

NOTICE OF PRIVACY PRACTICES FROM THE MONROE PUBLIC SCHOOL DISTRICT

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW CAREFULLY

Effective Date: April 14, 2004

Monroe Public School District is a provider of health benefits. The District collects, uses and discloses health information to carry out its mission of operating an educational institution that services the needs of students. This information is private and confidential. The district maintains policies to protect the information against unlawful use and disclosure. The notice provides you with important information including how to contact the district with questions about this notice or our privacy practices.

- **Health Information** is any information whether oral or recorded in any form or medium that "is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse"; and
- "relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual."

Protected Health Information ("PHI") under HIPAA means *individually identifiable* health information. *Identifiable* refers not only to data that is explicitly linked to a particular individual (that's *identified* information). It also includes health information with data items which reasonably could be expected to allow individual identification. Note that the definition of PHI excludes individually identifiable health information in education records covered by the Family Educational Right and Privacy Act. It also excludes employment records held by District in its role as employer.

Permitted Use and Disclosures: We are permitted to use and disclose your PHI , without your permission, to provide health care or administer our health care benefit plans. Examples include:

Payment: We may use and disclose your PHI to determine plan eligibility and responsibility for coverage and benefits. Examples include billing, claims management, collection activities, and administration of reinsurance, stop loss and excess loss insurance policies, coordination of benefits, recovering payments from third parties liable for coverage, risk adjustments, and utilization review activities.

Treatment: We may use and disclose your PHI to coordinate or manage health care services you received from providers. For example, so that your treatment and care are appropriate, your physician may use your information to consult with a specialist regarding your condition.

Health care operations: Your health information may be used as necessary to support the day-to-day activities and management of the Monroe Public School District. For example, information on the services you received may be used to support budgeting and financial reporting and activities to evaluate and promote quality.

Law enforcement: Your health information may be disclosed to law enforcement agencies, without your permission, to support government audits and inspections, to facilitate law-enforcement investigations, to comply with government mandated reporting and in response to official subpoenas, court orders, discovery requests and other legal processes.

Public health reporting: Your health information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the state's public health department.

Other Governmental functions: We may use or disclose PHI in connection with military and veterans activities, national security and intelligence activities, protective services for the President of the United States and other dignitaries and certain correctional facilities activities.

Worker Compensation: We may use and disclose your health information as it relates to Worker Compensation or other similar programs established by law that provide benefits for work related injuries or illness.

Plan Sponsor Communication: We may disclose PHI to the Plan Sponsor in connection with its plan administration functions or for purposes related to your enrollment or disenrollment in the Plan. If you are covered under an insured health plan, the insurer may also disclose PHI to the plan sponsor in connection with these activities.

Other uses and disclosures require your authorization. Disclosure of your health information or its use for any purpose other than those listed above requires your specific written authorization. If you change your mind after authorizing a use or disclosure of your information, you may submit a written revocation of the authorization. However, your decision to revoke the authorization will not affect or undo any use or disclosure of information that occurred before you notified us of your decision.

Individual Rights:

You have certain rights under the federal privacy standards. These include:

- The right to request restrictions on the use and disclosure of your protected health information. We are not required to agree to such a restriction but if we do agree, we will honor our agreement except in case of an emergency.
- The right to receive confidential communications concerning your medical condition and treatment.
- The right to inspect and copy your protected health information. The request must be in writing and the request is limited to existing records that are maintained, collected, used or disseminated by or for an Employee Plan. It does not apply to psychotherapy notes we maintain; information we compile in reasonable anticipation of or use in civil, criminal or administrative actions or proceedings; or to certain clinical laboratory information. We may charge a fee for any copies you request.
- The right to amend or submit corrections to your protected health information. The request must be in writing and a reason for the amendment must be given. We may deny the request if we determine that we did not create the record or if we believe the existing record is accurate. However documentation of your disagreement will be filed with the record.
- The right to receive an accounting of how and to whom your protected health information has been disclosed. The right does not apply to certain disclosures, including, but not limited to, disclosures made for the purposes of treatment, payment or our operations; disclosures made to you or to others involved in your employment; disclosures made with your authorization; disclosures made for national security purposes; disclosures for the district's directory or other notification purposes; disclosure of limited data sets; incidental disclosures or disclosures made prior to April 14, 2004. you must make any request for an accounting in writing and we may charge a fee to fill more than one request in any given year. Requests should be directed to:

Privacy Protection Officer
Personnel Department
Monroe Public School District
1275 North Macomb
Monroe MI 48162
734.265.3030

- The right to receive a printed and/or electronic copy of this notice.

Monroe Public School District Duties: We are required by law to maintain the privacy of your protected health information and to provide you with this notice of privacy practices. We also are required to abide by the privacy policies and practices that are outlined in this notice. Notification will be provided if we materially change the terms of our handling of PHI. This notice and any revised notices are available on our website at www.monroe.k12.mi.us on the Employee Services page.

Right to Reserve Privacy Practices: As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in federal and state laws and regulations. Whatever the reason for these revisions, we will provide you with a revised notice. The revised policies and practices will be applied to all protected health information that we maintain.

Requests to Inspect Protected Health Information: As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting the **Privacy Protection Officer**.

Complaints: If you would like to submit a comment or complaint about our privacy practices, you can do so by sending a letter outlining your concerns to:

**Privacy Protection Officer
Personnel Department
Monroe Public School District
1275 North Macomb St.
Monroe, MI 48162**

If you believe that your privacy rights have been violated, you should call the matter to our attention by sending a letter describing the cause of your concern to the same address.

You will not be penalized or otherwise retaliated against for filing a complaint.

Contact Person: The name and address of the person you can contact for further information concerning our privacy practices is:

**Privacy Protection Officer
Personnel Department
Monroe Public School District
1275 North Macomb St.
Monroe, MI 48162
(734) 265.3030**