NOTICE OF PRIVACY PRACTICES

This document describes how medical information about you may be used and disclosed, and how you can get access to this information.

Please review it carefully.

The Knox County Health Department (KCHD) is permitted by federal privacy laws to make uses and disclosures of your health information for the purposes of treatment, payment, and health care operations. Protected health information is the information we create and obtain in providing our services to you. Such information may include your name, address, dates of birth and treatment, symptoms, diagnoses, allergies, results of tests and treatments, and your medical history.

KCHD is required to:
- Maintain the privacy of your health information as required by law.
- Abide by the terms of this Notice.
- Notify you if we cannot accommodate a requested restriction or request.
- Accommodate your reasonable requests regarding methods to communicate health information with you.
- Notify you in the event there is a breach of unsecured protected health information.

KCHD’s RESPONSIBILITIES

KCHD is required to:
- Maintain the privacy of your health information as required by law.
- Abide by the terms of this Notice.
- Notify you if we cannot accommodate a requested restriction or request.
- Accommodate your reasonable requests regarding methods to communicate health information with you.
- Accommodate your request for an accounting of disclosures.
- Notify you in the event there is a breach of unsecured protected health information.

We reserve the right to amend, change, or eliminate provisions in our privacy practices and access practices and to enact new provisions regarding the protected health information we maintain. If our information practices change, we will amend our Notice. You are entitled to receive a revised copy by going to our website, www.knoxcounty.org/health, or by calling or visiting our office.

TO REQUEST INFORMATION OR FILE A COMPLAINT

If you have questions, would like additional information, or want to report a problem regarding the handling of your information, you may contact:

Privacy Officer
Risk Management Department
400 Main Street
Knoxville, TN 37902
Phone: 865-215-5274
Email: privacy@knoxcounty.org

Additionally, if you believe your privacy rights have been violated, you may file a written complaint at our office by delivering the written complaint to the Privacy Officer. You may also file a complaint by mailing it or emailing it to the Secretary of Health and Human Services.

We cannot, and will not, retaliate against you for filing a complaint with the Secretary of Health and Human Services.

OTHER USES AND DISCLOSURES ALLOWED BY THE PRIVACY RULE

PATIENT CONTACT

We may contact you to provide appointment reminders and information about treatment alternatives or health-related benefits and services that may be of interest to you. We may also contact you as part of a fund raising effort, however we may request that we not contact you.

NOTIFICATION – OPPORTUNITY TO AGREE OR OBJECT

Unless you object, we may use or disclose your protected health information to notify, or assist in notifying, a family member, personal representative, or other person responsible for your care, about your location, general condition, or your death.

Communication with Family – Using our best judgment, we may disclose to a family member, other relative, close personal friend, or any other person you identify, health information relevant to that person’s involvement in your care or payment for such care if you do not object, or in an emergency.

Disaster Relief Efforts – We may use and disclose your protected health information to assist in disaster relief efforts.

PUBLIC HEALTH ACTIVITIES

Controlling Disease – As required by law, we may disclose your protected health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Child Abuse and Neglect – We may disclose protected health information to public authorities as allowed by law to report child abuse or neglect.

Food and Drug Administration (FDA) – We may disclose to the FDA your protected health information relating to adverse events with respect to food, supplements, products and product defects, or post-market surveillance information to enable product recalls, repairs, or replacements.

Employment Related – We may disclose to employers your protected health information to the extent such information is related to an employment activity or opportunistic or discriminatory treatment of an employee is permitted.

VICTIMS OF ABUSE, NEGLECT AND DOMESTIC VIOLENCE

We can disclose protected health information to governmental authorities to report child abuse, neglect, or domestic violence.

We can disclose your protected health information to an appropriate person to provide you with services, if you are a victim of domestic violence.

We can disclose your protected health information to notify, or assist in notifying, a family member, personal representative, or other person responsible for your care, about your location, general condition, or your death.

We can disclose protected health information to an appropriate person to provide you with services, if you are a victim of domestic violence.

WEBSITE

We maintain a website that provides information about our entity. This Notice is on the website. Please go to www.knoxcounty.org/health.

Coroners, Medical Examiners and Funeral Directors

We may disclose your protected health information to funeral directors and coroners consistent with applicable law to allow them to carry out their duties.

Organ Procurement Organizations

Consistent with applicable law, we may disclose your protected health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs, tissues, or eyes for the purpose of donation and transplant.

Research

We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your protected health information.

Threat to Health or Safety

To avert a serious threat to health or safety, we may disclose your protected health information consistent with applicable law to prevent or lessen a serious, imminent threat to the health or safety of a person or the public.

For Specialized Governmental Functions

We may disclose your protected health information for specialized governmental functions as authorized by law such as to U.S. Armed Forces personnel, for national security purposes, or to public assistance program personnel.

Correctional Institutions

If you are an inmate of a correctional institution, we may disclose to the institution or its agents the protected health information necessary for your health and the health and safety of other individuals.

Workers’ Compensation

If you are seeking compensation through workers’ compensation, we may disclose your protected health information to the extent necessary to comply with laws relating to workers’ compensation.

Other Uses and Disclosures

Other uses and disclosures besides those identified in this Notice will be made only as otherwise authorized by law or with your written authorization which you may revoke except to the extent information or action has already been taken.

Uses and Disclosures Requiring Your Authorization

Psychotherapy notes – Authorization must be obtained for any use or disclosure of psychotherapy notes except to carry out treatment, payment, or operations, or to defend ourselves in a legal action brought by the subject of the notes.

Marketing – Authorization must be obtained except if the communication is in the form of a face-to-face communication or in the form of a promotional gift by your healthcare provider.

Sale – Authorization must be obtained prior to any disclosure for the sale of protected health information.

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