

# Corporate orientation welcome packet

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Charleston Area  
Medical Center

 Vandalia Health







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# Congratulations and welcome

## Congratulations and Welcome to CAMC!

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In accepting your new position, you are joining an organization that's nearly 10,000 employees strong. As Southern West Virginia's premiere medical teaching facility, CAMC prepares a variety of health care practitioners to care for West Virginians. Our well-trained physicians, nurses, allied health professionals and support staff offer thousands of families convenient access to quality health care.

CAMC is recognized both regionally and nationally for our focus on quality care. We are home to one of the top heart programs in the United States, the state's only dedicated Women and Children's Hospital, the only kidney transplant center in the state, a Level I Trauma Center and the highest level of neonatal care.

CAMC has nearly 600 physicians with admitting privileges, and together we care for more of the uninsured, Medicaid and Medicare populations than any other hospital in the state. CAMC is the backbone of tertiary care for West Virginia, and now that you have joined us, you're helping to provide this critical care as well.

In addition to national recognition for our clinical performance, I believe that we are truly the Heart and Soul of our community on a more personal level. Each month, I am privileged to review award nominations from employees, managers and patient families describing the excellent and personal care they have witnessed from our employees.

There is no doubt that ours is a prestigious place to practice in your chosen field. But suppose you haven't yet settled into your chosen field. Just ask around and you will be sure to find a co-worker who, with the help of one of our many exciting workforce development programs, has established a rewarding and fulfilling career here. We recently have offered programs leading to careers in health unit coordinating, respiratory therapy and nursing. We also offer GED-preparation and computer skills training classes for our employees.

As you begin your journey with Charleston Area Medical Center, I invite you to join our award-winning team in focusing on what has brought us all into the field of health care: Our mission – striving to provide the best health care to every patient, every day.

Glenn Crotty, Jr., MD  
President and CEO, CAMC



# New employee checklist

## Congratulations! Your onboarding to CAMC has begun!

In this booklet, along with the electronic notification you received, you will find information regarding orientation and benefits.

The following checklist has been provided to you to ensure you are prepared for your first day of employment and orientation. All dates, times, and contact numbers will be included in your electronic notification you received.

- Pre-employment physical
- Complete section 1 of the I-9 process sent to you via email. This process must be completed prior to reporting to the HR office on the day of your physical.
- Report to the HR office to complete section 2 of the I-9 process. You must provide documentation from list A or B and C. **Note:** If you do not complete the I-9 process, you will not be permitted to start your employment.
- Report to security to receive your ID badge. The Security Office is located in Suite 404, Memorial MSOB.

### Background check

You will receive an email request to complete a background check authorization form during the onboarding process. This form gives Charleston Area Medical Center the authorization to complete necessary checks prior to employment. This process must be completed before your orientation date.

### Credentialed providers

Credentialed providers will receive information via email from medical affairs in regards to the required in-services. Orientation date will be arranged in coordination with the provider, medical affairs and human resources based on medical staff and board approvals.

### Next steps:

Orientation is conducted via Zoom. You will need to register using the link in the email from your TA specialist. Your confirmation email contains the link to access Orientation on your date of hire.



# Identification documents

### Important information:

The Immigration Reform and Control Act of 1986 (IRCA) requires that new employees submit proper documentation proving identity and meeting employment eligibility requirements.

**To validate your employment eligibility you must complete Section 1 of the E-verify process prior to your physical and appointment in HR.**

To ensure compliance with IRCA, CAMC participates in the Federal E-Verify system to determine work authorization status. This is done by your submission of the proper types of identification found on the following page. You will provide documents to the HR department after your physical.



# Identification documents continued

## LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

Examples of many of these documents appear in the Handbook for Employers (M-274).

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For an individual temporarily authorized to work for a specific employer because of his or her status or parole:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the individual's status or parole as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>		<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4.</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> </ol> <p style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></p> <ol style="list-style-type: none"> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>	<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security               <p>For examples, see <a href="#">Section 7</a> and <a href="#">Section 13</a> of the M-274 on <a href="http://uscis.gov/i-9-central">uscis.gov/i-9-central</a>.</p> <p>The Form I-766, Employment Authorization Document, is a List A, <b>Item Number 4.</b> document, not a List C document.</p> </li> </ol>
<p><b>Acceptable Receipts</b></p> <p>May be presented in lieu of a document listed above for a temporary period.</p> <p>For receipt validity dates, see the M-274.</p>			
<ul style="list-style-type: none"> <li>• Receipt for a replacement of a lost, stolen, or damaged List A document.</li> <li>• Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.</li> <li>• Form I-94 with "RE" notation or refugee stamp issued to a refugee.</li> </ul>	OR	<ul style="list-style-type: none"> <li>• Receipt for a replacement of a lost, stolen, or damaged List B document.</li> </ul>	<ul style="list-style-type: none"> <li>• Receipt for a replacement of a lost, stolen, or damaged List C document.</li> </ul>

\*Refer to the Employment Authorization Extensions page on [I-9 Central](#) for more information.

# Virtual corporate orientation instructions

The first day for a new employee can be overwhelming, with introductions, information and deadlines. To help ease the stress of the on-boarding process for new employees, CAMC hosts Corporate Orientation virtually. The conveniences of a virtual orientation will allow you to begin the onboarding process from anywhere, while still engaging with orientation facilitators and fellow new employees.

