HAPPY TO BE YOUR HEALTH CARE HOME

Your experience with the Waimānano Health Center is important to us. Every year we will ask patients about their experience with their health care home. You may be asked to answer a few questions about your experience at the health center. Your feedback is valuable to us and we thank you for taking the time to answer these questions if asked.

We also welcome comments through our website, waimanalohealth.org at “Share your Mana`o” located under “Contact Us.”

Ola I Ka Wai A Ka `Ôpuu
There is life in the water from the clouds
Rain gives life

YOUR PATIENT-CENTERED HEALTH CARE HOME

Medical (808) 259-7948
Dental (808) 259-5466
www.waimanalohealth.org

41-1347 Kalaniana`ole Highway, Waimānalo, Hawai`i 96795-1247
Hours

**MEDICAL SERVICES (808) 259-7948**
- **Monday**: 8am – 12pm; 1pm – 8pm
- **Tuesday**: 8am – 12pm; 1pm – 5pm
- **Wednesday**: 8am – 12pm; 1pm – 5pm
- **Thursday**: 8am – 12pm; 1pm – 8pm
- **Friday**: 8am – 12pm; 1pm – 5pm
- **Saturday**: 8am – 12pm
- **Sunday**: Closed

**DENTAL SERVICES (808) 259-5466**
- **Monday**: 8am – 12pm; 1pm – 5pm
- **Tuesday**: 8am – 12pm; 1pm – 5pm
- **Wednesday**: 8am – 12pm; 1pm – 5pm
- **Thursday**: 8am – 12pm; 1pm – 7pm
- **Friday**: 8am – 12pm; 1pm – 5pm
- **Saturday**: 8am – 12pm (Keiki clinic only)
- **Sunday**: Closed

**VISION SERVICES (808) 259-7948**
- **Monday**: 8am – 12pm; 1pm – 5pm
- **Tuesday**: 8am – 12pm; 1pm – 5pm
- **Wednesday**: 8am – 12pm; 1pm – 5pm
- **Thursday**: 8am – 12pm; 1pm – 5pm
- **Friday**: Closed
- **Saturday**: Closed
- **Sunday**: Closed

**WIC SERVICES (808) 259-7940**
- **Monday**: 7:30am – 5pm
- **Tuesday**: 7:30am – 5pm
- **Wednesday**: 7:30am – 5pm
- **Thursday**: 7:30am – 5pm
- **Friday**: 7:30am – 5pm
- **Saturday**: 8am-12pm (1st and 3rd of the month)
- **Sunday**: Closed

If the office is closed and you need to talk to your provider about a non-life threatening but urgent condition or are unsure if you need to go to the Emergency Room, you can reach your provider by calling **Physician's Exchange at 524-2575**

Your request must state a time period, which may not be longer than 6 years and not include dates before April 14, 2003. The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred. We will mail you a list of disclosures within 30 days of your request, or notify you if we are unable to have the list within 30 days and by what date we can have the list; but this date will not exceed 60 days from the date you made the request.

**Right to Request Special Restrictions**: You have the right to request special restrictions on sharing of your health information. You also have the right to request a limit on the health information we disclose about you to someone who is involved in your care. We are not required to agree to your request for restrictions if we are unable to comply or believe it will negatively affect the care we provide for you. In your request, you must tell us what information you want to limit and to whom you want the limits to apply; for example, disclosure of specific information to your spouse.

**Right to Copy of This Notice**: You have the right to obtain a paper copy of this Notice at any time. Copies of your current Notice are available from our front desk staff.

**Changes to this Notice**: We reserve the right to change our privacy practices as described in this Notice at any time. Except when required by law, we will write and make available upon request a new Notice before we make any changes in our privacy practices. The privacy practices in the most current Notice will apply to information we already have about you as well as any information we receive in the future. The Notice will contain an effective date.

**Contact Us**: If you would like further information about your privacy rights, are concerned that your privacy rights have been violated, or disagree with a decision that we made about access to your health information, contact the Chief Performance and Compliance Officer at (808) 954-7156.

All complaints must be submitted in writing. We will investigate all complaints and will not retaliate against you for filing a complaint with the Office of Civil Rights of the U. S. Department of Health and Human Services. There will be no retaliation for filing a complaint.
Right to Alternative Communications: You have the right to request that WHC communicate with you in a certain manner. For example, you may ask that WHC contact you only at work, or a different address than your home address. You may request this during registration.

Right to Inspect and or Copy: You have the right to inspect and obtain copies of your health information. Usually, this includes health and billing records. It does not include psychotherapy notes, or information we put together to prepare for legal action, and certain laws relating to laboratories.

To obtain a copy of your health information, please submit a request in writing to the Medical Records Department. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies and services from your request.

We may deny your request to inspect and copy your records in certain very limited circumstances. We will notify you in writing if your request has been denied and explain how you may appeal the decision. In certain limited situations, we will have to deny you access and you will not have the right to appeal that decision.

Right to Amend: If you think that health information in your record is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as we keep the information. You must provide a reason for the amendment. We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:
- We did not create.
- Is not part of the health information kept by our facility.
- Is not part of the information that you are allowed to inspect.
- Is accurate and complete.

Right to Accounting of Disclosures: You have the right to request a list accounting for any disclosures of your health information we have made. This accounting will not include disclosures:
- For treatment, payment, or health care options
- To persons involved in your care or for notification purposes
- Incidental to an otherwise permitted use or disclosure
- To correctional institutions or other law enforcement officials
- As part of a limited data set
- For national security or intelligence purposes
- For any use or disclosure that you specifically authorized or requested.

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Your Patient-Centered Health Care Home

E komo mai to your Health Care Home at the Waimānalo Health Center where YOU are at the heart of the care team. We have several care team members that work together with you to help you reach your health care goals. They can also give you information about medications, nutrition, exercise and stress management. You will be asked to select a primary care provider (PCP), so that there is one person who really knows you, your medical history, and your care team. To get the best care, schedule with your PCP for every visit.

Waimānalo Health Center is committed to providing the highest level of primary and preventive health services, with special attention to the needs of Native Hawaiians and the medically underserved, and improving the health and wellness of individuals and their `ohana, regardless of their ability to pay.

The Waimānalo Health Center is your “Patient Centered Health Care Home,” (PCHCH) also known as your “Patient Centered Medical Home” (PCMH). PCHCH is an approach to how health care is delivered.

At Waimānalo Health Center, we practice the following values:

`Ohana, or family, is important in the Native Hawaiian culture. This phrase is used at the Waimānalo Health Center to reflect our approach to patient care – you and your `ohana are at the center of your care.

