

Notice of Privacy Practices

Your Information. Your Rights. Our Responsibilities.

This notice describes how NYOH may use medical information about you and how you can access this information. Please review this notice carefully. You may request a full copy of this notice or view it on our website.

You have the right to:

- Receive a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Request a list of whom we've shared your information with
- Receive a copy of this privacy notice
- Choose someone to act on your behalf
- File a complaint if you believe your privacy rights have been violated

You have the right to choose how and when we may share information, including:

- Telling family and friends about your condition
- Providing disaster relief
- Including you in a hospital directory
- We may use and share your information in these circumstances:
 - During your course of treatment
 - To run our practice
 - Billing for your services
 - Helping with public health and safety issues
 - Conducting research
 - Complying with local, state and/or federal laws

- Providing mental health care
- Marketing our services and selling your information
- Raising funds
- Responding to organ and tissue donation requests
- Working with a medical examiner or funeral director
- Addressing workers' compensation, law enforcement and or governmental requests
- Responding to lawsuits and legal actions

Nondiscrimination and Accessibility Requirements

Discrimination is Against the Law

New York Oncology Hematology complies with applicable federal civil rights laws and does not discriminate or treat individuals differently based on race, color, national origin, age, disability, or sex.

New York Oncology Hematology provides:

Free aids and services to people with disabilities to communicate effectively with us, such as:

Written information in other formats (large print, audio, • Qualified sign language interpreters accessible electronic formats, other formats)

Free language services to people whose primary language is not English, such as:

Qualified interpreters

Information written in other languages

If you need these services or believe NYOH has discriminated based on race, color, national origin, age, disability, or sex, you may contact the NYOH Compliance Manager to request assistance or file a grievance. You can file a grievance in person, by mail or email. If you need help filing a grievance, NYOH's Compliance Manager is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office of Civil Rights:

Electronically: Office for Civil Rights Complaint Portal at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

By mail: U.S. Department of Health and Human Services • 200 Independence Avenue, SW • Room 509F, HHH Building • Washington, DC 20201 **Phone:** (800) 368-1019 • (800) 537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.