

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.

Treatment. Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of your vitals and medical history taken at the time of your transport, along with an assessment of your condition may be provided to the hospital upon your arrival at the emergency room.

Payment. Your health information may be used to seek payment from your health plan, from other sources of coverage such as an automobile insurer, or from credit card companies that you may use to pay for services. For example, your health plan may request and receive information on dates of service, the services provided, and the medical condition being treated.

Health care operations. Your health information may be used as necessary to support the day-to-day activities and management of Gold Cross Services, Inc.. For example, information on the services you received may be used to support budgeting and financial reporting, and activities to evaluate and promote quality.

Law enforcement. Your health information may be disclosed to public health agencies to support government audits and inspections, to facilitate law-enforcement investigations, and to comply with government investigations, and to comply with government-mandated reporting.

Public health reporting. Your health information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the state's public health department.

Other uses and disclosures other than those listed above require your authorization.

Individual Right

- The right to request restrictions on the use and disclosure of your protected health information
- The right to receive confidential communications concerning your medical condition and treatment
- The right to inspect and copy your protected health information

- The right to amend or submit corrections to your protected health information
- The right to receive a printed copy of this notice
- The right to receive an accounting of how and to whom your protected health information has been disclosed

Gold Cross Services, Inc. Duties:

We are required by law to maintain the privacy of your protected health information and to provide you with this notice of privacy practices.

We also are required to abide by the privacy policies and practices that are outlined in this notice.

Right to revise Privacy Practices:

As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in federal and state laws and regulations. Upon request, we will provide you with the most recently revised notice. The revised policies and practices will be applied to all protected health information we maintain.

Requests to Inspect Protected Health Information:

You may generally inspect or copy the protected health information that we maintain. As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting Kris Peterson. Your request will be reviewed and will generally be approved unless there are legal or medical reasons to deny the request.

Complaints:

If you would like to submit a comment or complaint about our privacy practices, or if you feel your rights have been violated, please address your concerns to:

Kris Peterson
Gold Cross Services, Inc.
1717 S Redwood Rd.
Salt Lake City UT 84104
(801-975-4351)
kris@goldcrossambulance.com

Effective Date

This notice is effective on or after April 14, 2003