Mālama means we listen to our patients with our full attention, seeking to know them and understand their healthcare and wellness needs. To understand their wishes for themselves, their family and the Waimānalo community. We will respond, to the best of our abilities, as caring, compassionate, engaged and professional partners in healthcare.

Pono means that quality healthcare starts with a person’s trust in our services and the excellence of our care to meet their needs. We are committed to maintaining their trust by treating people with respect and confidentiality, and by being open about our organizational practices and results, seeking to continuously improve our work.

to report infectious diseases to the Hawai`i Department of Health; billing practices may be audited by the Hawai`i State Auditor; records are subject to review by the Secretary of Health and Human Services; and the Federal Food and Drug Administration (FDA) to ensure product safety.

**Workers Compensation:** WHC may use or disclose health information about you for workers compensation or similar programs that provide benefits for work-related injuries or illnesses.

**Health Oversight Activities:** To a health oversight agency that oversees the health care system and ensure compliance with the rules of government health programs such as Medicare or Medicaid.

**Judicial and Administrative Proceedings:** In the course of a judicial or administrative proceeding in response to a legal order or other lawful purpose.

**Threat to Health and Safety:** We may use and disclose your health information, when necessary, to prevent a serious threat to your health and safety or the health and safety of others.

**Law Enforcement Officials:** Specialized Government Functions: We may disclose information to the police or other law enforcement officials as required by law or in compliance with a court order. We may disclose information to military or veterans’ authorities about Armed Forces personnel, under certain circumstances. We may also disclose information to authorized federal officials for purposes of lawful intelligence, counterintelligence, and other national security activities.

**All other uses and disclosures, not described in this notice, require signed authorization. You may revoke your authorization at any time with a written statement submitted to Health information.**

**Specially Protected Health Information:**
Unless otherwise required or permitted under law, disclosure of the following protected health information, outside our health center, requires your specific consent:

- AIDS/HIV information
- Mental health and mental illness records including psychotherapy notes
- Drug addiction and alcoholism (substance abuse) treatment records

**Your individual Rights:** You have the following rights concerning your health information. A request to exercise any of these rights must be made in writing to the Chief Performance and Compliance Officer.
Health Care Operations: We use health information to improve the quality of care, train staff and students, provide customer service, manage costs, conduct required business duties, and make plans to better serve our communities. For example, we may use your health information to evaluate the quality of treatment and services provided by our physicians, nurses, and other health care workers.

Individuals Involved in your Care or Payment of your Care: We may disclose your health information to a spouse, family member, close personal friend, or any individual identified by you if we obtain your agreement. You will have the opportunity to identify this person or to object to our disclosing information to them.

Business Associates: WHC may use or disclose health information about you with people who contract with us to provide goods and services used in your treatment or for hospital operations. Examples include copy services, consultants, interpreters, and health transcriptionists. The WHC requires these contractors to protect the confidentiality of your health information as we do.

Research: Under certain circumstances, we may use and disclose your health information for research purposes. Research projects are subject to a special review process that evaluates uses of health information; trying to balance the research needs with the need for patient privacy. Before we use or disclose health information for research the project will have to be approved through this review process.

Fundraising: We may contact you to provide information about WHC sponsored activities, including fundraising programs and events. We would only use contact information, such as your name, address and phone number and the dates you received treatment or services at WHC. Please inform us if you do not want us to contact you for these fundraising efforts.

Health Care Communications: To identify health-related services and products that may benefit you and then contact you about the services and products.

Deceased Individuals: We may release medical information to a coroner, medical examiner, or funeral director as necessary for them to carry out their responsibilities.

Organ Procurement Organizations: We may release your health information to organizations that handle organ procurement or organ, eye, or tissue transplants or to an organ donation bank, as required and necessary to facilitate organ or tissue donation and transplants.

Public Health Activities: WHC may use or disclose your health information with public health authorities in charge of preventing or controlling disease, injury, or disability. For example, the WHC is required
My Patient Portal

Your medical home on the Web. With the Patient Portal, you can connect with your doctor through a convenient, safe, and secure environment. We use technology to encrypt, safeguard, and secure your personal information.

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL/DENTAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Our Privacy Responsibilities:
Waimānalo Health Center (WHC) is required by law to maintain the privacy of your health information; provide this notice that describes the ways we may use and share your health information; and follow the terms of the notice currently in effect.

Privacy Promise: WHC understands that your health information is personal and protecting your health information is important. We follow strict federal and state laws that require us to maintain the confidentiality of your health information. You have the right to be notified if a breach of protected health information occurs.

Uses and Disclosures of Health Information Permitted by Law: The following categories describe the ways that the WHC may use and disclose your health information. Some health records including confidential communications with a mental health professional, some substance abuse treatment records, some genetic results, and some health information of minors, may have additional restrictions for use and disclosure under state and federal laws. Your health information will be used or disclosed only for the following purposes:

When you receive care from WHC, we may use your health information for treating you, billing services, and conducting our normal business known as health care operations. Examples of how we use you information include:

Treatment: We keep records of the care and services provided to you. Health care providers use these records to deliver quality care to meet your needs. For example, your doctor may share your health information with a specialist who will assist in your treatment. We may call you by name in the waiting room when the provider is ready to see you. We may use or disclose your protected health information, as necessary, to contact you to remind you of your appointment.

Payment: We keep billing records that include payment information and documentation of the services provided to you. Your information may be used to obtain payment from you, your insurance company, or another third party. We may so contact your insurance company to verify coverage for your care or to notify them of upcoming services that may need prior notice or approval. We may disclose protected health information to other health care providers or third parties to assist in billing and collection efforts. You have the right to restrict disclosure of your protected health information to a health plan when you pay out of pocket in full for health care services.

Ask a staff member for more information on how to enroll. Signing up is free and easy!
Universal Patient Compact

As your healthcare partner we pledge to:

- Include you as a member of the team
- Treat you with respect, honesty and compassion
- Always tell you the truth
- Include your family or advocate when you would like us to
- Hold ourselves to the highest quality and safety standards
- Be responsive and timely with our care and information to you
- Help you to set goals for your healthcare and treatment plans
- Listen to you and answer your questions
- Provide information to you in a way you can understand
- Respect your right to your own medical information
- Respect your privacy and the privacy of your medical information
- Communicate openly about benefits and risks associated with any treatments
- Provide you with information to help you make informed decisions about your care and treatment options
- Work with you, and other partners who treat you, in the coordination of your care

As a patient I pledge to:

- Be a responsible and active member of my healthcare team
- Treat you with respect, honesty and consideration
- Always tell you the truth
- Respect the commitment you have made to healthcare and healing
- Give you the information that you need to treat me
- Learn all that I can about my condition
- Participate in decisions about my care
- Understand my care plan to the best of my ability
- Tell you what medications I am taking
- Ask questions when I do not understand and until I do understand
- Communicate any problems I have with the plan for my care
- Tell you if something about my health changes
- Tell you if I have trouble reading
- Let you know if I have family, friends or an advocate to help me with my healthcare

NPSF Universal Patient Compact

About Your Visit

Appointments

1. **Scheduling.** To schedule an appointment, call us or use the patient portal to request an appointment.
   - Medical Services (808) 259-7948
   - Dental Services (808) 259-5466
   - Vision Services (808) 259-7948
   - WIC Services (808) 259-7940

2. **Same day.** For urgent care that is not life-threatening urgent care, contact us for a same day appointment. If you have life-threatening symptoms, call 911 or go to your nearest emergency room.

