Ko-Kwel
Wellness Centers

Coos Bay
630 Miluk Drive
Coos Bay, Oregon 97420
Phone (541) 888-9494

Eugene
2401 River Road
Eugene, Oregon 97404
Phone (541) 916-7025

Notice of Privacy Practices

Effective date: April 1, 2004 (last revised June 17, 2026)

Your Information **Your Rights** **Our Responsibilities**	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.**

Your Rights	**You have the right to:** • Get a copy of your paper or electronic medical record • Request a correction of your paper or electronic medical record • Request confidential communication • Ask us to limit the information we share • Get a list of those with whom we've shared your information • Get a copy of this privacy notice • Choose someone to act for you • File a complaint if you believe your privacy rights have been violated
Your Options	**We only share your information, by your request, in these specific cases:** • Talking with family and friends about your condition • Providing disaster relief • Disclosing information about mental health care • Marketing services • Fundraising
Our Uses and Disclosures	**We may use and share your information as we:** • Treat you • Run our organization • Bill for your services • Help with public health and safety issues • Conduct research • Comply with the law • Respond to organ and tissue donation requests • Work with a medical examiner or funeral director • Address workers' compensation, law enforcement, and other government requests • Respond to lawsuits and legal actions • Health Information Exchanges

Our Commitment to Your Privacy

Our practice is dedicated to maintaining the privacy of your individually identifiable health information (also called protected health information, or PHI). In conducting our business, we will create records regarding you and the treatment and services we provide to you. We are required by law to maintain the confidentiality of health information that identifies you. We are also required by law to provide you with this notice of our legal

duties and the privacy practices that we maintain in our practice concerning your PHI. Under applicable law, we must follow the terms of the Notice of Privacy Practices that we have in effect at the time.

The terms of this notice apply to all records containing your PHI that are created or retained by our practice. We reserve the right to revise or amend this Notice of Privacy Practices. Any revision or amendment to this notice will be effective for all of your records that our practice has created or maintained in the past, and for any of your records that we may create or maintain in the future. Our practice will post a copy of our current Notice of Privacy Practices in a visible location our facilities at all times, and you may request a copy of our most current Notice at any time.

If you have questions about this notice, please contact:

Ko-Kwel Wellness Center-KWC Privacy Officer
630 Miluk Drive, Coos Bay, Oregon 97420
541-888-9494

For all Notice of Privacy Practices requirements for PHI, reference HIPAA regulations in 45 CFR 164.520(b).

In addition to the privacy protections afforded to all medical records under HIPAA, the confidentiality of substance use disorder records are protected by another federal law referred to as Part 2. Ko-Kwel Wellness Center operates a Part 2 covered program. Our Opioid Treatment Program (OTP) follows the confidentiality protections of 42 CFR Part 2 for substance use disorder-related records. In some circumstances, 42 CFR Part 2 is more restrictive, or protective of your information, than HIPAA. When required, we honor the more protective requirements.

Your Rights

When it comes to your health information, you have certain rights.
This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. You must submit your request in writing. We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to amend your medical record

- You can ask us to amend health information about you that you believe is incorrect or incomplete. To request an amendment, your request must be made in writing. You must provide us with a reason that supports your request for amendment. Our practice may deny your request if you ask us to amend information that is in our opinion: (a) accurate and complete; or (b) not part of the PHI kept by or for the practice; (c) not part of the PHI which you would be permitted to inspect and copy; or (d) not created by our practice, unless the individual or entity that crated the information is not available to amend the information.

Request confidential communication

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests.

Get a copy of this privacy notice

- You are entitled to receive a paper copy of our Notice of Privacy Practices, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Ask us to limit what we use or share

- You have the right to request a restriction in our use or disclosure of your PHI for treatment, payment, or healthcare operations. Additionally, you have the right to request that we restrict our disclosure of your PHI to only certain individuals involved in your care or the payment for your care such as family members and friends. We are not required to agree to your request, however, if we do agree, we are bound by our agreement except when otherwise required by law, in emergencies, or when the information is necessary to treat you. In order to request a restriction in our use or disclosure of your PHI, you must make your request in writing.