Corporate Orientation will focus on the organization's mission, vision, culture, policies and procedures. It is important that you have a designated space, free of noise and distractions to attend orientation. Attendance will be taken multiple times throughout the day, so it is important that you are logged in to the orientation program for the duration of the day.

Corporate Orientation can be completed from a mobile device or computer. Make sure you verify your connectivity or Wi-Fi access prior to attending

orientation. Please note that data rates may apply depending on your service provider. Included in this booklet is a list of locations where free Wi-Fi is accessible. You may also reach out to your manager if you have connectivity issues, such as limited data/Wi-Fi or you do not have access to handheld device or computer.

**NOTE:** *If your orientation date is changed, you will need to re- register for a new orientation date and the registration link will be provided at that time. Once you have registered for Corporate Orientation, you will receive an email confirmation. DO NOT delete the confirmation.*

*You will need the information contained in your confirmation to access Corporate Orientation.*

# RN/LPN professional nursing orientation

## RN/LPN professional nursing orientation

Professional Nursing Orientation is required for all newly employed nurses. Classes include education on the orientation process, patient safety, communication, Cerner training, IV therapy, and blood administration. All nurses are also required to take and pass a medication calculation and blood administration test.

## HUC/NA/NE, Patient Safety Attendant, Transport Attendant, Professional Nursing Orientation

Professional Nursing Orientation is required for all newly employed Health Unit Coordinators (HUC), Nursing Assistants (NA), and Nurse Externs (NE). Classes include education on the orientation process, patient safety, communication, and Cerner training. Included in this session is a patient care skills lab, with hands-on application of bed making, bathing, turning and positioning, transfers, and all aspects of personal care.

## Additional orientation

All other health care professionals and credentialed providers will be required to complete Cerner training as a component of orientation. Depending on the employee's position, training will be a half day to one full day of training. Cerner training will occur on the third day of orientation. Schedule will be provided electronically after attending orientation.

Credentialed providers will be expected to complete Cerner training and Medical Affairs orientation on day three to receive full Cerner access.

## BLS training

BLS training is required for employees providing patient care. BLS training is taught day two of your orientation and class begins promptly at 8 am with registration beginning at 7:30 am. Verification for attending is completed through the Life Support Training Center.



# Dress code and appearance

## Dress code and appearance

To ensure that employees present a professional image to the public, patients and visitors, the company requires that all employees wear appropriate attire while at work, conducting company business or representing the company at functions outside of the organization.

The employee identification badge (ID) is expected to be part of each employee's regular attire and should be visible at all times while on company property. ID badges are not to be defaced in any manner, nor will the employee's picture be covered with stickers or any other item. ID badges provide access to company property, parking facilities and equipment. They should be protected at all times and kept in the custody of the employee to which they are assigned. Employees should not loan their ID badges to anyone else. Lost or stolen ID badges should be reported to security immediately. Retractable badge holders displaying advertising or other company logos are not permitted; however decorative, non-offensive badge holders are permitted. Lanyards are allowed except in patient care areas where they may pose a safety risk. Managers will determine if a lanyard is appropriate for each work area.

Appropriate attire and good hygiene are of utmost importance in a health care setting. Employee dress and appearance should not be perceived as a distraction by patient and visitors. Since the desire of the company is to ensure that employees present a professional image, and to maximize safety for our patients and staff, the following guidelines for dress and appearance must be followed.

Management has the right to address any of the items set forth in this policy and to enforce more stringent guidelines for their specific work areas due to safety concerns or customer perception concerns.

Employees who report for work inappropriately attired or in direct violation of this policy will be sent off duty.

All employees should report to work in attire that is neat and clean and fits appropriately. Shoes must be suitable to the work area. Hair, including facial hair, must be clean, styled, well-groomed and must adhere to safety guidelines for the designated work area.

Tattoos are permitted, except on the face, but must not be offensive to the reasonable person. Tattoos cannot be discriminatory in nature, therefore, not disparaging of others' race, color, age, religion, national origin, sex, disability or veteran status. Tattoos that are considered discriminatory or offensive must be covered at all times. Company supplies may not be used to cover tattoos.

The manager has the authority to determine what is appropriate for each work area.

Employees that work in a patient care area or area that prepares food or sterile products for patient use are prohibited from wearing any type of artificial nails. Natural nail tips are to be kept less than ¼ inches long.

If the department permits wearing jeans, the jeans must be neat, clean and must not be torn.

In addition to appropriate attire, employees are required to practice good grooming and personal hygiene as a condition of employment. This includes not using perfume, cologne, or fragrances to which many are allergic and/or sensitive. Employees should report to work clean and free of body odor or bad breath.

Accessories, jewelry, and piercings must not distract nor present a safety hazard. The manager has the authority to determine what is appropriate for each work area.

Employees will be expected to comply with position specific guidelines which reflect the particular department or role within the company. This may include required uniforms or other approved attire.

Employees should be aware of the guidelines for their work area.

Certain uniforms or other attire provided by the company, such as scrub suits, are not to be worn off company premises. Although no deposit for company- owned uniforms is required, employees will be charged for uniforms that are lost or willfully damaged. At termination of employment, employees will be required to return all company uniforms.





# New employee FAQs

## Can I register for orientation prior to my state date?

No, Corporate Orientation is considered your first day of employment.

