit a request in writing to the Fire District Secretary.

(2) If you request a copy of the information, the Fire District may charge a fee for the costs of copying, mailing, or other supplies the Fire District uses to fulfill your request. A waiver of the fee may be given in certain circumstances, upon the approval of the Board of Fire Commissioners.

B. The Fire District will respond to your request for inspection of records within ten (10) days.

C. The Fire District ordinarily will respond to requests for copies within thirty (30) days if the information is located in the facility and within sixty (60) days if it is located off-site. If the Fire District needs additional time to respond to a request for copies, the Fire District will notify you in writing within the time frame above to explain the reason for and expected duration of the delay.

D. Under certain very limited circumstances, the Fire District may deny your request to inspect or obtain a copy of your record.

(1) If so, the Fire District may provide you with a summary of the information instead; or if the Fire District has reason to deny only part of your request the Fire District will provide to you access or copies of the other parts of the record.

(2) The Fire District will provide a written Policy that explains its reasons for providing only summary or limited portions of the records requested, and a description of your rights to have that decision reviewed, and how you can exercise those rights. The Policy will also include information on how to file a complaint about these issues with the Fire District or with the Secretary of the Department of Health and Human Services.

14. **Incomplete or Incorrect Health Information**:

A. If you believe that the health information the Fire District has about you is incorrect or incomplete, you may ask the Fire District to amend the information.

(1) You have the right to request an amendment as long as the information is kept in Fire District records. To request an amendment, write to the Fire District Secretary. Your request should include the reasons why you think the Fire District should make the amendment.

(2) Ordinarily, the Fire District will respond to your request within sixty (60) days. If the Fire District needs additional time to respond, the Fire District will notify you in writing within sixty (60) days to explain the reason for the delay and when the Fire District can expect to have a final answer to your request.

B. If the Fire District denies part of or your entire request, the Fire District will provide a written Policy that explains the reasons for doing so.

(1) You will have the right to have certain information related to your requested amendment included in your records. For example, if you disagree with the Fire District's decision, you can submit a statement

explaining your disagreement, which the Fire District will include in your records.

(2) The written denial Policy also will include information on how to file a complaint with the Fire District or with the Secretary of the Department of Health and Human Services.

15. **Right to Request Restriction of Protected Health Information**:

A. You have the right to request that the Fire District restrict its use and disclosure of your protected health information for purposes related to treatment or health care operations.

B. You may request that the Fire District limit how it discloses information about you to family or friends involved in your care or payment for your care. For example, you may request that the Fire District withhold information about services you received.

C. Requests for restrictions must be in writing.

D. Your request should include:

(1) What information you want to limit;

(2) Whether you want to limit how the Fire District may use the information, how the Fire District shares it with others, or both; and

(3) To whom you want the limits to apply.

E. The Fire District is not required to agree to your request for a restriction, and in some cases the restriction you request may not be permitted under law.

F. However, if the Fire District does agree, the Fire District will be bound by its agreement, unless the information is needed to provide you with emergency treatment or comply with the law.

G. Once the Fire District has agreed to a restriction, you have the right to revoke the restriction at any time.

H. Under some circumstances, the Fire District will also have the right to revoke the restriction as long as the Fire District notifies you before doing so.

(1) In other cases, the Fire District will need your permission before the Fire District can revoke the restriction.

16. **Right to Appeal to the HHS**:

A. If you are not satisfied with the Fire District's response to your privacy complaint or otherwise wish to file a privacy complaint with the Secretary of Health and Human Services (HHS), the HIPAA privacy regulations require your complaint to:

(1) Be in writing, either on paper or electronically;

(2) Name the person or organization that is the subject of the complaint, and describe the acts or omissions that you believe violate the HIPAA privacy regulations; and

(3) Be filed with one-hundred and eighty (180) days of when you knew or should have known that the act or omission you are complaining of occurred (unless you show good cause why the Secretary of HHS should waive the time limit and the Secretary does waive it).

17. **Amendment**: The Board of Fire Commissioners may amend this Policy from time to time in accordance with the law.

18. **Adoption**: This Policy is adopted on June 20, 2024 and supersedes any previous versions of this policy.