3. **Arrive Early.** For new patients, please arrive 1 hour before your appointment or for established patients, please arrive 15 minutes before your appointment to check in and update your information. You will be asked to complete a Patient Intake Form.

4. **Complete your pre-visit plan.** Let your provider know if you saw any other doctors or had visits to the emergency room or hospital since your last visit. List any medications, herbs, or over the counter medications you are taking. Write down any questions or concerns you would like to talk to your care team about.

5. **Bring your information.** Remember to bring your identification card and insurance cards. Let us know if there were any changes.

6. **Call to cancel or if you’re running late.** Let us know as soon as possible if you need to cancel your appointment for any reason so your appointment can be given to another patient who needs to be seen. If you are more than 10 minutes late for your appointment, we will make every effort to see you but we may need to reschedule your appointment.

7. **Special Accommodations.** We are wheelchair accessible and the ramp is located on the mauka side of the building. Please let us know in advance if you will need an interpreter for your visit.

   **If the office is closed and you need to talk to your provider about an urgent but non-life threatening condition or you are unsure if you need to go to the Emergency Room, you can reach your provider by calling Physician’s Exchange at 524-2575.**
Payment
We accept most insurance plans, including Med-QUEST and Medicare. Payment is expected and due at the time of service. Your co-pay will be collected when you check-in. Additional fees, if any, will be collected during or after your visit with your provider. We accept cash, check (payable to Waimānalo Health Center) or credit cards. We do not accept out of state checks. If you do not have insurance, see our Māmaki staff to help you apply for Med-QUEST.

Sliding Fee Scale
If you are uninsured or underinsured, we recommend you apply for Sliding Fee Scale. This is a discounted program to assist with the cost of medical and dental services received at Waimānalo Health Center. Please bring the following documents with you:

- Photo Identification
- Proof of Address (ex: utility bill)
- Support document (if no income – letter of support)
- Proof of Income (3 months paystubs or tax returns)

The eligibility worker will process your application and tell you the discount you qualify for and your estimated cost for each visit. We provide services to patients regardless of their ability to pay. We will ask for these documents annually to renew your sliding fee discount. For additional assistance and to see if you qualify, contact our Community Outreach Education Worker in Māmaki at (808) 259-7948.

Medication Refill
- If you have refills available, call your pharmacy directly.
- If you do not have refills, contact your care team at least 3 days before you run out of medications. You can call (808) 259-7948 or send a message on the patient portal to request a medication refill. In your message, include the name and location of the pharmacy where you would like to pick up your prescription.
- If you have questions about a new medication, or want to stop taking a medication, contact your primary care provider at (808) 259-7948 or send a message through the patient portal.

Patient Rights and Responsibilities
As a Waimānalo Health Center patient, your responsibilities are to:

- Treat all persons in the health center with courtesy, dignity and respect at all times.
- Provide accurate information for registration, billing, payment, informed consents and changes that occur, including any changes in your address, phone number, insurance, and or any other contact information.
- Provide information regarding your concerns to a patient advocate or may request to speak with the Dental Director, Chief Medical Officer, Chief Performance and Compliance Officer or Chief Executive Officer.
- Be on time for scheduled appointments and to cancel appointments before the scheduled appointment, according to Waimānalo Health Center policies. This includes any specialty or referral appointments made for you.
- Provide requested information for your medical and dental history accurately including past illnesses, medications, allergies, hospitalizations, family and social histories.
- Ask questions if you are unclear about papers and information that you and your provider have agreed upon.
- Keep your personal belongings in a safe place. Lost and/or stolen personal items are not the responsibility of Waimānalo Health Center.
Patient Rights and Responsibilities

As a Waimānalo Health Center patient, you have the right to:

- Be treated with courtesy, dignity and respect—regardless of race, color, sex, age national origin, or beliefs.
- Be seen in a safe, secure environment and in a timely manner.
- Know the name of your health provider, and the names and positions of staff you encounter.
- Be informed of your condition and understand the treatments.
- Refuse treatment at any time and to be informed of the risks of the refusal of treatment.
- Be informed of the reasons for tests and treatments and to receive the results in a timely manner.
- Refuse to sign consent forms until you understand what you are signing.
- Refuse to participate in educational or experimental activities by choice.
- Participate in all decisions regarding your care as stated within the law.
- Identify a person whom you would like to make decisions for you when you are unable to do so, using the Advance Care Directives.
- Be referred for emergency or specialized services not provided by WHC.
- Have your health information protected and held in confidentiality.
- Obtain explanations of monies that you owe to the health center on your bill.
- Request and receive copies of your medical/dental records at a small fee.

Signed Forms
- If a form needs to be signed or completed you may need to come in for an appointment first. Please let staff know when scheduling an appointment you have a form to be signed.
- For forms that do not require an appointment, drop off the form with your provider and allow at least 3 business days for completion.

Medical Records
- Medical records may be requested through the patient portal or by contacting us.
- Requests may take up to 30 days and there may be a fee.
- Please complete and sign a Release of Information form and provide with the name and phone number for the person/office that will be receiving your medical records.

Confidentiality and Privacy
Waimānalo Health Center is required by law to ensure the privacy of your health information, and to provide you with a “Notice of Privacy Practices” that describes the ways we may use and share your health information - see page 18. If you have any questions about this notice, please contact our Chief Performance and Compliance Officer at 259-7948 ext. 7156.

Advance Health Care Directives
This is a legal document that allows you to give instructions about your own health care and to name someone else to make health care decisions on your behalf if you are unable to do so. Talk with your primary care provider about completing an Advance Health Care Directive.

Stay in Touch with Your Primary Care Team
It is important for you to talk with your primary care provider about your care, including how you can be actively involved in your care. You can talk with your provider:
- At your appointments
- By phone
- By signing up for a patient portal account (see page 5 for more information)
- By e-mail (Note: Only after completing and signing the guide for electronic communication document.)
Clinics & Departments

Medical
(808) 259-7948

**Kalo** - Kalo also known as Hāloa means “everlasting breath”. Ritual of passing poi around supported relationship of 'ohana (family) and an appreciation of our 'āumakua (ancestors).