## What are my options to receive my paycheck?

CAMC offers two options for employees to receive their paycheck. Employees can elect to have their paycheck direct deposited or applied to the Rapid Paycard. Payroll authorization form will be completed electronically.

## Do I need to come to a CAMC location to attend corporate orientation?

No, you can attend Corporate Orientation from anywhere with internet connectivity.

## What benefits are available?

There will be a live presentation from the Benefits department during Corporate Orientation. There is also a Benefits Guide included in your welcome packet.

## What will the remainder of my first week of employment look like?

- If you are a Nursing Assistant, Patient Safety Attendant, HUC, LPN, Nurse Extern, Transport Attendant, Certified Medical Assistant (Cancer Center only) or RN, you will receive your schedule for additional training from Professional Nursing via email prior to your start date. BLS will be included.
- If you are required to use the organization's electronic medical record system (Cerner), you will receive a schedule for required training via email at the conclusion of orientation.
- If you are not in one of the positions or departments mentioned above, you will report to work according to the scheduled provided to you by your new manager or department representative.

## What if I haven't received my schedule prior to orientation?

Contact your manager.

## CAMC Acronyms to note

CAMnet:	CAMC internal internet
GHR/Lawson:	Global Human Resources: HR management system
WFM:	WorkForce Management: timeclock system
LMS:	Learning Management System: employee education system
BLS:	Basic Life Safety
Cerner:	Electronic medical records system



# Public WiFi information

If you have limited connectivity or unreliable Wi-Fi, below are a list of sites Wi-Fi is available. For an inclusive list of public Wi-Fi services, please visit the WV Broadband Enhancement Council's website at [www.broadband.wv.gov/west-virginia-wifi-locations](http://www.broadband.wv.gov/west-virginia-wifi-locations)

## **KANAWHA COUNTY**

### **Kanawha County Public Library**

123 Capitol St.  
Charleston, WV 25301

### **South Charleston Public Library (Accessible from parking lot)**

312 4th Avenue  
South Charleston, WV

## **CABELL COUNTY**

### **Cabell County Public Library**

455 9th Street  
Huntington, WV

## **CLAY COUNTY**

### **Clay County Public Library (Should be able to access Wi-Fi via parking lot)**

614 Main Street  
Clay, WV

## **JACKSON COUNTY**

### **Ravenswood Public Library**

323 Virginia Street  
Ravenswood, WV

### **Jackson County Public Library**

208 N Church Street  
Ripley, WV

## **LINCOLN COUNTY**

### **Hamlin-Lincoln County Public Library**

7999 Lynn Ave  
Hamlin, WV

### **Alum Creek Public Library**

255 Midway School Road  
Alum Creek, WV

## **LOGAN COUNTY**

### **PRIDE Community Services (Accessible from parking lot)**

699 Stratton Street  
Logan, WV

### **Buffalo Creek Memorial Library**

511 McDonald Ave  
Man, WV

## **PUTNAM COUNTY**

### **Buffalo Public Library**

500 Roosevelt Blvd.  
Eleanor, WV

### **Poca Public Library**

2858 Charleston Rd.  
Poca, WV



# Human Resources office locations

## General Hospital

419 Brooks Street  
**(304) 388-7638**  
*Hours 8:00 am to 4:00 pm*

## Greenbrier Valley Medical Center

1320 Maplewood Ave., Ronceverte, WV  
**(304) 647-6029**  
*Hours 8:00 am to 4:00 pm*

## Memorial Hospital

Medical Staff Office Building 8th Floor, Suite 808  
**(304) 388-5400**  
*Hours 8:00 am to 4:00 pm*

## Plateau Medical Center

430 Main St. Oak Hill, WV 25901  
**(304) 469-8600**  
*Hours 8:00 am to 4:00 pm*

## Notes

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# Network Credentials

Every employee is assigned a unique username to log in the CAMC network. You will receive two emails at the conclusion of Corporate Orientation providing instructions and security code to log in a secure site to obtain your username and password. Your employee number, CAMC email, and HR Business Partner's contact information will also be included.

**The first email will contain a temporary password that you will need to access the secure site contained in the second email.**

From: CAMC SecureMail [GoAnywhere\\_admin@vandaliahealth.org](mailto:GoAnywhere_admin@vandaliahealth.org)  
Date: January 1, 2032  
To: newemployee1@hotmail.com  
Subject: Password for: Welcome to CAMC!

## Secure Delivery

The password for a secure message has been sent to you from [GoAnywhere\\_admin@vandaliahealth.org](mailto:GoAnywhere_admin@vandaliahealth.org)  
Your password is: abc7789904

**The second email will contain the link to access the secure site.**

From: CAMC SecureMail [GoAnywhere\\_admin@vandaliahealth.org](mailto:GoAnywhere_admin@vandaliahealth.org)  
Date: January 1, 2032  
To: newemployee1@hotmail.com  
Subject: Password for: Welcome to CAMC!

