



## **JOINT NOTICE OF PRIVACY PRACTICES**

THIS NOTICE DESCRIBES HOW PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. THIS NOTICE ALSO DESCRIBES YOUR RIGHTS AND SOME OBLIGATIONS OVERLAKE HAS REGARDING THE USE AND DISCLOSURE OF YOUR PROTECTED HEALTH INFORMATION. **PLEASE REVIEW IT CAREFULLY.**

This Notice is effective as of December 2025.

For purposes of this Notice, "Overlake" or "we" means Overlake Medical Center & Clinics.

### **OVERLAKE'S PLEDGE AND RESPONSIBILITIES REGARDING YOUR PROTECTED HEALTH INFORMATION**

We understand that information about you and your medical and behavioral health is personal. We are committed to ensuring the privacy of your protected health information, as required under federal and state law.

Under federal privacy laws, this information is called "protected health information." Protected health information includes certain information we have created or received that identifies you, including information regarding your health or payment for your health care at an Overlake facility, whether by hospital personnel, your personal doctor or other practitioners involved in your health care. Protected health information includes your medical records and personal information such as your name, social security number, address, and phone number.

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your protected health information.
- We must follow the duties and privacy practices described in this Notice and give you a copy of it.
- We will not use or share your protected health information other than as described in this Notice unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

**For more information see: [Notice of Privacy Practices | HHS.gov](#)**

## **WHO WILL FOLLOW THIS NOTICE**

This Notice describes the practices of Overlake and that of:

- Any health care professional authorized to enter information into your medical record at any Overlake facility.
- All departments and units of Overlake.
- Any member of a volunteer group we allow to help you while you are at an Overlake facility.
- All Overlake employees and personnel including contracted or agency staff.
- Other health care providers and entities who have agreed to follow and abide by the “joint notice of privacy practices” terms described below.

## **JOINT NOTICE OF PRIVACY PRACTICES**

In addition to those persons identified above, Overlake Medical Center & Clinics, Overlake Medical Clinics, LLC, and Overlake Ambulatory Surgery Center, LLC have been designated as a single Affiliated Covered Entity (ACE) under Health Insurance Portability and Accountability Act (HIPAA) and have adopted this Joint Notice of Privacy Practices. This means they may use and share your protected health information as one covered entity for purposes of treatment, payment, and health care operations.

Independent practitioners who provide care at Overlake facilities have also agreed to follow this Joint Notice with respect to care delivered in those facilities. These independent practitioners may access your protected health information where there is a legitimate need to do so for health care treatment, payment, and health care operations related to the joint care setting at Overlake facilities.

When providing care outside of Overlake facilities, independent practitioners are not part of the ACE and will generally follow their own Notices of Privacy Practices. You are encouraged to request information from a non-Overlake practitioner or entity about any separate Notice of Privacy Practices that applies when care is provided at non-Overlake offices or facilities.

## **ORGANIZED HEALTH CARE ARRANGEMENT**

Overlake participates in two separately organized health care arrangements (OHCA) under HIPAA: North Puget Sound Clinically Integrated Network and MultiCare Connected Care. Each OHCA is a distinct collaboration among health care providers that jointly participate in certain activities, such as quality improvement or joint operational functions. Overlake’s participation in these OHCA allows it to share health information with other OHCA members for treatment, payment, and health care operations purposes, as permitted by HIPAA.

## **OTHERS WHO MAY ACCESS OR USE YOUR PROTECTED HEALTH INFORMATION**

Overlake participates in secure health information exchange networks that allow your electronic protected health information to be shared with other health care providers and entities involved in your care by default. This helps ensure that your treating providers have access to the most up-to-date information about your treatment. We may also provide secure connectivity to our electronic health record system for independent

community providers who participate in your care. Access to your information through these systems is limited to providers and staff with a legitimate need to know, and all participants are required to follow applicable federal and state privacy and security laws.

## **YOUR RIGHTS REGARDING YOUR PROTECTED HEALTH INFORMATION**

Please review the following information to learn about your rights regarding your protected health information. You can learn more about rights by going to [www.overlakehospital.org/visit/medical-records](http://www.overlakehospital.org/visit/medical-records), by calling 425-688-5643, or by sending a written request to Overlake Medical Center & Clinics, Health Information Management, 1035 116<sup>th</sup> Ave NE, Bellevue, WA 98004.

