## Greene County HealthCare Inc Notice of Privacy Practices (Summary)

This summary gives a brief overview of how medical information about you may be used and disclosed. Please be sure you receive the full Notice of Privacy Practices from our staff.

Greene County HealthCare Inc is committed to protecting health information about you. We are required by law to make sure that health information that identifies you is kept private.

We may use and disclose health information about you in the following circumstances.

To provide treatment or to obtain payment for services
For healthcare operations
To remind you of appointments
To contact you with information about treatment, services, products, or health care
providers
To comply with judicial proceedings
When required by Federal, State, or Local law
When there are public health risks
To prevent a serious threat to safety or health

You have several rights regarding your health information.

- ☐ You have the right to request restrictions on uses and disclosures of health information about you
- ☐ You have the right to request reasonable confidential communication
- ☐ You have the right to inspect and copy your health information
- ☐ You have the right to request an amendment of your health information
- ☐ You have the right to a listing of the disclosures we have made
- ☐ You have a right to the full copy of this Notice

You may file a complaint about our privacy practices.

☐ If you feel your privacy has been violated, we encourage you to file a complaint. You may file a complaint with the person listed below, or with the Department of Health and Human Services

If you have any questions regarding this summary or the full Notice, please contact the person listed below.

Paula Grant, Privacy Official, PO Box 658, Snow Hill, NC 28580 or 747-2921 ext 233

THIS IS A SUMMARY ONLY OF OUR PRIVACY PRACTICES. PLEASE GET THE FULL NOTICE FROM OUR STAFF. IF WE FAIL TO OFFER IT TO YOU, PLEASE ASK. YOU NEED TO READ THE FULL NOTICE.