**'Ulu** - Medicine was derived from the young buds for mouth and throat. The white sticky sap became glue, caulking, chewing gum, or medicine (to heal cuts, scratches & various skin diseases). The sap is also used as a moisturizer for cracked or scaly skin. 'Ulu is breadfruit, a subsistence food that can be steamed, baked, boiled, marinated, stir-fried, or mashed into an 'ulu poi.

Family Medicine (Kalo & 'Ulu Clinics)
At WHC, Family Medicine, or Kalo and 'Ulu Clinics, is the core of your Patient-Centered Medical Home. We provide customized and comprehensive care for the entire family. Services include:
- Primary & Preventive Care
- Health Screening and Assessment
- Care Coordination
- Physical Exams
- Immunizations
- Acute Care (such as injury or infection)
- Disease Management
- Family Planning (Adult and Teen services)
- Prenatal and Postpartum Care
- Lā'au Lapa'au (Native Hawaiian Healing)

Pediatrics (Maile Clinic)

**Maile** - Embodiment of the Gods. Strong fragrance important to Laka, the goddess of hula. Given as leis for celebrating weddings, birthdays and graduations.

Pediatric services, or Maile Clinic, specializes in caring for the youngest members of your `ohana. Our services help keiki grow up healthy from birth through adolescence. Pediatric services include:
- Health Screening and Assessment
- Physical Exams (well-baby exams and check-ups, school and sports physicals)
- Immunizations
- Acute Care (such as injury or infection)
- Lā'au Lapa'au (Native Hawaiian Healing)

What You Can Expect From Your Patient Centered Health Care Home

- You are at the center of your care.
- You have a health care team to take care of your needs.
- You have access to your health care team when you need it.
- You have support to take an active role in your health care.
- You have support and care to keep you out of the emergency room and hospital.
- You will be asked to tell us about your experience with Waimānalo Health Center.

Your Health Care Home team members include:

**Primary Care Provider** (PCP) – A doctor or nurse practitioner who manages your medical care. Your PCP knows you, your preferences, and your medical history. You choose your doctor or nurse practitioner. Please notify our staff of who you would like to choose. (See website for provider bios)

**Behavioral Health Provider** - the person who helps when your thoughts, feelings or behaviors are preventing you from living a happier, healthier and more productive life.

**Dentist** – the person who sees you for dental or oral care needs.

**Optometrist** – the person who sees you for eye care or vision needs.

**Care Coordinator** – the person who helps to coordinate your care and help find solutions to problems affecting your health. You will have the highest quality of care to assist with reaching your best health across multiple settings which may include care coordination, behavioral health, other specialists, hospitals, etc.

**Registered Nurse (Team Lead)** – the person who can offer medical advice if your provider is not available.

**Medical Assistant** – the person who checks you in for your appointments, takes your blood pressure, reminds you of your follow up appointments, sets up other appointments for you, assists with getting your medication refills.

**Registered Dietitian** – the person who helps you with eating healthy, buying and growing healthy foods.

**Receptionist** – the person who will assist you with registering and answering your phone calls.

**Community Outreach Education Worker** - the person who helps you with obtaining medical insurance or being able to pay for your medications.
Uala Department (Women, Infants and Children - WIC)
(808) 259-7940

Uala - An embodiment of Lono (the god of rain and agriculture), the sweet potato was used as medicine for many ailments. The leaves/vines cooked and eaten or worn as an open lei are known to induce the flow of the mother’s milk.

Women, Infants and Children, or WIC, is a free food and nutrition program for low-income Hawai‘i residents who are pregnant, breastfeeding, just had a baby, or have a child under five years old. WIC provides patients with supplemental foods, nutrition education and breastfeeding support. Program income eligibility guidelines and instructions on how to apply can be found at the State of Hawai‘i Department of Health website. WIC also provides individualized counseling to meet each individual’s dietary needs and address specific nutritional risks; anemia screening and health and social service referrals to eligible women who are:

- Pregnant, breastfeeding up to one year postpartum or non-breastfeeding up to six months postpartum;
- Infants under one year of age; and
- Young children up to five years of age; and
- Found to be of nutritional risk in Hawai‘i.

Youth and Young Adult Services

Waimānalo Health Center’s youth and young adult services provides a safe, comfortable and fun environment for students to learn about themselves and build character. Program mentors lead students in activities that build teamwork and self-awareness. Educational topics covered include healthy lifestyles, good decision-making, healthcare careers and Hawaiian culture.

Services include:
- Tutoring
- Alcohol, Tobacco and Other Drug Prevention
- Character Building
- Health Career Development
- Healthy Lifestyles (Nutrition and Exercise)
- Health Education Services
- Making Right (Pono) Choices
- Community Activities
- `Ohana Health Genealogy

Health Promotion & Nutrition Counseling (Niu)

Niu - Known for its resilience and usefulness. The coconut water/oil is used medicinally and the oil is used to bring out the healing properties in other plants.

Waimānalo Health Center assists patients to treat and control medical conditions and their associated symptoms through nutrition counseling and with making better food choices. Our team of Registered Dietitians can provide the following services:
- Nutrition assessment
- One-on-one nutrition counseling
- Meal-planning support
- Medical nutrition therapy

Registered dietitians (RDs) are available to provide expert advice on making healthful food choices to achieve health-related goals. RDs can help you develop plans for foods and physical activities to assist with managing weight, diabetes, heart disease, or other chronic conditions, or to develop plans to maintain good health. In addition to providing guidance on diet and lifestyle choices, the RDs at Waimānalo Health Center are also committed to highlighting the connection between food, land, and health through edible gardening and garden-to-table initiatives.

Care Coordination

Care Coordination provides health and wellness support for patients with complex health needs. Services include but are not limited to arranging transportation, referral to housing programs, support groups, applying for benefits, finding legal services, medications management and coordinating appointments with specialists and other health team members. Care Coordination can help prevent unnecessary emergency room visits and help you transition smoothly after a hospitalization.
Behavioral Health (Kukui)
(808) 259-7948

*Kukui* - Enlightenment, protection & peace. Valued for light (oil removed for use of stone lamps, ti-leaf torches); Nuts used for leis; Nut oil used to make candles.