### **YOU HAVE A RIGHT TO:**

**Get an electronic or paper copy of your health record** – Usually this includes treatment and billing records and does not include psychotherapy notes.

- To request an opportunity to inspect and/or obtain an electronic or paper copy of your protected health information in your designated records set, visit [www.overlakehospital.org/visit/medical-records](http://www.overlakehospital.org/visit/medical-records) to obtain a copy of the request to release of information form or contact Health Information Management (medical records) at 425-688-5643.
- We will provide the requested information as quickly as reasonably possible, and no later than 15 working days of your request. You may be charged a reasonable, cost-based fee for copies.
- In certain limited circumstances, we may deny your request to inspect and/or copy your protected health information. You may request that the denial be reviewed.

**Ask us to correct certain protected health information** – If you feel that information we have about you is incorrect or incomplete you can request an amendment to such information.

- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

**Request an accounting of certain disclosures** – You may request an accounting of certain disclosures of your protected health information listing all the disclosures we made to others for six years prior to the date you ask.

- We will include all disclosures except those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We will provide one accounting a year for free but may charge a reasonable, cost-based fee if your ask for another within 12 months.

**Request restrictions** – You may request in writing that we limit the way we use and disclose your protected health information.

- You also have the right to request a limit on the protected health information we disclose about you to someone who is involved in your care or the payment of your care, like a family member or friend.
- If you want to put such a restriction in place, please notify the Health Information Management Department for assistance. You will need to complete the Request for Restrictions form for the request to be processed.
- We are not required to agree to your request, and we may say “no” if it would affect your care or create operational challenges.
- If we do agree to your request, we will comply unless the information is needed to provide emergency treatment to you.

**Right to request nondisclosure to health plans for self-paid items or services –**

You have a right to request in writing that healthcare items or services for which you self-pay for in full in advance of your visit not be disclosed to your health plan. We will say “yes” unless a law requires us to share that information.

- You are responsible for notifying any other providers, such as your pharmacy, of any restriction requests.

**Request confidential communications –** You may request in writing that confidential communications about medical or behavioral health matters be made in a certain way or at a certain location.

- For example, you can ask that we only contact you at work or by mail to an alternative address.
- We will say yes to all reasonable requests. You do not have to provide a reason, but the request must specify how or where you wish to be contacted.

**Ask us to limit what we use or share –** You may ask us not to use or share certain protected health information for treatment, payment or our operations.

- We are not required to grant your request and may say “no” if it would impact your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

**Choose someone to act for you –** If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your protected health information. We will ask the person to show proof of this authority to act for you before we take any action.

**Receive a paper copy of this notice –** You can request a paper copy of this Notice at any time from Overlake, even if you have agreed to receive this notice electronically.

- This Notice is also available online at [www.overlakehospital.org](http://www.overlakehospital.org).

## **USES AND DISCLOSURE OF YOUR PROTECTED HEALTH INFORMATION BY OVERLAKE**

**Your Choices** – For certain protected health information, you can tell us your choices about what we share. If you have a clear preference for how we share your protected health information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions, whenever possible.

### **In these cases, you have both the right and choice to tell us to –**

- Share protected health information with your family, close friends, or others involved in your care:
  - We may disclose your medical information to immediate family members or another person with whom you have a close personal relationship;
- Share protected health information in a disaster relief situation; and
- Include your protected health information in a hospital directory.

If you do not want Overlake to disclose your medical information to family members or others as outlined here, please notify Overlake of this.

### **In these cases, we will not share your protected health information unless you give us written permission (signed consent) –**

- Marketing purposes where remuneration is received:
  - Limited information about you may be used to support communication about available products or services;
  - If you do not wish to receive such materials, please e-mail [healthyoutlook@overlakehospital.org](mailto:healthyoutlook@overlakehospital.org);
- Sale of your protected health information;
- Most sharing of psychotherapy notes; and
- Situations not described in this Notice that do not pose a threat to health or safety

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your protected health information if we believe it is in your best interest. We may also share your protected health information when needed to lessen a serious and imminent threat to health or safety, or to assist your family in locating you during a disaster.