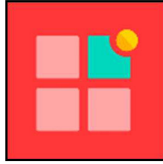
## Secure Delivery

The following file(s) have been sent to you from [GoAnywhere\\_admin@vandaliahealth.org](mailto:GoAnywhere_admin@vandaliahealth.org)  
My Information –  
MyUserCredentials –

Download Files



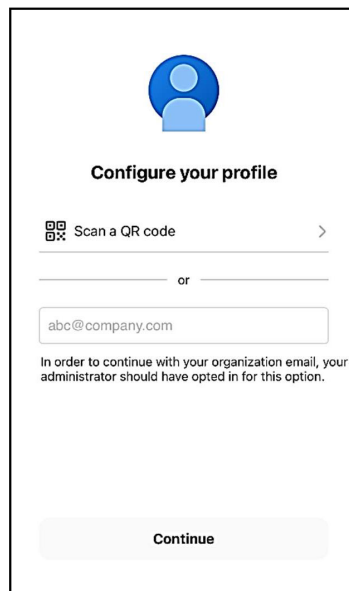
# New Hire Next Steps: Apps & Tasks



## Infor Go App Instructions

Download MFA for Microsoft prior to completing this process\* 

1. Download the “**Infor Go**” app from Apple or Google store.
2. Open App and Select Continue.
3. When prompted, scan QR Code and hit save in the top right corner:



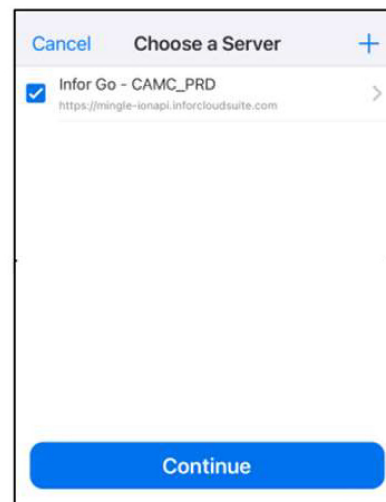
For an [Android](#)



For [IOS\(Apple\)](#)

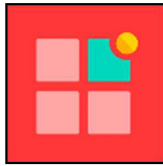


4. The next screen should look like this.
  - Select Continue



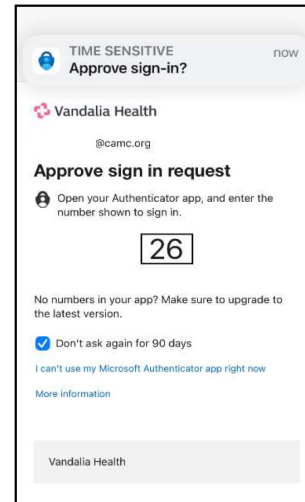
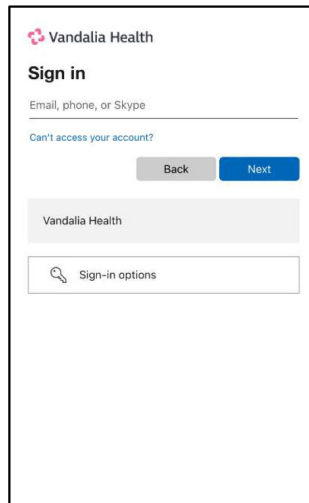


# New Hire Next Steps: Apps & Tasks

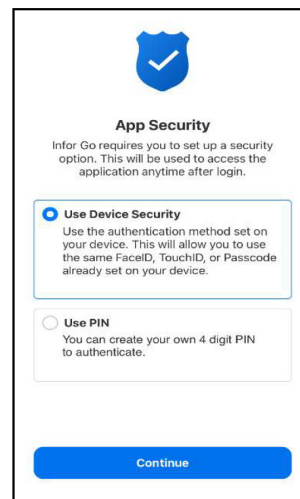
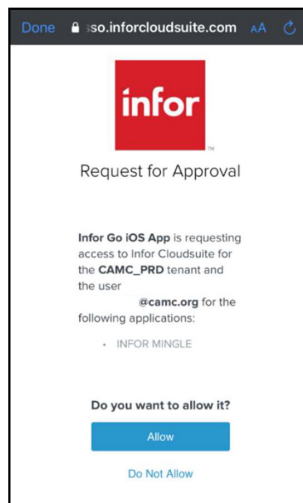


## Infor Go App Instructions

5. Sign in with your credentials.
  - The Multi-Factor Authenticator (MFA) will approve sign in request.

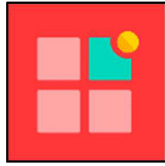


6. Once MFA is complete return to the Info Go app and Select **Allow** on next screen.
7. Select "Use Device Security" or "User PIN" (Device security recommended).





