

PRIVACY OF HIV-RELATED INFORMATION

The privacy and confidentiality of HIV-related information maintained by Options for Community Living, Inc. is protected by Federal and State law and regulations. These protections go above and beyond the protections described in Options' General Notice of Privacy Practices. If you have questions about this notice or would like further information, please contact Options' Privacy Officer at 631-361-9020 extension 1207.

We recommend that you also take time to review Options' General Notice of Privacy Practices for information about how your health information may generally be used and disclosed by Options. Options General Notice of Privacy Practices also provides information about how you may obtain access to your health information, including confidential HIV-related information. If there is any conflict between the General Notice of Privacy Practices and this notice, the protections described in this notice will apply instead of the protections described in the General Notice of Privacy Practices.

Confidential HIV-related information is any information indicating that you had an HIV-related test, have HIV-related illness or AIDS, or have an HIV-related infection, as well as any information which could reasonably identify you as a person who has had a test or has HIV infection.

Under New York State law, confidential HIV-related information can only be given to persons allowed to have it by law, or persons you have allowed to have it by signing a written authorization form. You can ask to see a list of people who can be given confidential HIV-related information by law without a written authorization form.

With your general written consent, confidential HIV-related information about you may be used by personnel within Options who need the information to provide you with direct care or treatment, to process billing or reimbursement records, or to monitor or evaluate the quality of care provided at the residential program. Generally, Options may not reveal to a person outside of Options any confidential HIV-related information that Options obtains in the course of providing you with treatment or care, *unless*:

- Options obtains your written authorization;
- The disclosure is to a person who is authorized under applicable law to make health care decisions on your behalf and the information disclosed is relevant to that person fulfilling such health care decision making role;
- The disclosure is to another health care provider or payer for treatment or payment purposes, so long as Options has obtained your general written consent to such disclosures;
- The disclosure is to an external agent of Options who needs the information to provide you with direct care or treatment, to process billing or reimbursement records, or to monitor or evaluate the quality of care provided at Options. In such cases, Options will usually obtain your general written consent and will have an agreement with the agent to ensure that your confidential HIV-related information is protected as required under Federal and State confidentiality laws and regulations;
- The disclosure is required by law or court order;
- The disclosure is to an organization that procures body parts for transplantation;
- You receive services under a program monitored or supervised by a Federal, State or local government agency and the disclosure is made to such

- government agency or other employee or agent of the agency when reasonably necessary for the supervision, monitoring, administration of provision of the program's services;
- Options is required under Federal or State law to make the disclosure to a health officer;
- The disclosure is required for public health purposes;
- If you are an inmate at a correctional facility and disclosure of confidential HIV-related information to the medical director of such facility is necessary for the director to carry out his or her functions;
- For decedents, the disclosure is made to a funeral director who has taken charge of the decedent's remains and who has access in the ordinary course of business to confidential HIV-related information on the decedent's death certificate;
- The disclosure is made to report child abuse or neglect to appropriate State or local authorities.

Violation of these privacy regulations may subject Options to civil or criminal penalties. Suspected violations may be reported to appropriate authorities in accordance with Federal and State law.

HOW TO OBTAIN COPIES OF THIS NOTICE

How to Obtain a Copy of This Notice. You have the right to a paper copy of this notice. You have the right to a paper copy of this notice. You or your personal representative may request a paper copy at any time by requesting a copy from our program staff or by contacting the Privacy Officer, at 631-361-9020 extension 1207

How to Obtain a Copy of Revised Notice. We may change our privacy practices from time to time. If we do, we will revise this notice so you will have an accurate summary of our practices. The revised notice will apply to all of your health information. We will post any revised notice in our administrative office areas. You or your personal representative may request a copy of a revised notice from our program staff or by contacting the Privacy Officer at 631-361-9020 extension 1207. We are required to abide by the terms of the notice that is currently in effect.

HOW TO FILE A COMPLAINT

If you believe your privacy rights have been violated, you may file a complaint with us or with the Secretary of the Department of Health and Human Services. To file a complaint with us, please contact:

Options for Community Living, Inc.
25 Howard Place
Ronkonkoma, NY 11779
Attention: HIPAA Privacy and Security Officer
631-361-9020

No one will retaliate or take action against you for filing a complaint.

If you experience discrimination because of the release of confidential HIV-related information, you may contact the New York State Division of Human Rights at (212) 566-8624 or the New York City Commission of Human Rights at (212) 566-5493. These agencies are responsible for protecting your rights.