Through our Integrated Behavioral Health approach, the Waimānalo Health Center behavioral health providers work alongside the primary care providers to conduct screenings, brief interventions and referrals to longer-term therapy. During the primary care visits, the behavioral health provider helps patients understand thoughts, feelings, and behaviors that may result from health issues or concerns. Services include assessments and therapy for individuals, couples, and families. We also offer several support groups. Topics discussed during counseling sessions include but are not limited to:

- Chronic pain
- Weight management
- Parenting
- Stress
- Anxiety
- Depression

Dental (Kī Clinic)
(808) 259-5466

*Kī* - Speaks to us of strength and survival and the abundance of blessing’s we receive daily. Considered sacred to the Hawai‘i god Lono and hula goddess Laka. Used as protection, to ward off evil spirits.

The Kī Clinic specializes in comprehensive preventive, restorative, and emergency dental care. Our team is dedicated to providing personalized, affordable, quality dental services. Our goal is to improve your smile by maintaining your total dental health. Services include:

- Prevention (cleanings, digital x-rays, fluoride treatments, sealants and education)
- Restorative (fillings, crowns and bridges, dentures and dentures repair)
- Treatment of disease (referrals to specialists, periodontal cleanings and root canals)
- Emergency dental care (toothache, cracked or knocked-out teeth and damaged fillings or crowns)

Vision (Noni)
(808) 259-7948

*Noni* - Used for both medicinal purposes and food, nearly every part of the noni tree was used in some form or another. Traditional medicinal uses included its use for eye conditions.

Our expert team at the Waimānalo Health Center’s Vision Center, or Noni, works with you to achieve optimal vision health. Services include:

- Comprehensive eye exams
- Preventive vision care
- Diagnosis and treatment of eye diseases
- Optical dispensing (glasses, frames and lenses)

Community Services

Māmaki Department
(808) 259-7948

*Māmaki* - Leaf, either fresh or dried, was used to make a tea to help with anxiety, and to calm or cleanse. The fruit was used in healing sores and wounds. Māmaki was also used to make kapa if the softer paper mulberry was not available. Its’ wood was used to make clubs and kapa beaters.

Eligibility
Our Community Outreach and Education Workers are here to help patients reduce barriers and increase access to health care. Our staff will help uninsured patients apply for medical insurance such as MedQuest or WHC’s Sliding Fee or the health insurance marketplace (Hawai‘i Health Connector). They can also help patients find and apply for assistance programs such as: low cost prescription medication, Social Security, Temporary Assistance for Needy Families, food stamps, housing, Notary services and accessing healthcare services.

Cancer Prevention and Screening
Waimānalo Health Center offers cancer screening and prevention services for cervical and breast cancer for those without adequate medical insurance coverage. In addition to clinical screening and diagnostic services, patients receive counseling and support and health education. Other eligibility requirements may apply, for more information please contact the health center at 259-7948 ext. 147.
Behavioral Health (Kukui)
(808) 259-7948

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Women, Infants and Children, or WIC, is a free food and nutrition program for low-income Hawai‘i residents who are pregnant, breastfeeding, just had a baby, or have a child under five years old. WIC provides patients with supplemental foods, nutrition education and breastfeeding support. Program income eligibility guidelines and instructions on how to apply can be found at the State of Hawai‘i Department of Health website. WIC also provides individualized counseling to meet each individual’s dietary needs and address specific nutritional risks; anemia screening and health and social service referrals to eligible women who are:

- Pregnant, breastfeeding up to one year postpartum or non-breastfeeding up to six months postpartum;
- Infants under one year of age; and
- Young children up to five years of age; and
- Found to be of nutritional risk in Hawai‘i.

Youth and Young Adult Services

Waimānalo Health Center’s youth and young adult services provides a safe, comfortable and fun environment for students to learn about themselves and build character. Program mentors lead students in activities that build teamwork and self-awareness. Educational topics covered include healthy lifestyles, good decision-making, healthcare careers and Hawaiian culture.

Services include:
- Tutoring
- Alcohol, Tobacco and Other Drug Prevention
- Character Building
- Health Career Development
- Healthy Lifestyles (Nutrition and Exercise)
- Health Education Services
- Making Right (Pono) Choices
- Community Activities
- ‘Ohana Health Genealogy

Health Promotion & Nutrition Counseling (Niu)

**Niu** - Known for its resilience and usefulness. The coconut water/oil is used medicinally and the oil is used to bring out the healing properties in other plants.

Waimānalo Health Center assists patients to treat and control medical conditions and their associated symptoms through nutrition counseling and with making better food choices. Our team of Registered Dietitians can provide the following services:

- Nutrition assessment
- One-on-one nutrition counseling
- Meal-planning support
- Medical nutrition therapy

Registered dietitians (RDs) are available to provide expert advice on making healthful food choices to achieve health-related goals. RDs can help you develop plans for foods and physical activities to assist with managing weight, diabetes, heart disease, or other chronic conditions, or to develop plans to maintain good health. In addition to providing guidance on diet and lifestyle choices, the RDs at Waimānalo Health Center are also committed to highlighting the connection between food, land, and health through edible gardening and garden-to-table initiatives.

Care Coordination

Care Coordination provides health and wellness support for patients with complex health needs. Services include but are not limited to arranging transportation, referral to housing programs, support groups, applying for benefits, finding legal services, medications management and coordinating appointments with specialists and other health team members. Care Coordination can help prevent unnecessary emergency room visits and help you transition smoothly after a hospitalization.
Kalo - Kalo also known as Hāloa means "everlasting breath". Ritual of passing poi around supported relationship of ʻohana (family) and an appreciation of our ʻaumakua (ancestors).

ʻUlu - Medicine was derived from the young buds for mouth and throat. The white sticky sap became glue, caulking, chewing gum, or medicine (to heal cuts, scratches & various skin diseases). The sap is also used as a moisturizer for cracked or scaly skin. ʻUlu is breadfruit, a subsistence food that can be steamed, baked, boiled, marinated, stir-fried, or mashed into an ʻulu poi.

Family Medicine (Kalo & ʻUlu Clinics)
At WHC, Family Medicine, or Kalo and ʻUlu Clinics, is the core of your Patient-Centered Medical Home. We provide customized and comprehensive care for the entire family. Services include:
- Primary & Preventive Care
- Health Screening and Assessment
- Care Coordination
- Physical Exams
- Immunizations
- Acute Care (such as injury or infection)
- Disease Management
- Family Planning (Adult and Teen services)
- Prenatal and Postpartum Care
- Lā'au Lapa'au (Native Hawaiian Healing)

Pediatrics (Maile Clinic)
Maile - Embodiment of the Gods. Strong fragrance important to Laka, the goddess of hula. Given as leis for celebrating weddings, birthdays and graduations.

