NOTICE OF PRIVACY PRACTICES

Northwest Michigan Health Services, Inc.

Effective Date: 2/16/2026

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.

Northwest Michigan Health Services, Inc. ("NMHSI," "we," "our," or "us") is committed to protecting the privacy of your health information. This Notice describes how we may use and disclose your protected health information (PHI), your rights regarding that information, and our legal responsibilities concerning your PHI.

OUR RESPONSIBILITIES

We are required by law to:

- Maintain the privacy and security of your protected health information.
- Provide you with this Notice of Privacy Practices.
- Follow the duties and privacy practices described in this notice.
- Notify you if a breach occurs that may have compromised the privacy or security of your information.

We reserve the right to change the terms of this Notice and make the revised notice effective for all protected health information we maintain. Updated notices will be available at our facilities and on our website.

HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

For Treatment

We may use and disclose your health information to provide, coordinate, or manage your healthcare and related services. **Example:** Your primary care provider may share information with a specialist, hospital, pharmacy, laboratory, or another healthcare provider involved in your care. ***"NMHSI does not share, sell, rent, or lease its customer lists or mobile opt-in data to third parties for marketing purposes."***

For Payment

We may use and disclose your information to obtain payment for healthcare services. **Example:** We may submit information to your insurance company to obtain authorization or payment for services provided.

For Healthcare Operations

We may use and disclose information to support business activities necessary to operate our health center.

Examples include:

- Quality assessment and improvement activities
- Staff training and education
- Medical reviews and audits
- Compliance and accreditation activities
- Business planning and administration

OTHER USES AND DISCLOSURES PERMITTED OR REQUIRED BY LAW

We may disclose your information:

To Individuals Involved in Your Care. To family members, friends, or caregivers involved in your care or payment for your care when appropriate.

For Appointment Reminders. To contact you regarding appointments, follow-up care, test results, or treatment options.

For Public Health Activities. To public health agencies for disease prevention, reporting, investigations, and other public health purposes.

For Health Oversight Activities

To government agencies conducting audits, investigations, inspections, or licensure activities.

For Judicial or Administrative Proceedings. When required by court order, subpoena, or other lawful process.

For Law Enforcement Purposes. When permitted or required by law.

For Research. Under certain circumstances and with appropriate protections.

To Avert a Serious Threat. When necessary to prevent a serious threat to health or safety.

As Required by Law. When federal, state, or local law requires disclosure.

Workers' Compensation. As authorized by workers' compensation and similar programs.

Organ and Tissue Donation. To organizations involved in procurement, banking, or transplantation.

YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION

You have the right to:

Get a Copy of Your Records. You may inspect and obtain a copy of your health records and billing records, subject to limited exceptions.

Request a Correction. If you believe information in your record is incorrect or incomplete, you may request an amendment.

Request Confidential Communications. You may ask us to contact you in a specific way or at a specific location. **Example:** Send mail to a post office box rather than your home address.

Request Restrictions. You may request restrictions on certain uses or disclosures of your information.

While we are not required to agree to most requested restrictions, we will comply when required by law.

Receive an Accounting of Disclosures. You may request a list of certain disclosures we have made of your protected health information.

Get a Copy of This Notice. You may request a paper copy of this Notice at any time, even if you agreed to receive it electronically.

Choose Someone to Act for You. If someone has legal authority to act for you, that person may exercise your rights consistent with applicable law.

OUR USES THAT REQUIRE YOUR WRITTEN AUTHORIZATION

We will obtain your written authorization before:

- Using or disclosing information for most marketing purposes.
- Selling your health information.
- Using or disclosing psychotherapy notes when authorization is required by law.
- Any other use or disclosure not described in this Notice.

You may revoke an authorization at any time in writing, except to the extent we have already acted on it.