Text messaging for communication

- We collect mobile phone numbers to communicate with patients via SMS and/or RCS text messages for purposes such as appointment reminders, billing notifications, and care coordination. By providing your mobile number, you acknowledge that you may receive an initial text (SMS) message from us before you choose to opt out.
- Your mobile number will not be sold or shared with third parties or affiliates for marketing or promotional purposes. We will not use your number for unrelated marketing without your express written consent.
- Providers and support staff use text messaging to communicate with patients for purposes such as appointment reminders, billing notifications, and care coordination. You are not required to opt in as a condition of receiving care. Participation is voluntary. However, opting out may prevent us from sending you timely updates regarding your care. Message frequency may vary. Message and data rates may apply.* Carriers are not liable for delayed or undelivered messages.
- Text messages sent via SMS and RCS channels are not fully secure and may not be HIPAA-compliant; however, we take reasonable precautions to safeguard your privacy by restricting the content of these messages to non-sensitive notifications. Any messages containing detailed Protected Health Information (PHI) will be sent via a separate, secure messaging channel. You may opt out of receiving text messages at any time by replying "STOP." You will receive a final confirmation text to verify you have opted out. No further messages will be sent. If you would like to rejoin, you can authorize us to restart by texting "START." For help, reply "HELP" or contact your Provider's office for assistance.

- **Health Information Exchange**
  Ko-Kwel Wellness Center may share information that we obtain or create about you with other health care providers or other health care entities, such as your health plan or health insurer, as permitted by law, through Health Information Exchanges (HIEs) in which we participate in. The sharing of your health information is to provide faster access, better coordination of care, and assist providers and public health officials in making more informed decisions. We may share information about you electronically with other organizations. Individual information that requires a signed authorization by you for release through HIE will not be made available to an HIE without your authorization, unless we are required by law to submit information about you. If you do not want information about you to be shared in this way and would like to opt out, please contact the KWC Privacy Officer for the Opt Out form.

Get a list of those with whom we've shared information

- All of our patients have the right to request an accounting of disclosures. An accounting of disclosures is a list of certain non-routine disclosures our practice has made of your PHI for purposes not related to treatment, payment or operations. Use of your PHI as part of the routine patient care in our practice is not required to be documented – for example, the doctor sharing information with the nurse; or the billing department using your information to file your insurance claim. In order to obtain an accounting for disclosures, you must submit your request in writing.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- If you believe your privacy rights have been violated, you may file a complaint in writing with our practice by contacting our clinical services administrator or you can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/. We will not retaliate against you for filing a complaint. To file a complaint with our practice, contact:

Ko-Kwel Wellness Center-KWC Privacy Officer
630 Miluk Drive, Coos Bay, Oregon 97420
541-888-9494

Additional rights of OTP clients

KWC-Opioid Treatment Program (OTP) is a federally designated as a Part 2 program under 42 CFR Part 2. We maintain strict confidentiality protections for individuals receiving substance use disorder services, in accordance with federal and state laws. Suspected Part 2 violations may be reported to:

Ko-Kwel Wellness Center-KWC Privacy Officer
630 Miluk Drive, Coos Bay, Oregon 97420
541-888-9494

or

U.S. Department of Health and Human Services
Office for Civil Rights
200 Independence Avenue, S.W.,
Washington, D.C. 20201

Substance Abuse and Mental Health Services Administration (SAMHSA)
(240) 276-2700

Your Choices

Right to provide an authorization for other uses and disclosures.
Our practice will obtain your written authorization for uses and disclosures that are not identified by this notice or permitted by applicable law. Any authorization you provide to us regarding the use and disclosure of your PHI may be revoked at any time in writing. After you revoke your authorization, we will no longer use or disclose your PHI for the reasons described in the authorization.

There are limited circumstances under which we may acknowledge the presence of a patient or disclose information about them to individuals outside of Ko-Kwel Wellness Center without their permission, including:

- Medical emergencies
- Reporting crimes on premises
- To qualified service organizations
- To report suspected child abuse and neglect
- For research purposes
- For Audits and evaluations
- In response to court orders authorizing use and disclosure.
- For communication between Part 2 Program and those who have administrative control over the Part 2 Program
- In bona fide medical emergencies.