**In the case of fundraising** – We may contact you for fundraising efforts, but you can tell us not to contact you again.

- If you no longer wish to receive fundraising requests supporting Overlake, please call (toll-free) 425-688-5525, or alternatively send an e-mail to

[Solicitationopt-Out@overlakehospital.org](mailto:Solicitationopt-Out@overlakehospital.org).

- We respect your choice regarding fundraising communications and your decision will have no impact on your treatment or payment for services at Overlake.

**Overlake typically will use or share your protected health information in the following ways –**

**Treatment:** We may use and disclose your protected health information to provide you with medical treatment and services and share it with other professionals who treat you.

- This use and disclosure may be for continuity of care or to doctors, nurses, technicians, health care students, or other health system personnel who are involved in your care.
- We may use and disclose your protected health information to different departments to coordinate activities such as prescriptions, lab work and x-rays and to other health care providers who may be involved in your medical care, such as long-term care facilities, other hospitals or clinics, or remote health care providers such as the services offered by telemedicine providers who may reside in other communities, including communities outside of Washington.

**Payment:** As permitted by law, we may use or disclose your protected health information to get payment from health plans and other entities.

- This includes billing for treatment and services you receive at an Overlake facility.
- In addition, we may use or disclose your protected health information to collect payment or to obtain prior approval for treatment and services.

**Health Care Operations:** We can use and share your protected health information to run our business, improve your care, and contact you when necessary.

- Running our business includes activities such as scheduling, infection control, the creation of de-identified data, training advanced technologies, and population health activities.
- Advanced Technologies. We may use or disclose your health information for purposes of developing new technologies and tools:
  - Artificial Intelligence (AI): Your protected health information may be utilized within different platforms where AI is implemented. We implement AI in a variety of areas that serve either an administrative or clinical purpose. We work to ensure that all privacy and security safeguards are in place to protect your information via a comprehensive AI review process.
  - Video & Audio Recording: Your image, voice or other protected health information may be captured by our cameras or other recording devices:
    - As you enter an Overlake property or facility, there may be cameras throughout;
    - Being worn by the Overlake Security team when they turn their body worn cameras on; and

- For clinical purposes when part of your overall care, including to assist our clinicians with the documentation about the care they provided you.
- **De-Identified Information.** We may use your protected health information, or disclose it to a third party whom we have hired, to create information that does not identify you in any way. Once we have de-identified your information, it can be used or disclosed in any way according to law without your authorization or consent, including but not limited to, research studies, use or development of AI tools and other advanced technologies, and health care/health operations improvement activities.
  - We may also use and disclose your protected health information to other individuals (such as consultants and attorneys) and organizations that help us with our business activities.
  - We may use your protected health information for internal purposes, like ensuring the quality of care, identifying training needs, reviewing outcomes, sending patient satisfaction surveys, and other administrative activities.
  - We may disclose your protected health information to Business Associates, or companies that provide a service to us or on our behalf and have provided satisfactory assurances that they will protect your protected health information.

**Overlake may also use your protected health information in the following ways –**

**Public Health and Safety Issues** – We may disclose your protected health information to agencies, when necessary, to support public health activities. These activities generally include the following:

- To prevent or control disease, injury or disability;
- To report births and deaths;
- To report abuse or neglect;
- To report reactions to medications or problems with products;
- To notify people of recalls of products they may be using;
- To notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition;
- To notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect or domestic violence. We will only make this disclosure when required or authorized by law; and
- Preventing or reducing a serious threat to anyone's health or safety.

**Research** – We engage in important health research. Our research may involve medical procedures and some is limited to collection and analysis of protected health information. All research projects involving protected health information are subject to special approval process conducted by an Institutional Review Board (IRB) to assure appropriate access to and use of your information. An IRB is a committee that is responsible, under federal law, for reviewing and approving human subject research to protect the safety of the participants and the confidentiality of protected health information. Unless the IRB has issued a waiver of informed consent and authorization, we will ask for your written permission (informed consent or authorization) before a

researcher will have access to your name, address, or other information that reveals your identity. In limited circumstances, prior to the start or enrollment in a study, your protected health information may be disclosed without your informed consent and authorization. This is done on a limited basis and in compliance with state and federal law.

