

| | We can use or share your information for health research. |
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| 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 in certain circumstances. § With health oversight agencies for activities authorized by lay § For special government functions such as military, national and presidential protective services. |
| Respond to lawsuits and legal actions | If you are involved in lawsuits or disputes, we may disclos information (PHI) about you in response to a court ord about you in response to a subpoena, discovery requiresomeone else involved in the dispute, but only if a coprotect the information requested or an authorization. |
| Correctional Facilities | If you are an inmate of a state or local prison or enforcement official, we may disclose health it facility or to a law enforcement official. |
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| | maintain the privacy and security of your proted otly if a breach occurs that may have compromis |
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| We will let you know promp of your information. We must follow the duties a We will not use or share you | otly if a breach occurs that may have compromis |
| We will let you know promp of your information. We must follow the duties a We will not use or share you If you tell us we can, you ma | otly if a breach occurs that may have compromis and privacy practices described in this notice and g ur information other than as described here unless y |
| We will let you know promp of your information. We must follow the duties a We will not use or share you If you tell us we can, you ma | and privacy practices described in this notice and go ur information other than as described here unless you ay change your mind at any time. Let us know in writing |

Your Information. Your Rights. Our Responsibilities.

describes how medical about you may be used and how you can get nformation. t carefully.

University of New England

Bernice A. Mills, RDH, M.S.

716 Stevens Avenue, Portland, ME 04103 (207) 221-4314 | bmills@une.edu

Privacy Officer

Contact



When it comes to your health information, you have certain rights.

This section explains your rights and some of our responsibilities to help you.