

Privacy Notice Highlights

This Privacy Notice Highlights tells how we may use and disclose medical information we have about you and how you can get that information. Our complete Notice of Privacy Practice is available nearby. Please refer to that Notice of Privacy Practice for additional information.

SCOPE	This notice applies to Cone Health, including all of its facilities and services, and to those who provide care through Cone Health.	
USES AND DISCLOSURES	<p>As explained in our complete privacy notice, some of the ways we may use and share health information about you are:</p> <ul style="list-style-type: none"> - For treatment, payment, business, and administrative activities. - To inform you about our health-related benefits and services. - To recommend other treatments and health-care providers. - For public health activities. <p>For other proposed uses and disclosures, except as required or permitted by law, we will explain the use or disclosure and ask your permission as necessary.</p>	
YOUR CHOICES	<ul style="list-style-type: none"> • Unless you tell us otherwise, we may include your name, location, general condition and religious affiliation in our patient directory. This information may be released to people who ask for you by name. • Unless you object, we may disclose medical information about you to a friend or family member who is involved in your medical care. • Unless you object, we may use our professional judgment to disclose necessary information to an agency assisting in disaster relief. • You have a right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail, or at a mailing address other than your home address. • Unless you object, we may disclose medical information to contact you as a reminder that you have an appointment for medical care. <p>If you want to place restrictions on ANY information, you must request a restriction form from the person who handled your registration.</p>	
YOUR RIGHTS	<p>You may:</p> <ul style="list-style-type: none"> • Review, copy and ask us to amend certain medical information we have about you. • Ask us to deliver medical information to an alternate address. • Ask us not to share your information with certain family members or friends. • Ask us for a list of certain disclosures we have made of that information. 	<p>HOW TO REACH US</p> <p>For general information, please call (336) 832-7000. If you have questions or concerns about your privacy or care, call our Privacy Officer at (336) 832-7075 or the Office of Patient Experience at (336) 832-7090. The Privacy Officer may also be reached at privacy.officer@conehealth.com or write to: Privacy Officer, Audit and Compliance Services, Cone Health, 1200 N. Elm Street, Greensboro, NC 27401</p>