**Limited Data Set Information** – We may disclose limited health information to third parties for purposes of research, public health and health care operations. This limited data set will not include any information that could be used to identify you directly.

**Comply with the Law** – We will share protected health 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 are complying within federal privacy law.

**Organ and Tissue Donation** – We can share protected health information about you with organ procurement organizations.

**Coroners, Medical Examiners, and Funeral Directors** – We can share protected health information with a coroner, medical examiner, or funeral director when an individual dies.

**Workers' Compensation** – We can use or share protected health information about you for workers' compensation claims.

**Government and Law Enforcement Requests** – We can use or share protected health information about you:

- With health oversight agencies for activities authorized by law;
- For special government functions such as military, national security, and Presidential protective services;
- In limited circumstances, for law enforcement purposes or with law enforcement officials:
  - In response to a court order, subpoena, warrant, summons, or similar legal process;
  - To help identify or locate a suspect, fugitive, material witness, or missing person (limited information only, such as name, address, date/place of birth, Social Security number, and physical characteristics);
  - With the victim's consent, or if the victim is incapacitated and disclosure is in the best interest of the victim;
  - About a death we believe may have resulted from criminal conduct;
  - About criminal conduct on our premises; or
  - In a medical emergency, when necessary to report a crime, the location of the crime or victims, or the identity, description, or location of the person who committed the crime.

**Lawsuits and Disputes** – We may disclose your protected health information in response to a court or administrative order, subpoena, discovery request, or other lawful process, if you are involved in a lawsuit or a dispute.

**Contacting You** – Overlake may contact you about your health care using the addresses, phone numbers and e-mail addresses that you provide us. This may include using an automated phone dialing system, pre-recorded or synthetic voice messages, texting, or e-mail. When we contact you in this manner, you will be given the opportunity to opt out of receiving similar communications going forward.

- Our messages may include, but are not limited to, information about appointment reminders, discharge planning, billing, prescription reminders, research opportunities, and regulatory notices provided in lieu of first-class mail. Texts and e-mails are not encrypted and there is a risk that someone else could read or access these messages. We therefore take steps to limit the amount of protected health information that these messages contain. If you do not wish to receive these types of text or e-mail messages, please let us know, and we will honor your request within reason.

**Treatment Alternatives** – We may use or disclose protected health information to tell you about or recommend possible treatment options or alternatives.

**Health-Related Benefits and Services** – We may use or disclose protected health information to tell you about health-related benefits, services, or medical education classes.

**Inmates** – We may disclose your protected health information to a correctional facility or law enforcement official, if you are an inmate or in custody.

**Incidental Disclosures** – Certain incidental disclosures of your protected health information may occur as a byproduct of lawful and permitted use and disclosure of your protected health information. Reasonable safeguards are in place to minimize these disclosures.

**Blood Conservation Services** – We may use or disclose your protected health information if you have indicated affiliations with certain organizations and we believe you may be an ideal candidate who could benefit from blood conservation services.

**Serious and imminent threats** – We may share your protected health information when needed to lessen a serious and imminent threat to the health or safety of you, the public, or another person.

## **CONFIDENTIALITY OF SUBSTANCE USE DISORDER PATIENT RECORDS**

Some Overlake clinics and locations and staff specialize in providing substance use disorder treatment (Programs). The confidentiality of substance use disorder patient records maintained by these Programs may be protected by special federal and state law and regulations, in addition to HIPAA. Generally, such a Program may not say to a person outside the Program that a patient attends the Program, or disclose any information identifying a patient as having or having had a substance use disorder unless:

1. The patient consents in writing;
2. The disclosure is allowed by a court order; or
3. The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation.

