

Effective September 23, 2013  
Reviewed 6/2016, 11/2016

**Traverse Health Clinic and Coalition  
D.B.A. Traverse Health Clinic  
1719 S. Garfield Avenue  
Traverse City, MI 49686**

**SUMMARY OF NOTICE OF PRIVACY PRACTICES**

Our complete Notice of Privacy Practices about your health information is attached. Here is a quick summary of the highlights:

Our General Obligation:

We will ask your permission to share your health information with others, except for

- Treatment;
- Payment;
- Running our office;
- Disclosures required by law; and
- Certain matters involving public health/welfare, judicial and administrative proceedings, law enforcement, government oversight, Workers' Compensation, and research.

Your Rights:

- See your health information;
- Correct your health information;
- Be contacted in the way you specify;
- Ask us to restrict what health information we share with others, for certain purposes;
- Get a list of disclosures of your health information;
- Get as many copies of our Notice of Privacy Practices as you like;
- Tell us not to send you fundraising materials;
- Be notified if your privacy is breached;
- Complain if you think we have mishandled your health information.

**CAUTION:** This is only a summary. To understand all your rights and our responsibilities, please read the complete Notice of Privacy Practices and visit [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html).