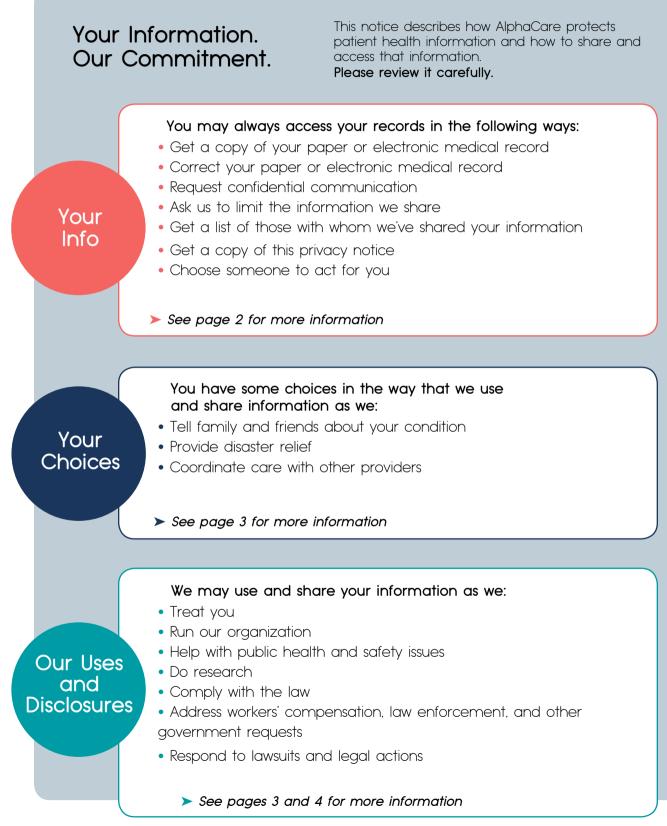
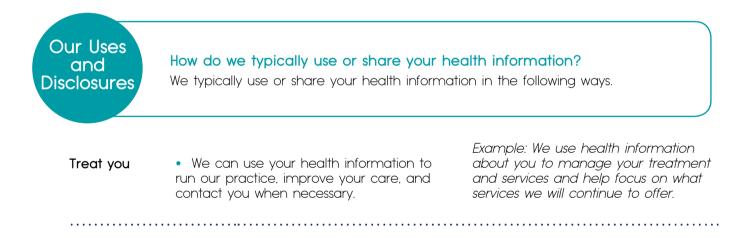


3807 Lancaster Avenue, Philadelphia, PA 19104 www.alphacarephilly.org 215-546-8686 client@alphacarephilly.org



Info to a	n it comes to your health information, you have different ways ccess it. section explains the different methods.		
Get an electronic or paper copy of your medical record	 You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this. We will provide a copy or a summary of your health information, usually within 30 days of your request. 		
Ask us to correct your medical record	 You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 day 		
Request confidential communications	 You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests. 		
Ask us to limit what we use or share	 You can ask us not to use or share certain health information for treatment of our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. 		
 Get a list of those with whom we've shared information You can ask for a list (accounting) of the times we've shared you information for six years prior to the date you ask, who we shared why. We will include all the disclosures except for those about treatme care operations, and certain other disclosures (such as any you ask make). 			
Get a copy of this privacy notice	vacy notice agreed to receive the notice electronically. We will provide you with a paper copy promptly.		
Choose someone to act for you	 If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action. 		

Your Choices	For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.		
In these cases, you have both the right and choice to tell us to:		 Share information with your family, close friends, or others involved in your care. Share your information in a disaster relief situation. 	
		unconscious, we may go ahead it is in your best interest. We ma	ir preference, for example if you are and share your information if we believe y also share your information when imminent threat to health or safety
In these cases coordinate yo		• With your permission, we can use your health information and share it with other professionals who are treating you.	Example: You start care with an OB- GYN and request your physician ultrasound report be sent to them.



continued on next page

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

Help with public health and safety issues	 We can share health information about you for certain situations such as: Preventing disease Helping with product recalls Reporting suspected abuse, neglect, or domestic violence Preventing or reducing a serious threat to anyone's health or safety 		
Do research	• We can use or share your information for health research.		
Comply with the law	 We will share information about you if state or federal laws require it, including with the Department of Health and Human Services. We can share health information about you in response to a court or administrative order, or in response to a subpoena. 		
Work with a medical examiner or funeral director	• We can share health information with a coroner, medical examiner, or funeral director when an individual dies.		
Address workers' compensation, law enforcement, and other government requests	 We can use or share health information about you: For workers' compensation claims For law enforcement purposes or with a law enforcement official With health oversight agencies for activities authorized by law For special government functions such as military, national security, and presidential protective services 		

Our Commitment

• We strive to follow best practice when protecting personal health information.

• We will never sell patient information

• We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

• We must follow the duties and privacy practices described in this notice and give you a copy of it upon request.

• We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

Effective starting July 23, 2024.