Violation of the federal law and regulations governing the confidentiality of substance use disorder patient records by a Program is a crime. Suspected violations may be reported to the appropriate authorities in accordance with federal regulations:

The US Attorney where the Program is located:

U.S. Attorney for the Western District of Washington  
United States Attorney's Office  
700 Stewart Street, Suite 5220  
Seattle, WA 98101

For opioid treatment programs (previously known as methadone programs), you also can contact: SAMHSA Center for Substance Abuse Treatment, 5600 Fishers Lane, Rockville, MD 20857 Phone 877-SAMHSA-7 (877-726-4727) Federal law and regulations do not protect any information about a crime committed by a patient either at the Program or against any person who works for the Program or about any threat to commit such a crime. Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities (See 42 U.S.C. 290dd-2 and 42 U.S.C. 290ee-3 for Federal laws and 42 CFR Part 2 for Federal regulations).

## CONFIDENTIALITY OF REPRODUCTIVE HEALTH PATIENT RECORDS

**Prohibited Uses:** Some Overlake clinics and locations provide reproductive health care services. The confidentiality of reproductive health records is protected by special federal and state law and regulations. It is prohibited to use or disclose patient information to:

- Conduct a criminal, civil or administrative investigation for the act of seeking, obtaining, providing or facilitating reproductive health care;
- Impose criminal, civil or administrative liability on any person for seeking, obtaining, providing, or facilitating reproductive health care; or
- Identify any person for purposes of such investigation or liability.

Prohibited Disclosure Example: Patient A travels to Washington State for reproductive health services that are legal in Washington State but not legal in Patient A's state of residence. The court in Patient A's state of residence issues an order requiring Overlake to produce the records of Patient A to enforce the stricter reproductive health laws in their state.

Health information disclosed under the protections of the HIPAA Privacy Rule may no longer be protected if redisclosed by the recipient of the health information.

## **OTHER SENSITIVE INFORMATION AND PATIENT RECORDS**

Certain types of protected health information may have additional protection under state or federal law. For example, protected health information about mental health, HIV/AIDS, and genetic testing results is treated differently than other types of health information. To the extent applicable, Overlake will need to get your written permission before disclosing these categories of information to others in most circumstances.

## **OTHER USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION**

Other uses and disclosures of your protected health information not covered by our current Notice or otherwise permitted by applicable laws will only be made with your written permission. You may revoke any permission you have given to Overlake by submitting a request in writing to the Overlake Office of Compliance & Risk Management (at the contact information under Questions and Complaints). If you revoke your permission, we will no longer use or disclose your protected health information for the reasons covered by your written authorization unless required by law. You understand that we are unable to take back any uses or disclosures we have already made, while your permission was in effect, and that we are required to retain our records of the care that we provide to you.

## **CHANGES TO THIS NOTICE**

Overlake can change the terms of this Notice, and the changes will apply to all information we have about you. The new Notice will be available upon request, at our facilities, and on our website.

## **QUESTIONS AND COMPLAINTS**

If you have general questions about this Notice, please contact the Overlake Office of Compliance & Risk Management by phone: 425-688-5717 or e-mail:

[OCRM@overlakehospital.org](mailto:OCRM@overlakehospital.org).

If you believe your privacy rights have been violated, you may file a complaint with the Overlake Medical Center & Clinics, Office of Compliance & Risk Management, 1035 116<sup>th</sup> Ave NE, Bellevue, WA 98004. If we cannot resolve your concerns, you also have the right to file a written complaint with the Centralized Case Management Operations, U.S. Department of Health and Human Services, by sending a letter to 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201, e-mailing [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov), calling 1-877-696-6775, or visiting <https://www.hhs.gov/hipaa/filing-a-complaint/what-to-expect/index.html>

We will not retaliate against you for filing a complaint and the quality of your care will not be jeopardized.

## **NOTICE OF LANGUAGE AVAILABILITY – FREE INTERPRETER SERVICE**

Overlake Medical Center & Clinics (Overlake) offers interpreter services for all languages at no cost to you. If your language is not listed, Overlake will still provide interpreter services

at no cost to you.

### English

Notice of Availability: If you speak English, free interpreter services and free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Please contact clinic/hospital staff, your health care provider, or call for assistance: [425-688-5304](tel:425-688-5304). We're glad you're here, thank you for choosing Overlake.