Pediatric services, or Maile Clinic, specializes in caring for the youngest members of your ʻohana. Our services help keiki grow up healthy from birth through adolescence. Pediatric services include:
- Health Screening and Assessment
- Physical Exams (well-baby exams and check-ups, school and sports physicals)
- Immunizations
- Acute Care (such as injury or infection)
- Lā'au Lapa'au (Native Hawaiian Healing)

What You Can Expect From Your Patient Centered Health Care Home
- You are at the center of your care.
- You have a health care team to take care of your needs.
- You have access to your health care team when you need it.
- You have support to take an active role in your health care.
- You have support and care to keep you out of the emergency room and hospital.
- You will be asked to tell us about your experience with Waimānalo Health Center.

Your Health Care Home team members include:
- Primary Care Provider (PCP) – A doctor or nurse practitioner who manages your medical care. Your PCP knows you, your preferences, and your medical history. You choose your doctor or nurse practitioner. Please notify our staff of who you would like to choose. (See website for provider bios)
- Behavioral Health Provider - the person who helps when your thoughts, feelings or behaviors are preventing you from living a happier, healthier and more productive life.
- Dentist – the person who sees you for dental or oral care needs.
- Optometrist – the person who sees you for eye care or vision needs.
- Care Coordinator – the person who helps to coordinate your care and help find solutions to problems affecting your health. You will have the highest quality of care to assist with reaching your best health across multiple settings which may include care coordination, behavioral health, other specialists, hospitals, etc.
- Registered Nurse (Team Lead) – the person who can offer medical advice if your provider is not available.
- Medical Assistant – the person who checks you in for your appointments, takes your blood pressure, reminds you of your follow up appointments, sets up other appointments for you, assists with getting your medication refills.
- Registered Dietitian – the person who helps you with eating healthy, buying and growing healthy foods.
- Receptionist – the person who will assist you with registering and answering your phone calls.
- Community Outreach Education Worker - the person who helps you with obtaining medical insurance or being able to pay for your medications.
Patient Rights and Responsibilities

As a Waimānalo Health Center patient, you have the right to:

- Be treated with courtesy, dignity and respect—regardless of race, color, sex, age national origin, or beliefs.
- Be seen in a safe, secure environment and in a timely manner.
- Know the name of your health provider, and the names and positions of staff you encounter.
- Be informed of your condition and understand the treatments.
- Refuse treatment at any time and to be informed of the risks of the refusal of treatment.
- Be informed of the reasons for tests and treatments and to receive the results in a timely manner.
- Refuse to sign consent forms until you understand what you are signing.
- Refuse to participate in educational or experimental activities by choice.
- Participate in all decisions regarding your care as stated within the law.
- Identify a person whom you would like to make decisions for you when you are unable to do so, using the Advance Care Directives.
- Be referred for emergency or specialized services not provided by WHC.
- Have your health information protected and held in confidentiality.
- Obtain explanations of monies that you owe to the health center on your bill.
- Request and receive copies of your medical/dental records at a small fee.

Signed Forms
- If a form needs to be signed or completed you may need to come in for an appointment first. Please let staff know when scheduling an appointment you have a form to be signed.
- For forms that do not require an appointment, drop off the form with your provider and allow at least 3 business days for completion.

Medical Records
- Medical records may be requested through the patient portal or by contacting us.
- Requests may take up to 30 days and there may be a fee.
- Please complete and sign a Release of Information form and provide with the name and phone number for the person/office that will be receiving your medical records.

Confidentiality and Privacy
Waimānalo Health Center is required by law to ensure the privacy of your health information, and to provide you with a “Notice of Privacy Practices” that describes the ways we may use and share your health information - see page 18. If you have any questions about this notice, please contact our Chief Performance and Compliance Officer at 259-7948 ext. 7156.

Advance Health Care Directives
This is a legal document that allows you to give instructions about your own health care and to name someone else to make health care decisions on your behalf if you are unable to do so. Talk with your primary care provider about completing an Advance Health Care Directive.

Stay in Touch with Your Primary Care Team
It is important for you to talk with your primary care provider about your care, including how you can be actively involved in your care. You can talk with your provider:
- At your appointments
- By phone
- By signing up for a patient portal account (see page 5 for more information)
- By e-mail (Note: Only after completing and signing the guide for electronic communication document.)
Payment
We accept most insurance plans, including Med-QUEST and Medicare. Payment is expected and due at the time of service. Your co-pay will be collected when you check-in. Additional fees, if any, will be collected during or after your visit with your provider. We accept cash, check (payable to Waimānalo Health Center) or credit cards. We do not accept out of state checks. If you do not have insurance, see our Māmaki staff to help you apply for Med-QUEST.

Sliding Fee Scale
If you are uninsured or underinsured, we recommend you apply for Sliding Fee Scale. This is a discounted program to assist with the cost of medical and dental services received at Waimānalo Health Center. Please bring the following documents with you:
- Photo Identification
- Proof of Address (ex: utility bill)
- Support document (if no income – letter of support)
- Proof of Income (3 months paystubs or tax returns)

The eligibility worker will process your application and tell you the discount you qualify for and your estimated cost for each visit. We provide services to patients regardless of their ability to pay. We will ask for these documents annually to renew your sliding fee discount. For additional assistance and to see if you qualify, contact our Community Outreach Education Worker in Māmaki at (808) 259-7948.

Medication Refill
- If you have refills available, call your pharmacy directly.
- If you do not have refills, contact your care team at least 3 days before you run out of medications. You can call (808) 259-7948 or send a message on the patient portal to request a medication refill. In your message, include the name and location of the pharmacy where you would like to pick up your prescription.
- If you have questions about a new medication, or want to stop taking a medication, contact your primary care provider at (808) 259-7948 or send a message through the patient portal.

Patient Rights and Responsibilities
As a Waimānalo Health Center patient, your responsibilities are to:
- Treat all persons in the health center with courtesy, dignity and respect at all times.
- Provide accurate information for registration, billing, payment, informed consents and changes that occur, including any changes in your address, phone number, insurance, and or any other contact information.
- Provide information regarding your concerns to a patient advocate or may request to speak with the Dental Director, Chief Medical Officer, Chief Performance and Compliance Officer or Chief Executive Officer.
- Be on time for scheduled appointments and to cancel appointments before the scheduled appointment, according to Waimānalo Health Center policies. This includes any specialty or referral appointments made for you.
- Provide requested information for your medical and dental history accurately including past illnesses, medications, allergies, hospitalizations, family and social histories.
- Ask questions if you are unclear about papers and information that you and your provider have agreed upon.
- Keep your personal belongings in a safe place. Lost and/or stolen personal items are not the responsibility of Waimānalo Health Center.
Universal Patient Compact

As your healthcare partner we pledge to:

