



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. If you have any questions about this notice, please contact our office managers, Trisha Boman or Kim Coder.

Broken Arrow Family Clinic's promise to you

Broken Arrow Family Clinic (BAFC) protects the privacy of your health information and follows all state and federal laws. You already have privacy protection under Oklahoma laws. This letter tells you about your privacy rights and what we, as a clinic, may do with your health information by law.

Health Information Rights

Right to Inspect and Copy: You have the right to see and have a copy of the health information that BAFC has about you. It will not include information needed for civil, criminal, administrative actions and proceedings, or psychotherapy notes.

Right to Request an Amendment: If you feel the health information we have about you is wrong or incomplete, you may ask us in writing to fix the information. We may say no to your request if it is not in writing and it does not include a reason, or the information was not created by us, or the information is determined to be correct and complete.

Right to an Accounting of Disclosures: You have the right to request an "accounting of disclosures", a list of the names we gave your health information to, other than disclosures for purposes of treatment, payment or operations. Your request must not go back more than six years.

Right to Request Restrictions: You have the right to ask us to either not give or partially give your health care information used for treatment, payment or health care operations. We do not have to agree to your request. If we do agree, we will follow your request for restriction unless the information is used to provide you emergency care.

Right to Request Confidential Communication: You have the right to ask that we talk with you about health care matters in a certain way or at a certain place. For example, you can ask that we only contact you at work or by email. BAFC will work to meet all reasonable requests.

Right to a Paper Copy of this Notice: You have the right to ask for a paper copy of this notice. You may also print a copy of this notice from our website.

To use these rights, a request for inspecting, copying, amending, making restrictions, or obtaining an accounting of your health information must be made in writing to:

Broken Arrow Family Clinic
705 West Oakland
Broken Arrow, OK 74012

For more information, please call BAFC at (918) 251-2666.

How BAFC may use and disclose health care information

Your health information may be used and given by BAFC for treatment, payment and operational needs. We have listed some common ways that are allowed uses and releases.

For Treatment: Caregivers, such as doctors, mid-level practitioners and medical assistants may use your health information to determine your plan of care. Individuals within BAFC may share health information about you to manage your services.

For Payment: BAFC may give information about you to your health plan or health insurance carrier to pay for your services. We may also share your information with other government programs such as Workers' Compensation, Medicare, Medicaid or Indian Health Services in order to better manage your benefits and payments.

For Operations: BAFC may use and give information about you to make sure that the services and benefits you get are correct and high quality. We may share your health information with business partners who perform work for BAFC. BAFC requires that our business partners use the same level of privacy and security as we do when handling your health information.

To Other Government Agencies Providing Benefits or Services: BAFC may give your health information to other government agencies that are providing you with benefits or services when the information is necessary for you to receive those benefits and services.

For Health Oversight Activities: BAFC may share your health information with other divisions within the agency and with other agencies for oversight activities as required by law. Examples of these oversight activities include audits, inspections, investigations and licensure.

For Law Enforcement: BAFC may give health information to a law enforcement official, subject to applicable federal and state law and regulations, for purposes that are required by law or in response to a court order or subpoena.

Lawsuits and Disputes: If you are involved in a lawsuit or a dispute, BAFC may give health information about you in response to a court or administrative order. We may also give health information about you in response to a subpoena, discovery request, or other lawful process.

To Coroners, Medical Examiners and Funeral Directors: BAFC may release health information to a coroner, medical examiner or funeral director, as necessary to carry out duties as authorized by law.

For Organ Donations: If you are an organ donor, BAFC may give your health information to an organization that procures, banks, or transports organs for the purpose of an organ, eye or tissue donation and transplantation.

To Avert a Serious Threat to Health or Safety: BAFC may give your health information if it is necessary to prevent a serious threat to your health and safety or to the health and safety of the public or another person.

To the Military: If you are a veteran or a current member of the armed forces, BAFC may give your health information as required by military command or veteran administration authorities.

As Required By Law: We will give health information about you when required to do so by federal, state or local law.

State and Federal laws require BAFC to maintain the privacy of your health information and to give you this notice of our legal duties and privacy practices. By law, we will follow the terms of this notice.

BAFC has the right to change this notice. We keep the right to make any changed notice effective for the health information we already have about you, as well as any information we create or get in the future. We will give you a copy of any new notices within 60 days. We will also post a copy of the current notice on our website.

If you believe your privacy rights have been violated, you may file a complaint by writing to:

Secretary of Health and Human Services
200 Independence Ave. SW
Washington DC 20201
877-696-6775

You need to do this within 180 days of when the problem that caused concern happened. There will be no punishment for filing a complaint.

To file a complaint with our office, contact our office managers, Trisha Boman or Kim Coder.