### عربي (Arabic)

إشعار بالتوفر: إذا كنت تتحدث الإنجليزية، تتوفر لك خدمات الترجمة الفورية وخدمات المساعدة اللغوية مجاناً. كما تتوفر مجاناً وسائل وخدمات مساعدة مناسبة لتقديم المعلومات بتنسيقات ميسرة الوصول. يُرجى التواصل مع موظفي العيادة أو المستشفى، أو مقدم نحن سعداء بوجودك هنا. 425-688-5304: الرعاية الصحية الخاص بك، أو الاتصال على الرقم التالي للحصول على المساعدة، Overlake. وشكراً لاختيارك مركز

### 繁體中文 (Chinese - Traditional)

服務可用性須知：如果您使用廣東話（中文，我們可為您提供免費的傳譯服務和語言協助服務。此外，我們亦會免費提供適當的輔助器材和服務，以無障礙格式提供資訊。請聯絡診所／醫院職員、您的醫療服務提供者，或致電以下電話號碼尋求協助：425-688-5304.感謝您的支持，亦感謝您選擇 Overlake.

### 简体中文 (Chinese - Simplified)

服务可用性须知：如果您使用普通话(中文)，我们可为您提供免费的口译服务和免费的语言协助服务。此外，还免费提供适当的辅助器具和服务，以无障碍格式提供信息。请联系诊所/医院工作人员、您的医疗服务提供者，或者拨打以下电话号码寻求帮助：425-688-5304.感谢有您，也感谢您选择 Overlake.

### فارسی (Farsi)

اطلاعه در مورد دسترس: اگر شما به زبان انگلیسی صحبت می‌کنید، خدمات مترجم رایگان و خدمات کمک زبانی رایگان برای شما در دسترس هستند. همچنین، وسایل کمکی مناسب و خدماتی برای ارائه اطلاعات به صورت قابل دسترس نیز بدون هزینه ارائه می‌شوند. لطفاً با کارکنان کلینیک/بیمارستان، ارائه‌دهنده خدمات درمانی خود تماس بگیرید یا برای دریافت کمک با شماره را انتخاب کردید سپاسگزاریم Overlake زیر تماس بگیرید: 5304-688-425. خوشحالیم که اینجا هستید، از اینکه

### हिन्दी (Hindi)

उपलब्धता की सूचना: यदि आप अंग्रेजी बोलते हैं, तो आपके लिए मुफ्त दुभाषिया सेवाएं और मुफ्त भाषा सहायता सेवाएं उपलब्ध हैं। जानकारी को सुलभ प्रारूप में प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएं भी मुफ्त में उपलब्ध हैं। कृपया क्लिनिक/अस्पताल के स्टाफ, अपने स्वास्थ्य सेवा प्रदाता से संपर्क करें, या सहायता के लिए इस नंबर पर कॉल करें: [425-688-5304](tel:425-688-5304)। हमें खुशी है कि आप यहाँ हैं, Overlake को चुनने के लिए धन्यवाद।

### 日本語 (Japanese)

ご利用案内：日本語をお話しの場合、無償の通訳サービスおよび言語サポートサービスをご利用いただけます。利用しやすい形態で情報を得ることのできる適切な補助機器やサービスも無償で

ご用意しています。詳しくは、診療所/病院の関係者やかかりつけの医療機関にご連絡いただくか、[425-688-5304](tel:425-688-5304) にお電話してください。Overlakeをご利用いただき誠にありがとうございます

### **ខ្មែរ (Khmer)**

សេចក្តីជូនដំណឹងអំពីការមានផ្តល់សេវាកម្ម

ជូន៖ ប្រសិនបើអ្នកនិយាយភាសាអង់គ្លេស អ្នកអាចទទួលបានសេវាកម្មបកប្រែផ្ទាល់មាត់ និងសេវាកម្មជំនួយ

ផ្នែកភាសាដោយឥតគិតថ្លៃ។ ឧបករណ៍ជំនួយ និងសេវាកម្មសមរម្យសម្រាប់ផ្តល់ព័ត៌មានក្នុងទម្រង់ដែលអាចចូលប្រើប្រាស់បាន ក៏មានផ្តល់ជូនដោយឥតគិតថ្លៃផងដែរ។

