Three Rivers Hospital
Notice of Privacy Practices
Effective February 13, 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.**

Your Rights

When it comes to your personal health information (PHI), you have certain rights. This section explains your rights and some of our responsibilities to help you. These rights are as follows:

Receive a paper/electronic copy of your medical record

- In most cases, you can see or get a paper/electronic copy of your medical record
- Any requests are usually process within 15 days of your request. If you request a copy, we may charge a cost-based fee for the copying, mailing, or other supplies associated with your request

Request corrections to your medical record

- If you believe information in your medical record is incorrect or vital information is missing, you have the right to request in writing that we make a correction or add information
- We will make every effort to fulfill your request, and a copy of your request will be added to your medical record. If your request is denied, we will say why in writing within 21 days

Request and receive confidential communication

- You can ask us to contact you in a specific way (i.e., home or office only) or to send mail to a different address
- Requests must be in writing to the address listed at the bottom of this notice. We will say "yes" to all reasonable requests

Limit the information we use or share

- You may request in writing that we not use or disclose your PHI for treatment, payment, and/or operational activities, except when required by law, or in emergency circumstances. We are not required to agree to your request, but we will provide you with a prompt written notice of our decision
- We will say yes to all requests for which out-of-pocket payment has been received in full, unless the law requires us to share that information

Request and receive an accounting of disclosures

- You can ask for a listing (accounting) of the history of when and to whom your PHI was disclosed if the disclosure occurs outside the scope of treatment, payment, and healthcare operations; and is not made because of a signed authorization from you
- We will provide a free listing (accounting) per year and will charge a reasonable cost-based fee for any other requests made within 12 months
- Requests are usually processed within 15 days

File a complaint

- If you believe your privacy rights have been violated and wish to file a complaint, please do so by contacting our Privacy Officer at (509) 645-3396 or privacyofficer@trhospital.net
- You may also contact the U.S. Department of Health and Human Services Office for Civil Rights
- We will not retaliate against you for filing a complaint

Appoint someone as your personal representative

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise choices about your PHI
- We will make sure this person has the authority to act on your behalf before we take any action

Get a copy of this privacy notice

- You have the right to a copy of this notice and to discuss it with our Privacy Officer if you have questions by calling or emailing the contact on the bottom of this privacy notice.

Your Choices

When it comes to your health information, you have choices. If you have a clear preference regarding how we share your PHI in the situations described below, please let us know:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation

In the event you are not able to tell us your preferences, for example if you are unconscious, we may share your PHI if we believe it is in your best interest. We may also share your PHI when needed to lessen a serious and imminent threat to your health or safety.

Our Uses and Disclosures

We typically use and disclose your PHI without written consent under the following circumstances. When doing so, Three Rivers Hospital will always follow the "**Minimum Necessary**" standard. Any uses and disclosures not covered by this notice (i.e., psychotherapy notes, marketing, and sale of PHI) will be made **ONLY** as allowed or required by law or with your written authorization.

Treat you

- We can use your PHI and share it with other professionals who are treating you. For example, the doctor treating you for a specific injury can ask another doctor about your overall health condition
- We may disclose your PHI when we contact you to remind you of an appointment and to communicate necessary information about your appointment
- We may disclose or grant access to your PHI to other health providers to support the continuation of your care

Bill for your services

- We can use and share your PHI to bill and get payment from health plans or other entities. For example, we provide PHI about you to your health insurance plan so it will pay for your services. Please contact the Patient Financial Services Department if you have any questions

Run our organization

- We can use and share your PHI to run our practice, improve your care, and contact you when necessary. For example, when managing your treatment and services
- We can use your PHI to contact you regarding quality and satisfaction assessments
- We may use and share your PHI with Business Associates as part of our ongoing operations

Comply with law enforcement

- We will share your PHI if state or federal laws require it, including the Department of Health and Human Services to proof that we are complying with federal privacy law

Help with public health and safety issues

We can share your PHI when:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing and/or reducing a serious threat to anyone's health or safety
- Reporting to the State Cancer Registry (WAC 246-102)
- Reporting to the state Trauma Registry for traumatic injuries (RCW 70.168.090)

Address workers' compensation, law enforcement, and other government requests. We can share PHI about you in situations related to:

- State workers compensation laws
- Law enforcement purposes, including correctional institutes
- Public health authorities
- Judicial or administrative proceedings such as court orders or subpoenas
- Health oversight activities such as auditing and licensure
- Specialized Government Functions such as military, national security, and presidential protective service.

Respond to organ and tissue donation requests

- We can share your PHI with organ or tissue procurement organizations about registered donor patients

Assist coroners, medical examiners & funeral directors

- We can share your PHI with a coroner, medical examiner, or funeral director when a patient dies while in our care

Respond to lawsuits and legal actions

- We can share your PHI in response to a court or administrative order, or in response to a subpoena

How else can we use or share your health information?

- In all cases, including those listed above if we have your substance use disorder records, subject to 42 CFR Part 2, we cannot use/share them in civil, criminal, administrative, or legislative investigations or proceedings against you without (1) your written consent or (2) a court order and subpoena

Charity Care

Three Rivers Hospital offers Charity Care to eligible patients to help ensure access to needed medical care, regardless of their ability to pay.

Our Charity Care Program gives prorated discounts to qualified uninsured and underinsured patients who are not eligible for medical assistance through the state or country health insurance programs, and who are within 200% of the national poverty guidelines. Eligibility is based on family size and income.

Medicare patients without secondary insurance may also be eligible for the Charity Care Program.

Contact our Financial Counselor and **start your application today!**

Minors and Privacy

When a minor has legally consent to treatment, they also have the right to control the release of information related to that care. Their signature may be required to release information about:

- Tests and/or treatment for sexually transmitted diseases for patients 14 years of age or older (RCW 70.24.110)
- Birth control services at any age (RCW 9.02.100)
- Outpatient and/or Inpatient mental health services, substance use disorder (SUD) treatment, or withdrawal management for patients 13 years of age or older (RCW 71.34.530)

Our Responsibilities

- We are required by law to maintain the privacy and security of your PHI
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your PHI
- We must follow the duties and privacy practices described in this notice and give you a copy of it
- We will not use or share your PHI 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 the Privacy Officer know in writing if you wish to revoke any of your authorized uses and disclosures to your PHI

Changes to the Terms of this Notice

The terms of this notice are subject to change to mirror any changes in laws and regulations pertaining to the privacy and security of our patients' health information. Any changes we make will apply to all information we have about you; and the new notice will be available upon request, in the admitting office, and on our website.

Need more information or to report a problem?

If you have any questions, or wish to submit a request, comment, or complaint about our privacy practices, you can do so by contacting our Privacy Officer / Civil Rights Coordinator at (509) 645-3396 or by sending a letter outlining your request or concerns to:

Three Rivers Hospital
Attn: Privacy Officer
P.O. Box 577
Brewster, WA. 98812
privacyofficer@trhospital.net

Nondiscrimination Disclosure

Three Rivers Hospital complies with applicable laws and does not discriminate on the basis of race, color, national origin, age, creed, religion, marital or immigration status, veteran or military status, disability, or sex (including pregnancy, sexual orientation, gender identity, and sex characteristics), in covered health programs or activities, and any other status protected by law.

For your benefit, this Notice of Privacy Practices is on our website where you can find more information on other health care services we provide:

www.threeriversshospital.net