- Include you as a member of the team
- Treat you with respect, honesty and compassion
- Always tell you the truth
- Include your family or advocate when you would like us to
- Hold ourselves to the highest quality and safety standards
- Be responsive and timely with our care and information to you
- Help you to set goals for your healthcare and treatment plans
- Listen to you and answer your questions
- Provide information to you in a way you can understand
- Respect your right to your own medical information
- Respect your privacy and the privacy of your medical information
- Communicate openly about benefits and risks associated with any treatments
- Provide you with information to help you make informed decisions about your care and treatment options
- Work with you, and other partners who treat you, in the coordination of your care

As a patient I pledge to:

- Be a responsible and active member of my healthcare team
- Treat you with respect, honesty and consideration
- Always tell you the truth
- Respect the commitment you have made to healthcare and healing
- Give you the information that you need to treat me
- Learn all that I can about my condition
- Participate in decisions about my care
- Understand my care plan to the best of my ability
- Tell you what medications I am taking
- Ask questions when I do not understand and until I do understand
- Communicate any problems I have with the plan for my care
- Tell you if something about my health changes
- Tell you if I have trouble reading
- Let you know if I have family, friends or an advocate to help me with my healthcare

About Your Visit

1. **Scheduling.** To schedule an appointment, call us or use the patient portal to request an appointment.
   - Medical Services: (808) 259-7948
   - Dental Services: (808) 259-5466
   - Vision Services: (808) 259-7948
   - WIC Services: (808) 259-7940

2. **Same day.** For urgent care that is not life-threatening urgent care, contact us for a same day appointment. If you have life-threatening symptoms, call 911 or go to your nearest emergency room.

3. **Arrive Early.** For new patients, please arrive 1 hour before your appointment or for established patients, please arrive 15 minutes before your appointment to check in and update your information. You will be asked to complete a Patient Intake Form.

4. **Complete your pre-visit plan.** Let your provider know if you saw any other doctors or had visits to the emergency room or hospital since your last visit. List any medications, herbs, or over the counter medications you are taking. Write down any questions or concerns you would like to talk to your care team about.

5. **Bring your information.** Remember to bring your identification card and insurance cards. Let us know if there were any changes.

6. **Call to cancel or if you’re running late.** Let us know as soon as possible if you need to cancel your appointment for any reason so your appointment can be given to another patient who needs to be seen. If you are more than 10 minutes late for your appointment, we will make every effort to see you but we may need to reschedule your appointment.

7. **Special Accommodations.** We are wheelchair accessible and the ramp is located on the mauka side of the building. Please let us know in advance if you will need an interpreter for your visit.

   If the office is closed and you need to talk to your provider about an urgent but non-life threatening condition or you are unsure if you need to go to the Emergency Room, you can reach your provider by calling Physician’s Exchange at 524-2575.

NPSF Universal Patient Compact
My Patient Portal

Your medical home on the Web. With the Patient Portal, you can connect with your doctor through a convenient, safe, and secure environment. We use technology to encrypt, safeguard, and secure your personal information.

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL/DENTAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Our Privacy Responsibilities:
Waimānalo Health Center (WHC) is required by law to maintain the privacy of your health information; provide this notice that describes the ways we may use and share your health information; and follow the terms of the notice currently in effect.

Privacy Promise:  WHC understands that your health information is personal and protecting your health information is important. We follow strict federal and state laws that require us to maintain the confidentiality of your health information. You have the right to be notified if a breach of protected health information occurs.

Uses and Disclosures of Health Information Permitted by Law: The following categories describe the ways that the WHC may use and disclose your health information. Some health records including confidential communications with a mental health professional, some substance abuse treatment records, some genetic results, and some health information of minors, may have additional restrictions for use and disclosure under state and federal laws. Your health information will be used or disclosed only for the following purposes:

When you receive care from WHC, we may use your health information for treating you, billing services, and conducting our normal business known as health care operations. Examples of how we use you information include:

Treatment:  We keep records of the care and services provided to you. Health care providers use these records to deliver quality care to meet your needs. For example, your doctor may share your health information with a specialist who will assist in your treatment. We may call you by name in the waiting room when the provider is ready to see you. We may use or disclose your protected health information, as necessary, to contact you to remind you of your appointment.

Payment: We keep billing records that include payment information and documentation of the services provided to you. Your information may be used to obtain payment from you, your insurance company, or another third party. We may so contact your insurance company to verify coverage for your care or to notify them of upcoming services that may need prior notice or approval. We may disclose protected health information to other health care providers or third parties to assist in billing and collection efforts. You have the right to restrict disclosure of your protected health information to a health plan when you pay out of pocket in full for health care services.
Health Care Operations: We use health information to improve the quality of care, train staff and students, provide customer service, manage costs, conduct required business duties, and make plans to better serve our communities. For example, we may use your health information to evaluate the quality of treatment and services provided by our physicians, nurses, and other health care workers.

Individuals Involved in your Care or Payment of your Care: We may disclose your health information to a spouse, family member, close personal friend, or any individual identified by you if we obtain your agreement. You will have the opportunity to identify this person or to object to our disclosing information to them.

Business Associates: WHC may use or disclose health information about you with people who contract with us to provide goods and services used in your treatment or for hospital operations. Examples include copy services, consultants, interpreters, and health transcriptionists. The WHC requires these contractors to protect the confidentiality of your health information as we do.

Research: Under certain circumstances, we may use and disclose your health information for research purposes. Research projects are subject to a special review process that evaluates uses of health information; trying to balance the research needs with the need for patient privacy. Before we use or disclose health information for research the project will have to be approved through this review process.

Fundraising: We may contact you to provide information about WHC sponsored activities, including fundraising programs and events. We would only use contact information, such as your name, address and phone number and the dates you received treatment or services at WHC. Please inform us if you do not want us to contact you for these fundraising efforts.

Health Care Communications: To identify health-related services and products that may benefit you and then contact you about the services and products.

Deceased Individuals: We may release medical information to a coroner, medical examiner, or funeral director as necessary for them to carry out their responsibilities.

Organ Procurement Organizations: We may release your health information to organizations that handle organ procurement or organ, eye, or tissue transplants or to an organ donation bank, as required and necessary to facilitate organ or tissue donation and transplants.

Public Health Activities: WHC may use or disclose your health information with public health authorities in charge of preventing or controlling disease, injury, or disability. For example, the WHC is required

### Pre-Visit Plan

**My Care Team**

- My Primary Care Provider is __________________________
- My Care Coordinator is __________________________
- My Dietitian is __________________________
- My Behavioral Health Provider is __________________________
- My Dentist is __________________________
- My Optometrist/Ophthalmologist is __________________________
- My ‘Ohana Care Team member(s) are ______________

My other care team providers are (i.e., specialists, acupuncturist, cultural healer, herbalist, chiropractor, etc.).