សូមទាក់ទងបុគ្គលិកគ្លីនិក/មន្ទីរពេទ្យ អ្នកផ្តល់សេវាថែទាំសុខភាពរបស់អ្នក ឬហៅទូរសព្ទជំនួយតាមលេខ៖ [425-688-5304](tel:425-688-5304)។

យើងរីករាយដែលអ្នកនៅទីនេះ និងសូមអរគុណដែលបានជ្រើសរើស Overlake ។

### **한국인 (Korean)**

이용 가능 여부 안내: 한국어를 구사하는 경우,

무료 통역 서비스와 무료 언어 지원 서비스를 이용하실 수 있습니다.

접근 가능한 형식으로 정보를 제공하는 적절한 보조 도구와 서비스도 무료로 제공됩니다.

도움이 필요하시면 클리닉/병원 직원, 담당 의료 서비스제공자에게 문의하시거나 [425-688-5304](tel:425-688-5304) 번으로 전화해 주십시오. 귀하를 도와드릴 수 있어서 기쁩니다. Overlake

를 선택해 주셔서 감사합니다.

### **ਪੰਜਾਬੀ (Punjabi)**

ਉਪਲਬਧਤਾ ਦਾ ਨੋਟਿਸ: ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ,

ਤਾਂ ਮੁਫਤ ਦੁਆਰਾ ਸੇਵਾਵਾਂ ਅਤੇ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਉਪਲਬਧ ਹਨ। ਪਹੁੰਚਯੋਗਫਾਰਮੈਟਾਂ ਵਿੱਚ ਜਾਣਕਾਰੀ ਪ੍ਰਦਾਨ ਕਰਨ ਲਈ ਢੁਕਵੀਆਂ ਸਹਾਇਕ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ ਵੀ ਮੁਫਤ ਉਪਲਬਧ ਹਨ। ਕਿਰਪਾ ਕਰਕੇ ਕਲੀਨਿਕ/ਹਸਪਤਾਲ ਸਟਾਫ਼, ਆਪਣੇਸਿਹਤ ਸੰਭਾਲ ਪ੍ਰਦਾਤਾ ਨਾਲ ਸੰਪਰਕ ਕਰੋ,

ਜਾਂ ਸਹਾਇਤਾ ਲਈ ਹੇਠਾਂ ਦਿੱਤੇ ਨੰਬਰ 'ਤੇ ਕਾਲ ਕਰੋ: 425-688-5304। ਸਾਨੂੰ ਖੁਸ਼ੀ ਹੈ ਕਿ ਤੁਸੀਂ ਇੱਥੇ ਹੋ, Overlake ਚੁਣਨਲਈ ਤੁਹਾਡਾ ਧੰਨਵਾਦ।

### **Русский (Russian)**

Если вы говорите на русском языке, мы предоставим вам бесплатно услуги переводчика и языковой поддержки. Необходимые вспомогательные средства и услуги для представления информации в доступных формах (специальные возможности) также предоставляются бесплатно. Для получения помощи обратитесь к персоналу клиники/больницы, к вашему врачу, или позвоните по следующему номеру: 425-688-5304. Мы рады вам помочь, благодарим вас за обращение в Overlake!

### **Español (Spanish)**

Aviso de disponibilidad: Si usted habla español, hay servicios disponibles gratuitos de interpretación y de asistencia en su idioma. Además, se ofrecen servicios gratuitos y ayudas auxiliares que brindan información en formatos accesibles. Comuníquese con el personal del hospital o de la clínica, con su proveedor de atención de salud o llame al siguiente número para recibir ayuda: 425-688-5304. Nos alegra que esté aquí, gracias por elegir a Overlake.