# New Hire Next Steps: Apps & Tasks



## What does the Infor Go App do?

### Employee Mobile:

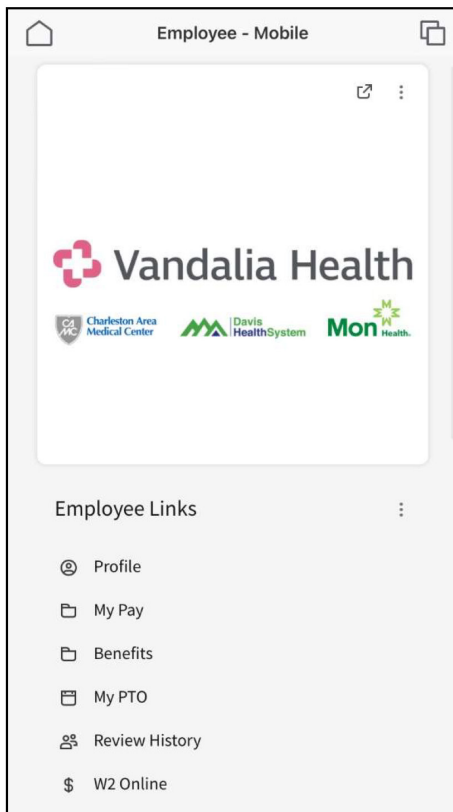
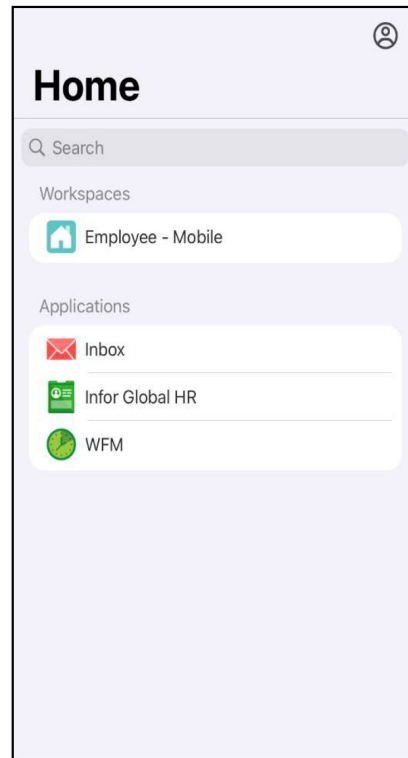
- Employee Self-Serve
- Benefit Enrollment
- Employee User Guides
- View Job Postings

### Infor Global HR:

- Employee Transition Program
- View Employee Profile

### WFM:

- Clock On and Off
- PTO requests
- Schedule



Update personal contact information

Find your HR Contact Information

View pay stubs

PTO balance

Appraisal History



# Employee Space -GHR

We encourage employees to keep their current information updated, such as addresses and phone numbers. We will continue to open new features, so always check out new information when you see it.

Note the things you can access:

- a. Manage Goals:** You can view and add comments to the performance goals your manager has assigned you for the calendar year. You should review these regularly and provide comments as you complete the work. *Please refer to the Employee Goals User Guide for step by step instructions located on the Employee Self Serve page.*
- b. My Profile:** Click here to see important information about your employment.
  - I. At A Glance: displays your employee number, department, dates of service, pay rate, and other information
  - II. Work Assignments: displays the positions to which you are assigned
  - III. Personal Information: you can view and update your phone numbers, emergency contacts and address. You should check this regularly.
  - IV. Compensation: displays your pay rate
  - V. Talent Profile: displays credentials if applicable and education
- c. Find a Coworker:** This link takes you the employee directory on CAMnet
- d. Opportunities:** This connects you to our job posting site where you can view and apply for open positions for which you are interested and qualified. *Please refer to the Opportunities User Guide for step by step instructions located on the Employee Self Serve page.*
- e. Vaccination Records:** You can now view your Flu vaccines from 2020 to present; as well as your COVID-19 vaccine completion dates. If this information is incomplete, you can contact employee health to update it.



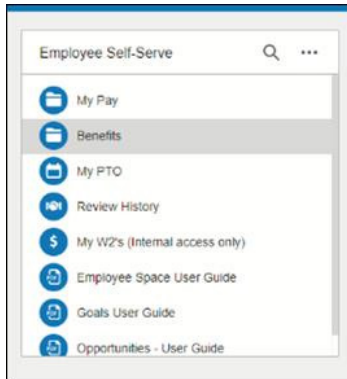


# Employee Transition Program Documents

## New Employee Forms

CAMC offers an electronic onboarding process. New hires complete all necessary forms through the Employee Transition Program. On your second day of employment, you will receive an email with instructions regarding completion of new hire forms. See page 11.

Once your DUO is setup, you can access Lawson and begin your Employee Transition Program and benefit enrollment. You will access your new hire benefit enrollment through your Employee Self-Serve in Lawson. See additional instructions on the following pages.



## Payroll distribution

CAMC offers two options for employees to receive their paycheck. Employees can elect to have their paycheck direct deposited or applied to the Rapid Paycard. As part of the electronic on-boarding process, you will be given the opportunity to enroll in direct deposit. If you do not enroll in direct deposit, you will automatically be issued a rapid pay card.

## Dependent information

If you are planning to cover your spouse or dependent child, please come prepared with their personal information along with the following:

### Spouse:

- marriage certificate
- most recent tax return
- spouse verification letter (included in electronic on-boarding forms)

