

GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT NOTICE OF PRIVACY PRACTICES

This Notice of Privacy Practices is effective as of November 1, 2007.

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

This notice describes the privacy practices of Goodwill Industries of the Southern Piedmont (GISP). GISP is required by law to maintain the privacy of protected health information. We are also required by law to provide you with this notice telling you about our legal duties and privacy practices with respect to your protected health information. We also are required to follow the privacy policies and practices that are outlined in this notice.

HOW GISP MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU- Health related information that we collect about you is called Protected Health Information (PHI). It is information that someone may use to identify you such as your name or address.

The three types of protected health information that we regularly collect, use and share are: 1) for treatment; 2) for payment; and 3) for program services operations. It is necessary that we use and share this information so GISP can provide services to you and so we can perform our mission. Since this is so, we are not required to get your permission prior to use or prior to sharing information with certain people. The information shared is the least amount that is necessary. The three types of information GISP regularly uses or shares are listed below:

1) For Treatment- GISP may use your health information to provide employment and training services to you. GISP may share health information about you to case managers, doctors or others who are involved in your employment and/or training activities. These people may work for us or for others such as health agencies to which GISP may refer you.

2) For Payment- GISP may use and share health information about you so that the treatment and services you receive from us may be billed and payment can be collected from an insurance company or another party. For example, GISP may need to give your employment, training plan or health information to your health insurance plan so they will pay GISP or reimburse you for visits or services received.

3) For Program Services Operations- GISP may use and share your health information for operations of GISP's employment and training programs. These uses and disclosures (sharing) are necessary to run GISP and to make sure that all of our consumers receive quality care. Two examples are: 1) GISP may use health

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information to do a quality review of our treatment and/or services; or 2) we may use information to evaluate the performance of our staff that provide services to and work with you. GISP may also combine health information about many consumers to decide what additional services we should offer, what services are not needed, whether certain new treatments are working, or to compare how GISP is doing with other organizations.

EXCEPTIONAL USES- Exceptional uses are out of the ordinary limited uses that are not part of our daily work; however, they are necessary for the benefit of the public or for reasons that are in your best interest. In these situations, your permission to use or to share your health information is not required. The information is shared with limited people. The exceptional uses or sharing of information are:

Required By Law or for Law Enforcement- GISP may use or share information about you when required by federal, state, or local law. Examples are: 1) to report neglect and/or abuse; or 2) as required by a court order or warrant; or 3) to assist the police in finding a missing person.

To Prevent a Serious Threat to Health or Safety- GISP may use and share health information about you when it is necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any sharing of information would be limited to authorities that are able to help or prevent the threat. An example would be providing information to the police so they can locate an escaped criminal.

Public Health Activities- Your information may be used or shared for public health reasons such as helping the public health authorities to prevent or control disease or so the FDA can recall defective products.

Health Oversight Activities- GISP may disclose health information to a health oversight agency for activities authorized by law. For example, these oversight activities include: audits, investigations and inspections. These activities are necessary for the government to monitor the health care system, government programs, and/or compliance with civil rights laws.

Decedents- Health information may be shared with funeral directors or coroners so they can perform their lawful duties.

Organ/Tissue Donation- Your health information may be used or shared for cadaveric organ, eye or tissue donation purposes.

Research- GISP may use or share your health information for research purposes with an institutional review or privacy board that has evaluated the research

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proposal and they have a set of rules to make sure the privacy of your health information is maintained.

Government Functions- Your health information may be used or shared for specialized government functions such as protection of public officials (i.e. The President) or reporting necessary information to the various branches of the armed services.

Workers' Compensation- Your health information may be used or shared in order to follow laws and regulations related to Workers' Compensation.

OTHER USES- Other uses and sharing of information can occur only with your written authorization or approval. You may cancel your authorization at anytime. We will honor the cancellation; however, any uses or sharing that has occurred prior to GISP's receipt of your cancellation are allowed.

Fundraising and Public Relations Activities- GISP may use your health information for public relations or to raise money for the organization. GISP will get your approval in all cases where your information might be shared with the public or those outside of GISP. You can also decide to agree to participate (opt-in) or to not be part of such activities. Doing so will not change or reduce the services you receive from us.