### ไทย (Thai)

ประกาศเกี่ยวกับการให้บริการ หากคุณพูดภาษาอังกฤษ คุณสามารถใช้บริการล่ามฟรีและบริการช่วยเหลือด้านภาษาได้ฟรี นอกจากนี้ยังมีอุปกรณ์และบริการเสริมที่เหมาะสมเพื่อให้ข้อมูลในรูปแบบที่เข้าถึงได้โดยไม่เสียค่าใช้จ่าย กรุณาติดต่อเจ้าหน้าที่คลินิก/โรงพยาบาล ผู้ให้บริการด้านสุขภาพของคุณ หรือโทรขอความช่วยเหลือที่หมายเลข 425-688-5304 เราดีใจที่คุณมา ขอขอบคุณที่เลือก Overlake.

### Український (Ukrainian)

Повідомлення про наявність послуг: Якщо ви говорите українською, вам надаються безкоштовні послуги перекладача та безкоштовна мовна допомога. Відповідні допоміжні засоби та послуги для забезпечення інформацією в доступних форматах також надаються безкоштовно. Зверніться за допомогою до персоналу клініки/лікарні, свого лікаря або зателефонуйте за наступним номером: 425-688-5304. Ми раді, що ви з нами. Дякуємо, що обрали Overlake.

### Tiếng Việt (Vietnamese)

Thông báo về dịch vụ: Nếu quý vị nói tiếng Việt, chúng tôi có dịch vụ phiên dịch viên miễn phí và dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Các dịch vụ và hỗ trợ bổ sung phù hợp nhằm cung cấp thông tin ở định dạng dễ tiếp cận cũng được cung cấp hoàn toàn miễn phí. Vui lòng liên hệ với nhân viên tại phòng khám hoặc bệnh viện, nhà cung cấp dịch vụ chăm sóc sức khỏe của quý vị hoặc gọi đến số điện thoại sau để được hỗ trợ: 425-688-5304. Chúng tôi rất hân hạnh được phục vụ quý vị, xin trân trọng cảm ơn vì đã tin tưởng lựa chọn Overlake.

## DISCRIMINATION IS AGAINST THE LAW

Overlake complies with applicable State and Federal civil rights laws and does not discriminate on the basis of age, race, national origin, ethnicity, immigration status, religion, culture, language, physical or mental disability, sex, sexual orientation, and gender identity, citizenship, immigration status, military status, or any other basis prohibited by state or federal law in admission to, participation in, or receipt of the services and benefits under any of its programs and activities. Overlake:

- Provides appropriate auxiliary aids (e.g., qualified sign language interpreters, written information in other formats (large print, audio, other accessible formats)) to persons with impaired sensory, manual, or speaking skills, where necessary to afford such persons an equal opportunity to benefit from the service in question;
- Permits the use of service animals in accordance with the law;
- Makes its facilities accessible to those with mobility impairments in accordance with the law; and
- Provides free language assistance services (e.g., qualified interpreters, information in other languages) to individuals with Limited English Proficiency.

If you need these services, please contact the Language Access/Interpreter Services

Team at 425-688-5304. If you believe that Overlake has failed to provide these services or discriminated in another way on the basis of age, race, national origin, ethnicity, immigration status, religion, culture, language, physical or mental disability, sex, sexual orientation, and gender identity, citizenship, immigration status, military status, or any other basis prohibited by state or federal law in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, you can file a grievance with: Overlake Office of Compliance & Risk Management:

- E-mail: [OCRM@overlakehospital.org](mailto:OCRM@overlakehospital.org)
- Integrity Line: 877-683-7525
- Writing: Overlake Medical Center & Clinics, Office of Compliance & Risk Management, 1035 116<sup>th</sup> Ave NE, Bellevue, WA 98004

You can also file a civil rights complaint with the U.S. Department of Health & Human Services, Office for Civil Rights. File electronically through the Complaint Portal at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

**File by mail:** U.S. Department of Health & Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201

**File by phone:** 1-800-368-1019

Complaint files are available at <http://www.hhs.gov/ocr/office/file/index.html>

You can also file a civil rights complaint with U.S. Department of Justice Civil Rights Division through the Complaint Portal, or by mail or phone at:

**File by mail:** U.S. Department of Justice, Civil Rights Division, 950 Pennsylvania Avenue, NW, Washington, D.C. 20530

**File by phone:** 1-800-514-0301 (voice) or 1-833-610-1264 (TTY)

**More information:** [ada.gov](http://ada.gov).