ADDITIONAL PROTECTIONS FOR SUBSTANCE USE DISORDER (SUD) TREATMENT RECORDS

Northwest Michigan Health Services, Inc. (NMHSI) provides substance use disorder treatment services. Certain records related to SUD diagnosis, treatment, referral for treatment, or payment for treatment may be protected by federal confidentiality laws and regulations, including 42 U.S.C. § 290dd-2 and 42 CFR Part 2. These protections may apply in addition to HIPAA. [hhs.gov]

Uses and Disclosures of SUD Records

NMHSI may use and disclose protected SUD treatment records as permitted or required by HIPAA, 42 CFR Part 2, and applicable state law. When required by law, your written consent will be obtained before disclosing records protected by Part 2. We may also use or disclose these records without your authorization in limited circumstances permitted by law, including certain treatment, payment, healthcare operations, public health, research, audit and evaluation, judicial, and law enforcement activities. [hhs.gov]

Right to Revoke Consent

When disclosure of your Part 2 records is based on your consent, you may revoke that consent in writing at any time, except to the extent that action has already been taken in reliance on your consent.

Complaints Regarding SUD Records

You have the right to file a complaint if you believe your rights regarding substance use disorder treatment records have been violated. You may contact NMHSI's Privacy Officer or file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. NMHSI will not retaliate against you for filing a complaint.

Prohibition on Retaliation. NMHSI will not deny treatment, payment, enrollment, eligibility for benefits, or access to services because you choose to exercise your privacy rights.

MICHIGAN MENTAL HEALTH RECORD CONFIDENTIALITY

In addition to HIPAA and 42 CFR Part 2, Michigan law provides special protections for mental health records and information obtained during the provision of mental health services. Information contained in a mental health record, and other information acquired while providing mental health services, is confidential and may only be disclosed as permitted or required by law. [legislature.mi.gov], [legislature.mi.gov]

Additional Protection of Behavioral Health Information. Behavioral health and mental health records maintained by NMHSI may be subject to confidentiality requirements that are more restrictive than HIPAA. In some circumstances, your written authorization may be required before these records can be disclosed for purposes other than treatment, payment, healthcare operations, care coordination, or other disclosures specifically authorized by law. [michigan.gov], [legislature.mi.gov]

Mental Health Records and Patient Rights. If you receive mental health services from NMHSI, you have rights under the Michigan Mental Health Code, including rights related to:

- Confidentiality of your mental health information.
- Access to your records as permitted by law.
- Requesting amendments to your records.
- Filing complaints regarding privacy or recipient rights.
- Receiving services free from retaliation for exercising your legal rights. [michigan.gov], [legislature.mi.gov]

Disclosure Limitations. NMHSI will disclose mental health information only as permitted by HIPAA, the Michigan Mental Health Code, court order, patient authorization, or other applicable legal authority. When information is disclosed, NMHSI will make reasonable efforts to limit disclosure to information necessary for the intended purpose. [legislature.mi.gov], [law.cornell.edu]

INTEGRATED CARE AND INFORMATION SHARING

NMHSI provides integrated primary care, behavioral health, and substance use disorder services. To support coordination of care, members of your treatment team may share information as permitted by HIPAA, 42 CFR Part 2, the Michigan Mental Health Code, and other applicable laws. When consent is required, NMHSI will obtain your authorization before sharing information.

For certain behavioral health and substance use disorder information, NMHSI may use the Michigan Behavioral Health Standard Consent Form or another legally sufficient authorization when required by law. [michigan.gov]

BREACH NOTIFICATION

If NMHSI becomes aware of a breach involving unsecured protected health information that requires notification under federal or state law, we will notify affected individuals without unreasonable delay and in accordance with applicable legal requirements.

COMPLAINTS and CONTACT INFORMATION

If you believe your privacy rights have been violated, you may file a complaint with Northwest Michigan Health Services, Inc. or with the U.S. Department of Health and Human Services Office for Civil Rights. You will not be retaliated against for filing a complaint.

Contact Person for Privacy Concerns or questions about your privacy rights.

Privacy Officer, Northwest Michigan Health Services, Inc., 10767 E Traverse Hwy., Traverse City, MI 49687

Phone: 231-947-1112

Email: ktharp@nmhsi.org

Website: www.nmhsi.org

U.S. Department of Health and Human Services

Office for Civil Rights

https://www.hhs.gov/ocr