

## OUR PRIVACY RESPONSIBILITIES

The DD Board is required by law to:

- Maintain the privacy of your personal information
- Provide this notice that describes the ways we may use and share your personal information
- Follow the terms of the notice currently in effect.

**We reserve the right to make changes to this notice at any time and make the new privacy practices effective for all information we maintain.**

Current notices will be posted in the DD Board facilities and on our website, [www.butlerdd.org](http://www.butlerdd.org).

You may also request a copy of any notice from the DD Board Privacy Officer.

## YOUR INDIVIDUAL RIGHTS

You have the right to:

- Receive notifications of breaches of your unsecured protected health information. You will receive such notifications if any occur.
- Request restrictions on how we use and share your personal information. We will consider all requests for restrictions carefully but are not required to agree to any restriction.\*
- Require restrictions on certain disclosures of protected health information to a health plan when you have paid out of pocket in full for the health care item or service.\*
- Request that we use a specific telephone number or address to contact you.
- Inspect and copy your personal information, including service, medical and billing records.\*
- Request corrections or additions to your personal information. You must give the reasons for wanting the change.\*
- Request an accounting of certain disclosures of your personal information made by us within the last six years prior to your request.
- Request your records prior to destruction, when they are no longer of administrative value.

Requests marked with a star (\*) must be made in writing. Contact the DD program supporting you for the appropriate form for your request.

## OUR ORGANIZATION

This notice describes the privacy practices of the Butler County Board of DD. This notice also describes the privacy practices of persons or entities which have signed a contract with the DD Board and which are acting as business associates, and have promised to follow the same rules of confidentiality. (Please contact non-business associate providers directly regarding their practices.)

### The DD Board includes

Janet Clemmons Center, Liberty Fairfield office, as well as the DD Board employees and volunteers at those facilities.

### Contact Us

If you would like further information about your privacy rights, are concerned that your privacy rights have been violated, or disagree with a decision that we made about access to your personal information, contact the DD Board: Karen Pike

Administrative Assistant to the Superintendent  
282 N. Fair Avenue  
Hamilton, Ohio 45011  
513.785.2816  
or E-mail: [klpike@butlerdd.org](mailto:klpike@butlerdd.org)

We will investigate all complaints and will not retaliate against you for filing a complaint.

You also may file a written complaint with either

- The Secretary of the U.S. Department of Health and Human Services at 200 Independence Avenue SW, Washington D.C., 20201 or call 1-877-696-6775 or
- The Office for Civil Rights, U.S. Department of Health and Human Services at 200 Independence Avenue SW, Room 509F, HHH Building, Washington D.C., 20201 or call OCR's hotline – voice at 1-800-368-1019, or e-mail at [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov).
- Attorney General for State of Ohio 30 E. Broad St., 17<sup>th</sup> Floor Columbus OH 43215 or by E-mail at [ohioattorneygeneral.gov/Contact](mailto:ohioattorneygeneral.gov/Contact)

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## BUTLER COUNTY BOARD OF DEVELOPMENTAL DISABILITIES

## NOTICE OF PRIVACY PRACTICES

EFFECTIVE: APRIL 14, 2003

REVISED: FEBRUARY 18, 2004

REVISED: JANUARY 12, 2010

REVISED: JANUARY 18, 2011

REVISED: SEPTEMBER 23, 2013

REVISED: JULY 15, 2014

REVISED: MARCH 27, 2017

REVISED: NOVEMBER 21, 2017

*This notice describes how personal information about you may be used and disclosed and how you can get access to this information.*

*Please review it carefully.*

## PRIVACY PROMISE

The DD Board understands that your personal information needs to be kept private. Protecting your personal information is important. We follow strict federal and state laws that require us to keep your personal information confidential.

## HOW WE USE YOUR PERSONAL INFORMATION

When you receive services from the DD Board, we may use your personal information for such activities as providing you with services, billing for services, and conducting our normal board business known as health care operations.

