



**WIN RECOVER  
PATIENT NOTICE  
EFFECTIVE 12/23/2025**

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

**If you have any questions about this notice, please contact Peggy Joyner, Acting Privacy Officer, Hamilton Center, Inc., PO Box 4323, Terre Haute, Indiana 47804 (812) 231-8257**

**THIS NOTICE DESCRIBES:**

- HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED
- YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION
- HOW TO FILE A COMPLAINT CONCERNING A VIOLATION OF THE PRIVACY OR SECURITY OF YOUR HEALTH INFORMATION, OR OF YOUR RIGHTS CONCERNING YOUR INFORMATION
- YOU HAVE A RIGHT TO A COPY OF THIS NOTICE IN PAPER OR ELECTRONIC FORM

**USES AND DISCLOSURES OF YOUR RECORDS**

This program is a federally protected substance use disorder treatment program ("Part 2 program"). Your records are protected by 42 CFR Part 2, a federal law that provides heightened privacy protections.

**Uses and Disclosures Permitted or Required Without Your Written Consent**

We may use or disclose your records without your written consent only as permitted or required by federal law, including:

- Medical Emergencies  
We may disclose records to medical personnel to the extent necessary to meet a bona fide medical emergency.
- Research  
Records may be disclosed to qualified researchers if required safeguards are met and, when applicable, an Institutional Review Board (IRB) or Privacy Board approves the disclosure.
- Audit and Evaluation  
Records may be disclosed to persons or organizations conducting audits or evaluations on behalf of government agencies or other authorized entities, provided patient identities are protected as required by law.
- Public Health and Safety  
Disclosures may be made as required by law to report child abuse or neglect, or to avert a serious and imminent threat to health or safety, to the extent permitted by applicable law.
- Crimes on Program Premises or Against Program Personnel  
Limited information may be disclosed to law enforcement relating to a crime committed on the premises or against program staff.
- Court Orders  
Records may be disclosed pursuant to a valid court order that complies with 42 U.S.C. § 290dd-2 and 42 CFR Part 2.

Note: If another federal or state law provides greater privacy protection than Part 2, we will follow the more stringent law.

### **Uses and Disclosures Requiring Your Written Consent**

Except as described above, we will not use or disclose your records unless you provide written consent.

Examples include:

- Sharing information with family members or friends
- Disclosure to other health care providers for treatment
- Disclosure to insurers or payers for payment
- Disclosure for health care operations

You may provide one consent for all future uses and disclosures for treatment, payment, and health care operations.

We will not make any uses or disclosures not described in this notice without your written consent.

### **Revocation of Consent**

You may revoke your consent in writing, at any time, except to the extent we have already acted in reliance on it

### **Special Protections for Legal Proceedings**

- Your records, or testimony relaying the content of those records, may not be used or disclosed against you in any civil, administrative, criminal, or legislative proceedings unless authorized by your specific written consent or a court order.
- A court order may be issued only after notice and an opportunity to be heard are provided, when required by law.
- A court order authorizing disclosure must be accompanied by a subpoena or similar legal mandate before records are disclosed.

### **CERTAIN USES AND DISCLOSURES (IF APPLICABLE)**

- HIPAA Re-Disclosures After Consent for TPO ( Treatment, Payment, or Healthcare Operations)

If you authorize disclosure of your records for treatment, payment, or health care operations to another Part 2 program, HIPAA-covered entity, or business associate, those records may be further disclosed without your consent to the extent permitted by HIPAA.

- Fundraising Communications

We may use or disclose limited information for fundraising purposes only if you are first given a clear and conspicuous opportunity to opt out of receiving fundraising communications. You have the right to opt out at any time.

### **YOUR RIGHTS REGARDING YOUR RECORDS**

You have the following rights under federal law:

- Right to Request Restrictions (TPO)  
You may request restrictions on disclosures made with your consent for treatment, payment, or health care operations.
- Right to Restrict Disclosures to Health Plans  
You may request that we not disclose information to your health plan for services you have paid for in full.
- Right to an Accounting of Disclosures
  - You may receive an accounting of disclosures of electronic records for the past three (3) years.
  - You may also receive an accounting of other disclosures made with consent as required by HIPAA.
- Right to a List of Intermediary Disclosures  
You may request a list of disclosures made by an intermediary during the past three (3) years.



- Right to a Copy of This Notice  
You may request a paper or electronic copy of this notice at any time.
- Right to Discuss This Notice  
You may discuss this notice with the contact person identified below.
- Right to Opt Out of Fundraising  
You may elect not to receive fundraising communications.

## **OUR DUTIES**

We are required by law to:

- Maintain the privacy and security of your records
- Provide you with this notice of our legal duties and privacy practices
- Notify you following a breach of unsecured records
- Comply with the terms of this notice currently in effect

We reserve the right to change this notice and make the revised notice effective for records we already maintain. If we do so, we will provide you with a revised notice by posting on our website, mailing, or providing at your next visit.

## **COMPLAINTS**

If you believe your privacy rights have been violated, you may file a complaint:

- With Hamilton Center, Inc, by contacting the person listed below;  
Peggy Joyner, Acting Privacy Officer, 812-231-8257; [pjoyner@hamiltoncenter.org](mailto:pjoyner@hamiltoncenter.org).  
PO Box 4323, Terre Haute, IN 47804, and/or
- With the Secretary of the U.S. Department of Health and Human Services, Office of Civil Rights