### Children:

- birth certificate

## Notes

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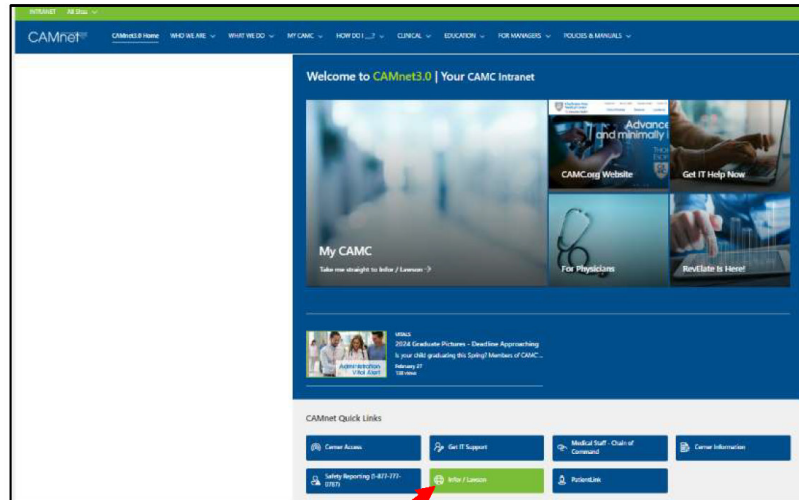
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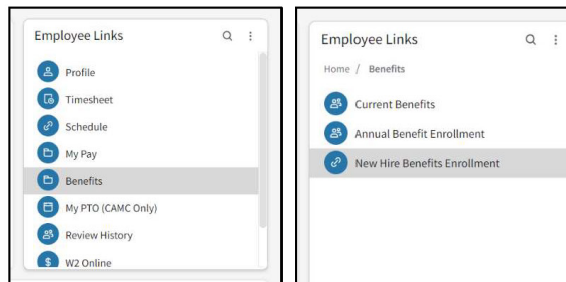
# Employee Transition Program

## How to Access Lawson / Employee Self-Serve in Global HR

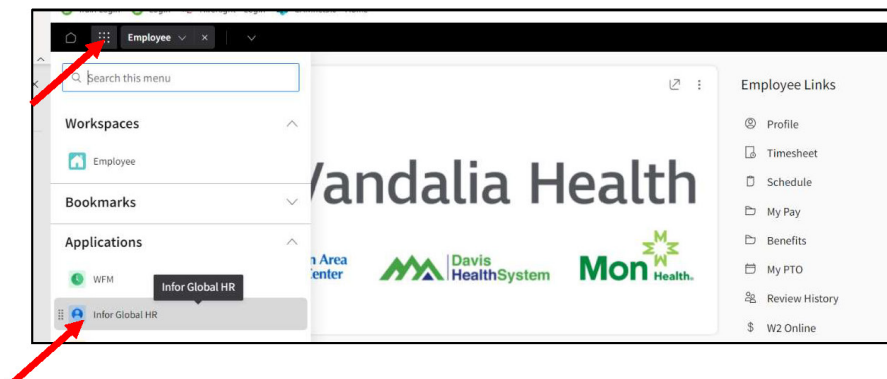
1. Click on the Lawson tab on CAMnet



2. Log into Lawson Employee Self-Serve using your user ID and password given to you upon hire. You can access your new hire Benefit enrollment under Employee Links :



3. Click on the waffle icon in the top left corner. Select Infor Global HR

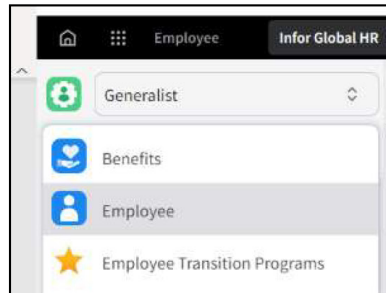




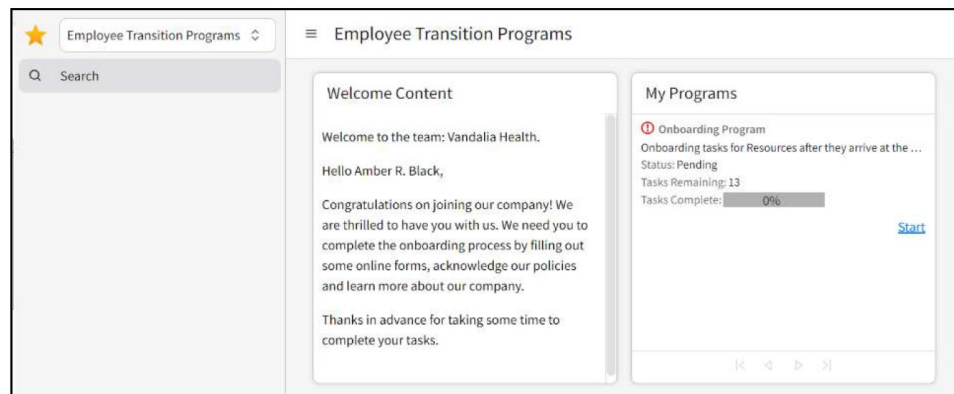
# Employee Transition Program

continued

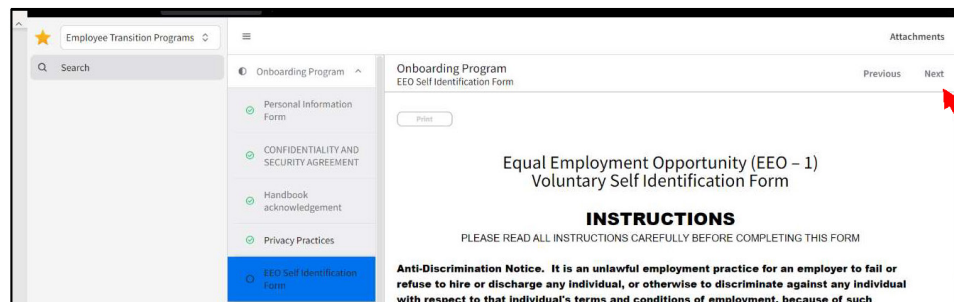
4. Select **Employee Transition Programs** from the drop-down menu



5. Click Start on "My Programs".



- 6.