If you have chosen a personal representative and have agreed to let your personal representative obtain your personal information, we will provide the information to your personal representative. If you have a guardian, we will provide the information to your guardian.

### *Examples of how we use your information include:*

**Treatment** - We keep records of the care and services provided to you within the DD Board. For example, your service and support administrator keeps notes on all contacts made in coordinating and arranging for services. DD Board staff may share your personal information while helping to develop your service plan.

If DD Board staff want to share your personal information with anyone who is not employed by the DD Board, you must give them written permission first. However, we may disclose your identity without your permission if necessary for your treatment or to obtain payment for services.

Some personal records, including confidential communications with a mental health professional and substance abuse records, may have additional restrictions for use and disclosure under state and federal law.

**Payment** – We keep records that include payment information and documentation of the services provided to you. Your information may be used to obtain payment for your services from Medicaid, insurance or other sources. For example, we may disclose personal information about the services

provided to you to confirm your eligibility for Medicaid and to obtain payment from Medicaid. The DD Board may use your personal information to determine the amount and type of Medicaid services you need and send this information to the proper state department.

**Health Care Operations** – We use personal information to improve the quality of care, train staff, manage costs, conduct required business duties, and make plans to better serve you and other individuals enrolled in the DD Board. For example, we may use your personal information to evaluate the quality of treatment and services provided by our service staff.

## OTHER SERVICES WE PROVIDE

We may also use your personal information to:

- Determine whether you are eligible for services from the DD Board
- Recommend to you service alternatives and other possible benefits
- Access various supports through the Southwestern Ohio Council of Governments & behavior supports through Dynamic Pathways
- Tell you about other service providers who may be able to help you
- To allow the DD Board to review direct service contracts
- To keep waiting lists compliant with Ohio law
- Allow local, state, federal agencies to monitor your services
- To investigate incidents affecting health and safety, to report these kind of incidents and to take steps to protect your health and safety
- To allow the DD Board to prepare reports required by the Ohio Department of Developmental Disabilities and the Ohio Department of Job and Family Services
- Remind you of an appointment \*
- Contact you for assistance in passing levies and other fundraising activities\*
- Send you information on research opportunities, DD Board leisure and self-advocacy activities and newsletters\*
- Communicate by transient text and live video consult with people you permit to share your information\*

NOTE: Services marked with a star (\*) will not occur if you tell the DD Board staff you do not want it.

## MEDIA COVERAGE

When the DD Board conducts activities which may be covered by the media, who may take pictures or record participants, you can request to be excluded from media coverage by asking any staff member.

## SHARING YOUR PERSONAL INFORMATION

There are limited situations when we are permitted or required to disclose personal information without your signed consent. These situations are:

- We may disclose your identity if necessary for your treatment or to obtain payment for services
- To protect victims of abuse, neglect, or domestic violence; our staff are mandated reporters of suspected abuse/neglect to Office of Incident Review, DODD, Adult Protective Services and Children's Services
- To reduce or prevent a serious threat to public health and safety
- For health oversight activities such as investigations, audits, and inspections
- For lawsuits and similar proceedings
- For public health purposes such as reporting communicable diseases, work-related illnesses, or other diseases and injuries permitted by law; reporting births and deaths, and reporting reactions to drugs and problems with medical devices.
- When required by law
- When requested by law enforcement as required by law or court order
- To coroners, medical examiners, and funeral directors
- For organ and tissue donation
- For workers' compensation or other similar programs if you are injured at work and are covered by workers' compensation or other similar programs
- For specialized government functions such as intelligence and national security

**All other uses and disclosures, not described in this notice, require you to sign an authorization.** You may revoke your authorization at any time with a written statement.



Acknowledgment of Receipt of Notice

I have received a copy of the privacy notice from the Butler County Board of DD. Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Individual Receiving Notice

Name of Person Enrolled

Date

I do not want my personal information shared for the other services we provide which have an \* (please list which services above)