



Willow Crest Hospital

MOCCASIN BEND RANCH

NOTICE OF PRIVACY PRACTICES

The following notice describes how your medical information may be used and disclosed, and how you may obtain access to this information. Please review the information carefully.

- Your confidential healthcare information may be released to other healthcare professionals within Willow Crest Hospital / Moccasin Bend Ranch (WCH/MBR) for the purpose of your treatment and or healthcare operations.
- Your confidential healthcare information may be released for the purpose of Willow Crest Hospital / Moccasin Bend Ranch receiving payment for providing you with needed healthcare services.
- Your confidential healthcare information may be released to public or law enforcement officials in the event of an investigation in which you are a victim of abuse, a crime or domestic violence.
- Your confidential healthcare information may be released to other healthcare providers in the event you need emergency care.
- Your confidential healthcare information may be released to a public health organization or federal organization in the event of a communicable disease or to report a defective device or untoward event in a biological product (food or medication.)
- Your confidential healthcare information may **NOT** be released for any other purpose than that which is identified in this notice.
- Your confidential healthcare information may be released only after receiving written authorization from you. You may revoke your permission to release confidential healthcare information at any time.
- You have the right to restrict the use of your confidential healthcare information. However, Willow Crest Hospital / Moccasin Bend Ranch may choose to refuse your restriction if it conflicts with providing you with quality healthcare or in the event of any emergency situation.
- You have the right to receive confidential communication about your health status and to choose the method by which we communicate with you.
- You have the right to review and photocopy any/all portions of your healthcare information, subject to approval by your assigned physician here at Willow Crest Hospital / Moccasin Bend Ranch. Your request for copying may incur a per page charge.
- You have the right to make changes in your healthcare information.
- You have the right to know who has assessed your confidential healthcare information and for what purpose.
- You have the right to possess a copy of this Privacy Notice upon request. This copy can be in the form of an electronic transmission or on paper.

- Willow Crest Hospital / Moccasin Bend Ranch is required by law to protect the privacy of its patients. It will keep confidential any and all patient healthcare information and will provide patients with a list of duties or practices that protect confidential healthcare information.
- The hospital will abide by the terms of this notice. The hospital reserves the right to make changes to this notice and continue to maintain the confidentiality of all healthcare information. Current patients will receive a mailed copy of any changes to this notice within 60 days.
- You have the right to complain to Willow Crest Hospital / Moccasin Bend Ranch if you believe your rights to privacy have been violated. If you feel your privacy rights have been violated, please mail your complaints to:

ATTN: Kathy Henderson
Privacy Officer/Corporate Compliance Officer
Willow Crest Hospital
130 "A" Street SW
Miami, OK 74354
800-541-0705

- All complaints will be investigated. You may also send a written complaint to the Secretary of Health and Human Services. We will take no retaliatory action against you if you file a complaint about our privacy practices.

For further information about this Privacy Notice, please contact:

Kathy Henderson
Privacy Officer/Corporate Compliance Officer
Willow Crest Hospital
130 "A" Street SW
Miami, OK 74354
800-541-0705

This notice is effective as of April 9, 2003.