## Transition Program Notes:

- If adding dependents to your benefit plan, you will need to upload supporting documents on the dependent information task prior to finalizing your transition program. (You may also email forms to [benefits@camc.org](mailto:benefits@camc.org) if you do not have them prior to completing the program)
- State and Federal taxes will default to single and 0 if not elected prior to the deadline.
- Pay source will default to Pay Card if direct deposit is not completed prior to deadline.



# Payroll distribution

Employees have two options to receive their pay check. Employees can select direct deposit or Pay Card.

- **Direct Deposit**-complete in Employee Transition Program within first seven days or hire, or enroll via Lawson Self-Service between Thursday and the following Wednesday after hired.
- **Pay Card**-complete the payroll distribution form and return to HR.

*\*\*If you do not make a selection for payroll distribution, the Pay Card is the default selection.*



# Pay stub printing

**Log in to Lawson from CAMNET:**

- Select **Pay**
- Then select **Pay Check**
- Click on the date of the pay check you are wanting to print
- In the Summary box click **Printable Pay Stub**

## Notes

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# Getting Paid Just Got Easier!

## Easy ways to get your pay for FREE!

The FIRST transaction after you are paid is FREE when using one of the following\*:

- POS Store Purchase - Debit (including cash-back, where available)
- US Post Office Money Order
- Over-the-Counter at any Visa participating bank
- Allpoint® ATM Withdrawal
- Electronic Transfer to a bank account
- Request a Check
- ChekToday - Convenience checks



**CAMC**  
Health System

**CAMC Health System** is providing you with a great new benefit, the rapid! PayCard® Visa® Payroll Card. You can automatically deposit your paycheck onto a debit card so you have instant access to your cash the same morning of your payday!

It's easy, more secure than cash, and saves you money over check cashing fees.

### What is the rapid! PayCard?

rapid! PayCard is a payroll debit card which means you can only spend the money you have on your card. The rapid! PayCard does not require a credit check. It can be used at ATMs, retail stores, gas stations, grocery stores worldwide and wherever Visa debit cards are accepted.



- SAVE MONEY - much less expensive than check cashing
- Get cash 24 x 7 at any Allpoint® ATM, America's Largest SURCHARGE FREE Network
- Access to your money by 10am (EST) on payday
- No cost to enroll
- No credit check required
- Safe & Secure – your money and card are protected!
- Shop online or by phone
- Make purchases using your rapid! PayCard Visa card anywhere Visa is accepted.
- No more stolen or lost checks
- Free, bilingual customer service

**Have questions?**  
**Contact your Payroll Department now!**



# 2025 Pay Period schedule

PP#	BEGINNING	ENDING	PAY DAY
1	12/22/2024	01/04/2025	01/10/2025
2	01/05/2025	01/18/2025	01/24/2025
3	01/19/2025	02/01/2025	02/07/2025
4	02/02/2025	02/15/2025	02/21/2025
5	02/16/2025	03/01/2025	03/07/2025
6	03/02/2025	03/15/2025	03/21/2025
7	03/16/2025	03/29/2025	04/04/2025
8	03/30/2025	04/12/2025	04/18/2025
9	04/13/2025	04/26/2025	05/02/2025
10	04/27/2025	05/10/2025	05/16/2025
11	05/11/2025	05/24/2025	05/30/2025
12	05/25/2025	06/07/2025	06/13/2025
13	06/08/2025	06/21/2025	06/27/2025
14	06/22/2025	07/05/2025	07/11/2025
15	07/06/2025	07/19/2025	07/25/2025
16	07/20/2025	08/02/2025	08/08/2025
17	08/03/2025	08/16/2025	08/22/2025
18	08/17/2025	08/30/2025	09/05/2025
19	08/31/2025	09/13/2025	09/19/2025
20	09/14/2025	09/27/2025	10/03/2025
21	09/28/2025	10/11/2025	10/17/2025
22	10/12/2025	10/25/2025	10/31/2025
23	10/26/2025	11/08/2025	11/14/2025
24	11/09/2025	11/22/2025	11/28/2025
25	11/23/2025	12/06/2025	12/12/2025
26	12/07/2025	12/20/2025	12/26/2025



# QuickCharge

### Use your Employee ID Badge to make on-site purchases!

QuickCharge, is a voluntary payroll debit system that allows employees to use their ID badges to make cash-free purchases at on-site facilities, such as the coffee shop, pharmacy and cafeterias.

You must be signed up for QuickCharge in order to authorize non-benefit payroll deductions such as uniforms, pharmacy co-pays, gift shop purchases, cafeteria purchases, KRT bus passes, etc.

### Sign Up Process

- Wait until you receive your third paycheck: Date \_\_\_/\_\_\_/\_\_\_
- Go to *CAMnet/My CAMC/Human Resources* and click on the QuickCharge link.
- Complete the Wage Assignment Form (*form must be notarized*)
- Return form to Payroll
  - You will not be eligible for payroll deductions until you have completed the wage assignment form and have been activated by the payroll department

### Don't Forget:

***Sign Up After 3rd Paycheck Is Received***

# Notes

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Our credit union was established in 1977 for the benefit of CAMC employees and their immediate family members. This remains our focus today. With competitive rates and low fees on both our share and loan accounts, we hope to become your financial partner.