Our Uses and Disclosures

How do we typically use or share your health information?
We typically use or share your health information in the following ways.

Treat you
- We can use your health information and share it with other professionals who are treating you. Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization
- We can use and share your health information to run our practice, improve your care, and contact you when necessary. Example: We use health information about you to manage your treatment and services.

Bill for your services
- We can use and share your health information to bill and get payment from health plans or other entities. Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?
We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:

ww.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues
We can share health information about you for certain situations such as:
- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Support research: We can use or share your information for health research.

Comply with the law: We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests: We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director: We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests
We can use or share health information about you:
- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions: We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Self-consenting minors: Providers may disclose health information to a minor's parent/guardian without the minor's consent if provided using best clinical judgement in deciding whether to share information with the parent or guardian (ORS 109.650).

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and provide you a copy.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.
- We ensure that all third-party vendors and business associates who handle your PHI meet HIPAA confidentiality and security standards.
- KWC staff members receive regular training on privacy policies, security practices, and updates to HIPAA regulations to ensure your information is handled appropriately.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Notice Regarding the Use of Technology

Ko-Kwel Wellness Center is part of an organized health care arrangement including participants in OCHIN. A current list of OCHIN participants is available at www.OCHIN.org. As a business associate of Ko-Kwel Wellness Center, OCHIN supplies information technology and related services to Ko-Kwel Wellness Center and other OCHIN participants. OCHIN also engages in quality assessment and improvement activities on behalf of its participants. For example, OCHIN coordinates clinical review activities on behalf of participating organizations to establish best practice standards and access clinical benefits that may be derived from the use of electronic health record systems. OCHIN also helps participants work collaboratively to improve the management of internal and external patient referrals. Your health information may be shared by Ko-Kwel Wellness Center with other OCHIN participants when necessary for health care operation purposes of the organized health care arrangement.

We use encryption and secure systems to protect electronic PHI during storage and communication. While we take measures to safeguard transmitted data, certain unencrypted communications may not be entirely secure. We use appropriate encryption methods and secure protocols whenever possible to ensure the integrity and confidentiality of your PHI.

Telehealth Privacy Practices

If you receive care via telehealth, we will take steps to ensure your privacy is protected during virtual visits. You have the right to understand how your information is used and shared during telehealth sessions. We will obtain your consent and explain the technology used, including any limitations.

Use of Artificial Intelligence (AI) in Healthcare

We may use AI tools to assist in clinical decision-making, diagnostics, and administrative tasks. AI does not replace human decision-making. All AI-assisted recommendations are reviewed by qualified healthcare professionals. If you have concerns about AI involvement in your care, please discuss them with your provider.

- AI systems are designed to ensure PHI remains confidential and secure.
- Patients are informed when AI processes their PHI.

- AI systems undergo regular audits to ensure compliance with privacy regulations.
- AI tools do not make autonomous clinical decisions.
- Sensitive data such as reproductive health, SUD, and psychotherapy notes receive the same level of protection.

Patient Consent for Future Sharing of 42 CFR, Part 2 Protected Records
Substance Use Disorder (SUD) treatment records may be shared with Ko-Kwel Wellness Center's Primary Care or Behavioral Health Care team in order to coordinate treatment, payment, and healthcare operations.

Changes to the Terms of this Notice
We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, posted in our office, and on our web site.

To use any of the privacy rights listed above you can contact:

KWC Privacy Officer
Ko-Kwel Wellness Center
630 Miluk Drive, Coos Bay, Oregon 97420
541-888-9494

ACKNOWLEDGMENT OF RECEIPT OF NOTICE

❑ I have been given a copy of the **KWC Notice of Privacy Practices** and understand how my health information may be used and disclosed. I further understand how I can get access to my individually identifiable health information.

❑ I understand Substance Use Disorder (SUD) treatment records may be shared with Ko-Kwel Wellness Center's Primary Care or Behavioral Health Care team in order to coordinate treatment, payment and healthcare operations.

❑ I have declined a copy of the KWC Notice of Privacy Practices.

Patient's Printed Name

Patient's Signature Date

Name of Parent or Guardian of Minor Patient

Signature of Parent or Guardian of Minor Patient Date