

West Hartford Fire Department  
95 Raymond Road  
West Hartford, CT 06107

**Recipient**  
Street Address  
City, ST ZIP Code

Tel 860-561-8300  
Fax 860-561-8922

<https://www.westhartfordct.gov/town-departments/fire-department>



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# West Hartford Fire Department

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## Notice of Privacy Practices

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## IMPORTANT:

### West Hartford Fire Department Notice of Privacy Practices

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

West Hartford Fire Department is required by the Health Insurance Portability and Accountability Act (“HIPAA”) to maintain the privacy of certain confidential health care information, known as Protected Health Information (“PHI”), and to provide you with a notice of our legal duties and privacy practices with respect to your PHI.

#### **Uses and Disclosures for Treatment, Payment or Healthcare Operations**

West Hartford Fire Department may use or disclose your PHI without your authorization, for the following purposes:

#### ***Treatment***

We can use your PHI for treatment provided to you by us and other medical personnel (including doctors and nurses who give orders to allow us to provide treatment to you). We may also share your PHI with other individuals involved in your care. For example, we may share PHI via radio or telephone to the hospital or dispatch center as well as provide the hospital with a copy of the record we create in the course of providing you with treatment and transport. We may also share your PHI with other healthcare providers for their treatment activities.

#### ***Payment***

We may use and disclose your PHI for any activities we must undertake in order to get reimbursed for the services that we provide to you, including but not limited to: submitting bills to insurance companies, making medical necessity determinations, and collecting outstanding accounts. We may also disclose PHI to another healthcare provider or entity for the payment activities of the provider or entity (such as the hospital where you are transported).

#### ***Healthcare Operations***

We may use or disclose your PHI for quality assurance activities, including but not limited to: licensing, training programs to ensure that our personnel meet our standards of care and follow established policies and procedures, obtaining legal and financial services, and engaging in other management related functions. We may also disclose your PHI to another healthcare provider (such as the hospital where you are transported) for the healthcare operations activities of the entity as long as the entity receiving the information has or has had a relationship with you and the PHI pertains to that relationship.

#### ***Reminders for Scheduled Transports and Information on Other Services***

We may also contact you to provide you with a reminder of any scheduled appointments for non-emergency ambulance and medical transportation, or for other information about alternative services we provide or other health-related benefits and services that may be of interest to you.

#### **Other Uses and Disclosures of Your PHI That Can Be Made Without Authorization**

Unless prohibited by a more stringent state law, West Hartford Fire Department may use or disclose your PHI *without* your written authorization in the following circumstances:

- ❖ For healthcare and legal compliance activities;
- ❖ To a public health authority in certain situations as required by law (such as to report abuse, neglect or domestic violence);
- ❖ For health oversight activities including audits or other actions undertaken by the government (or their contractors) by law to oversee the healthcare system;
- ❖ For judicial and administrative proceedings, as required by a court or administrative order, or in some case in response to a subpoena or other legal process;
- ❖ For law enforcement activities in limited situations, such as when there is a warrant;
- ❖ To avert a serious threat to the health and safety of a person or the public at large;
- ❖ For the workers’ compensation purposes, and in compliance with workers’ compensation laws;

- ❖ To coroners, medical examiners, and funeral directors for identifying a deceased person, or determining cause of death, or carrying on their duties as authorized by law;
- ❖ If you are an organ donor, we may release health information to organizations that handle organ procurement or organ, eye or tissue transplantation to an organ donation bank, as is necessary to facilitate organ donation and transplantation.

Any other use or disclosure of PHI, other than those listed above, will only be made with your written authorization. You may revoke this authorization at any time, in writing, except to the extent that we have already used or disclosed your PHI in reliance on that prior authorization.

#### **Your Rights Regarding Your PHI**

As a patient, you have a number of rights with respect to your PHI, including:

#### ***Right to access, copy or inspect your PHI***

You have the right to inspect and obtain a paper or electronic copy of most of the PHI that we collect and maintain. You also have the right to request that we transmit your PHI to a third party. Requests for access to your PHI or to transmit your PHI to a third party should be to our HIPAA Compliance Officer by filling out an access request form.

#### ***Right to amend your PHI***

You have the right to ask us to amend PHI that we maintain about you. Requests for amendments to your PHI should be made in writing and you should contact our HIPAA Compliance Officer if you wish to make a request for amendment.

#### ***Right to request an accounting***

You may request an accounting of certain disclosures of your PHI. West Hartford Fire Department will provide an accounting of those disclosures that we are required to account for under HIPAA. If you wish to request an accounting requirement, you should contact our HIPAA Compliance Officer and make a request in writing.

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### ***Right to request restrictions on uses and disclosures of your PHI***

You have the right to request that we restrict how we use and disclose your PHI. However, we are only required to abide by a requested restriction under limited circumstances, and it is generally our policy that we will not agree to any restrictions unless required by law to do so. If you wish to request a restriction on the use or disclosure of your PHI, you should contact our HIPAA Compliance Officer and make a request in writing.

### ***Right to notice of a breach of unsecured PHI***

If we discover that there has been a breach of your unsecured PHI, we will notify you about that breach by first-class mail dispatched to the most recent address that we have on file. If you prefer to be notified about breaches by electronic mail, please contact our HIPAA Compliance Officer, to make West Hartford Fire Department aware of this preference and to provide a valid email address to send the electronic notice.

### ***Right to request confidential communications***

You have the right to request that we send your PHI to an alternate location (e.g., somewhere other than your home address) or in a specific manner (e.g., by email rather than regular mail). If you wish to request that we communicate PHI to a specific location or in a specific format, you should contact our HIPAA Compliance Officer and make a request in writing.

### **Internet, Email and the Right to Obtain Copy of Paper Notice**

If we maintain a website, we will prominently post a copy of this Notice on our website and make the Notice available electronically through the website. If you allow us, we will provide our Notice of Privacy Practices to you electronically instead of on paper. You may always request a paper copy of our Notice.

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### **Revisions to the Notice**

West Hartford Fire Department is required to abide by the terms of the version of this Notice currently in effect. However, West Hartford Fire Department reserves the right to change the terms of this Notice at any time, and the changes will be effective immediately and will apply to all PHI that we maintain. Any material changes to the Notice will be promptly posted in our facilities and on our website. You can get a copy of the latest version of this Notice by contacting our HIPAA Compliance Officer.

### **Your Legal Rights and Complaints**

You also have the right to complain to us, or to the Secretary of the United States Department of Health and Human Services, if you believe that your privacy rights have been violated. You will not be retaliated against in any way for filing a complaint with us or the government. If you have any questions or if you wish to file a complaint or exercise any rights listed in the Notice, please contact:

**West Hartford Fire Department  
HIPAA Compliance & Security Officer Fire  
Chief Greg Priest  
95 Raymond Road  
West Hartford, CT 06107**

Effective Date of the Notice: 3/23/2021 V1.2