---

The medications, herbs, or over the counter Medications I take are __________________________

My questions for today’s visit are __________________________

The last time I went to the Emergency Room or Hospital was __________________________

What is important to me about my health is ______

My health care goal is __________________________

Comments/Notes: __________________________
Your Patient-Centered Health Care Home

E komo mai to your Health Care Home at the Waimānalo Health Center where YOU are at the heart of the care team. We have several care team members that work together with you to help you reach your health care goals. They can also give you information about medications, nutrition, exercise and stress management. You will be asked to select a primary care provider (PCP), so that there is one person who really knows you, your medical history, and your care team. To get the best care, schedule with your PCP for every visit.

Waimānalo Health Center is committed to providing the highest level of primary and preventive health services, with special attention to the needs of Native Hawaiians and the medically underserved, and improving the health and wellness of individuals and their `ohana, regardless of their ability to pay.

The Waimānalo Health Center is your “Patient Centered Health Care Home,” (PCHCH) also known as your “Patient Centered Medical Home” (PCMH). PCHCH is an approach to how health care is delivered.

At Waimānalo Health Center, we practice the following values:

`Ohana, or family, is important in the Native Hawaiian culture. This phrase is used at the Waimānalo Health Center to reflect our approach to patient care – you and your `ohana are at the center of your care.

Mālama means we listen to our patients with our full attention, seeking to know them and understand their healthcare and wellness needs. To understand their wishes for themselves, their family and the Waimānalo community. We will respond, to the best of our abilities, as caring, compassionate, engaged and professional partners in healthcare.

Pono means that quality healthcare starts with a person’s trust in our services and the excellence of our care to meet their needs. We are committed to maintaining their trust by treating people with respect and confidentiality, and by being open about our organizational practices and results, seeking to continuously improve our work.

Your individual Rights: You have the following rights concerning your health information. A request to exercise any of these rights must be made in writing to the Chief Performance and Compliance Officer.
Right to Alternative Communications: You have the right to request that WHC communicate with you in a certain manner. For example, you may ask that WHC contact you only at work, or a different address than your home address. You may request this during registration.

Right to Inspect and or Copy: You have the right to inspect and obtain copies of your health information. Usually, this includes health and billing records. It does not include psychotherapy notes, or information we put together to prepare for legal action, and certain laws relating to laboratories.

To obtain a copy of your health information, please submit a request in writing to the Medical Records Department. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies and services from your request.

We may deny your request to inspect and copy your records in certain very limited circumstances. We will notify you in writing if your request has been denied and explain how you may appeal the decision. In certain limited situations, we will have to deny you access and you will not have the right to appeal that decision.

Right to Amend: If you think that health information in your record is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as we keep the information. You must provide a reason for the amendment. We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:

- We did not create.
- Is not part of the health information kept by our facility.
- Is not part of the information that you are allowed to inspect.
- Is accurate and complete.

Right to Accounting of Disclosures: You have the right to request a list accounting for any disclosures of your health information we have made. This accounting will not include disclosures:

- For treatment, payment, or health care options
- To persons involved in your care or for notification purposes
- Incidental to an otherwise permitted use or disclosure
- To correctional institutions or other law enforcement officials
- As part of a limited data set
- For national security or intelligence purposes
- For any use or disclosure that you specifically authorized or requested.

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Hours

MEDICAL SERVICES (808) 259-7948
Monday  8am – 12pm; 1pm – 8pm
Tuesday  8am – 12pm; 1pm – 5pm
Wednesday 8am – 12pm; 1pm – 5pm
Thursday 8am – 12pm; 1pm – 8pm
Friday  8am – 12pm; 1pm – 5pm
Saturday 8am – 12pm
Sunday Closed

DENTAL SERVICES (808) 259-5466
Monday  8am – 12pm; 1pm – 5pm
Tuesday  8am – 12pm; 1pm – 5pm
Wednesday 8am – 12pm; 1pm – 5pm
Thursday 8am – 12pm; 1pm – 7pm
Friday  8am – 12pm; 1pm – 5pm
Saturday 8am – 12pm (Keiki clinic only)
Sunday Closed

VISION SERVICES (808) 259-7948
Monday  8am – 12pm; 1pm – 5pm
Tuesday  8am – 12pm; 1pm – 5pm
Wednesday 8am – 12pm; 1pm – 5pm
Thursday 8am – 12pm; 1pm – 5pm
Friday Closed
Saturday Closed
Sunday Closed

WIC SERVICES (808) 259-7940
Monday  7:30am – 5pm
Tuesday  7:30am – 5pm
Wednesday 7:30am – 5pm
Thursday 7:30am – 5pm
Friday  7:30am – 5pm
Saturday 8am-12pm (1st and 3rd of the month)
Sunday Closed

If the office is closed and you need to talk to your provider about a non-life threatening but urgent condition or are unsure if you need to go to the Emergency Room, you can reach your provider by calling Physician’s Exchange at 524-2575

Your request must state a time period, which may not be longer than 6 years and not include dates before April 14, 2003. The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred. We will mail you a list of disclosures within 30 days of your request, or notify you if we are unable to have the list within 30 days and by what date we can have the list; but this date will not exceed 60 days from the date you made the request.

Right to Request Special Restrictions: You have the right to request special restrictions on sharing of your health information. You also have the right to request a limit on the health information we disclose about you to someone who is involved in your care. We are not required to agree to your request for restrictions if we are unable to comply or believe it will negatively affect the care we provide for you. In your request, you must tell us what information you want to limit and to whom you want the limits to apply; for example, disclosure of specific information to your spouse.

Right to Copy of This Notice: You have the right to obtain a paper copy of this Notice at any time. Copies of your current Notice are available from our front desk staff.

Changes to this Notice: We reserve the right to change our privacy practices as described in this Notice at any time. Except when required by law, we will write and make available upon request a new Notice before we make any changes in our privacy practices. The privacy practices in the most current Notice will apply to information we already have about you as well as any information we receive in the future. The Notice will contain an effective date.

Contact Us: If you would like further information about your privacy rights, are concerned that your privacy rights have been violated, or disagree with a decision that we made about access to your health information, contact the Chief Performance and Compliance Officer at (808) 954-7156.

All complaints must be submitted in writing. We will investigate all complaints and will not retaliate against you for filing a complaint with the Office of Civil Rights of the U. S. Department of Health and Human Services. There will be no retaliation for filing a complaint.
HAPPY TO BE YOUR HEALTH CARE HOME

Your experience with the Waimānalo Health Center is important to us. Every year we will ask patients about their experience with their health care home. You may be asked to answer a few questions about your experience at the health center. Your feedback is valuable to us and we thank you for taking the time to answer these questions if asked.

We also welcome comments through our website, waimanalohealth.org at “Share your Mana`o” located under “Contact Us.”