Third Parties- GISP will always get your permission prior to sharing your information with other people such as a landlord or a life insurance company unless it is an exceptional use described above or it is an emergency situation.

YOUR HEALTH INFORMATION RIGHTS- You have the following rights regarding the health information we maintain about you. Please contact the applicable GISP's Workforce Development Services Director if you have questions about your privacy rights or if you want to exercise a right. You can contact the Workforce Development Services Director that manages the services you receive as follows:

WDS Director

Telephone Number

Joy Fortune

704-332-0302; 704-858-3991

Peg Smith

704.332-0313

Diane Hoff-Weekley

704-332-0339

Paulette Griffin, VP

704-332-0314

Right to Inspect and Copy- You have the right to inspect and copy health information that we maintain about you as allowed by state and federal law. If you

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request a copy of your information, we may charge you a fee for this service that will be based on the cost of making copies, labor, supplies and mailing. We may deny your request in certain circumstances. If you are denied access to your health information, you may request that the denial be reviewed. We will comply with the outcome of the review.

Right to Amend- If you feel that the health information that we have about you is incorrect or incomplete, you may ask us to amend, or to correct the information. You have the right to request an amendment for as long as the information is kept by or for GISP. We may deny your request to amend information for limited reasons which are: 1) when the information was not created by GISP unless the person or entity that created the information is no longer available to make the amendment; 2) the information is not part of GISP's designated record set; 3) when we believe that our information is accurate and complete; and 4) the information is not available for your review. If your request is denied, you have the right to ask us to put a statement of disagreement in your file.

Right to an Accounting of Disclosures- You have the right to request and receive a list of the disclosures that we have made of your health information. Certain information is excluded such as that used for treatment, payment or service program operations. Disclosure is the sharing of information.

Right to Request Restrictions- You have the right to request a restriction or that a limitation be placed on the health information we use or share about you for treatment, payment or program services operations. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment.

Right to Request Confidential Communications- You have the right to request that we communicate with you about health matters in a certain way or at a certain location when you are worried about your safety. For example, you can ask that we only contact you at work or by mail; or that we mail information to a post office box.

Right to a Paper Copy of This Privacy Notice- You have the right to a paper copy of this Privacy Notice at any time. Also, you may get a copy of this Privacy Notice at GISP's website that is located on the internet (www.goodwillsp.org).

COMPLAINTS- If you believe your privacy rights have been violated, you may file a complaint with either GISP or with the Office of Civil Rights of the Department of Health and Human Services. To file a complaint with GISP, contact:

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How to Contact GISP's Privacy Officer:

- By Mail:** Shannon Drolet
Process Management Director and Privacy Officer
PO Box 668768
Charlotte, NC 28120
- By Telephone** 704-332-0325
- By Fax:** 704-372-3228 (*state on the fax*-Attention: Shannon Drolet, Process Management Director and Privacy Officer)
- By E-Mail:** privacy.officer@goodwillsp.org

How to Contact the Office of Civil Rights:

To file a complaint with the Office of Civil Rights, please call their toll free number that is 1-800-368-1019. A complaint can be filed by mail, email or by fax.

A CHANGE TO THIS NOTICE- GISP has the right to change the terms of this Privacy Notice and to make the new requirements effective for all protected health information we maintain. This is necessary for situations such as when the law changes. If our Privacy Notice changes, a revised copy will be displayed at a visible (easy-to-find) location in all of GISP's locations. If we make significant changes to the Privacy Notice that relate to your privacy rights or policy, we will give you a copy within 90 days of the changes. This will be delivered to you either by hand or through the mail. As always, you may get a copy anytime you ask for one.

ACKNOWLEDGMENT OF RECEIPT OF THIS PRIVACY NOTICE-GISP will ask you to sign a separate form, which is an acknowledgment that you have received a copy of this Privacy Notice. This acknowledgement form will be filed with your records. However, you do not have to sign this form to receive services from GISP.