## Member Services

### Share Accounts

- Prime Savings
- Split Rate Savings
- Certificates of Deposit
- Individual Retirement Accounts
- Christmas Savings
- Vacation Savings
- Back-To-School Savings

### Checking Accounts

- Share Draft Checking
- Premier Checking

## Loan Products

- New & Pre-Owned Vehicle
- New & Pre-Owned Boat, RV & Travel Trailer
- New & Pre-Owned Motorcycle, ATV & Jet Ski
- Share/Certificate Secured
- Personal/Signature
- Vacation/Holiday
- Home Mortgage & WVHDF
- Home Equity
- Home Equity Line of Credit
- Visa and American Express Credit Card
- Personal Line of Credit

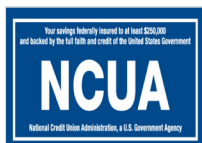
## Online Resources

- Internet Banking
- Bill Payment
- Mobile App
- Remote Deposit Capture
- Membership Application
- Loan Application

## Other Services

- Direct Deposit
- Payroll Deduction of Loan Payments
- Key-24 Automated Telephone Service
- ATMs\*
- Visa Debit Card
- Night Depository
- Safe Deposit Boxes
- Notary Service
- Travel Cards
- Gift Cards
- Coin Counter
- Official Checks
- Visa Cash Advances

\*Surcharge free ATMs are located within each CAMC hospital, outside the Credit Union building, CAMC Cancer Center, CAMC Innovation Center, and more than 50 other locations in the Charleston area. Visit our website and click on ATM, then click on the Alliance One ATM locator for a full list of more than 4,500 surcharge free locations available nationwide.







# CAMC Employee Emergency Fund

CAMC EMPLOYEES

## Be a Lifesaver!



**Together, through the CAMC Employee Emergency Fund, we have the power to make a difference for fellow employees when the unexpected happens.**

This fund provides financial assistance to employees who experience personal emergencies. Since 2001, more than \$1,857,273.00 has been awarded to 2,467 employees.

Gifts to this fund can be made at any time throughout the year.

Donations may be made through payroll deduction, making a single monetary contribution, or by contributing PTO hours that are converted into a financial donation.

Visit [www.camcfoundation.org/camc-employees/](http://www.camcfoundation.org/camc-employees/) to learn more about the grant program and to fill out the Employee Donation Card to start your contribution today!

To apply for the grant, please contact your Human Resources representative.

(304) 388-9860  
camcfoundation.org



CAMC  
Foundation

# Peer Support

CAMC offers Peer Support to employees during especially difficult events as part of the CAMC Well-Being initiatives.

The goals of peer support are to:

- Provide individual or group support to the workforce experiencing secondary trauma
- Provide support to colleagues in crisis situations
- Mitigate secondary trauma
- Provide service with compassion
- Normalize responses
- Promote continuation of productive careers

To initiate a confidential peer support process, call (304) 388-SAFE and choose Option #2.



**CAMC Workforce Well-being**  
EMOTIONAL - SOCIAL - PROFESSIONAL - PHYSICAL - FINANCIAL



**Charleston Area  
Medical Center**

 **Vandalia Health**



# CAMC Family Resource Center

At the CAMC Family Resource Center we understand life can be complicated. That's why we're here to help you with issues that hit close to home. Our staff is trained to help you deal with parenting, relationships, same gender concerns, loss and crisis, depression, anxiety, substance use disorders, women's issues and adjustment to chronic illness or pain – all in the comfort of a safe and confidential environment. **For more information, call (304) 388-2545.**

## OUR SERVICES

### BABY FIRST PROGRAM

- Provides services and resources to help women struggling with substance use disorders throughout pregnancy and postpartum. The primary goal of the program is to support mother and baby by early intervention, education, treatment and peer support by certified peer recovery coaches. Individualized case management is provided by a registered nurse. The Baby First team advocates for all actively engaged participants.

### COUNSELING FOR CHILDREN, ADOLESCENTS AND ADULTS

### PSYCHIATRIC EVALUATIONS/MEDICAL INTERVENTIONS

#### COUNSELING DEALING WITH:

- Divorce
- Grief and loss
- Parenting different ages & stages
- Smoking cessation
- Anxiety and depression
- Stress management
- Substance use disorders
- Women's health issues
- LGBT health

#### JOURNEY TO PARENTHOOD

- Breastfeeding class
- Childbirth preparation
- Family & Friends CPR

#### ONLINE CLASSES

- Understanding Breastfeeding
- Understanding Childbirth
- Understanding Your Newborn
- Understanding Infant & Child Safety

The Family Resource Center also provides addiction and mental health services at the CAMC Employee Wellness Center. Employees need only ask for a referral during their visit at the Wellness Center, which can be reached at (304) 388-2130.

## FAMILY RESOURCE CENTER



**Charleston Area  
Medical Center**

 **Vandalia Health**

[camc.org/frc](http://camc.org/frc)

# CAMC Employee Wellness Center

CAMC Employee  
Wellness Center



Charleston Area  
Medical Center  
Vandalia Health



MAKING HEALTH CARE **EASIER,**  
**CONVENIENT AND FREE** FOR YOU  
AND YOUR FAMILY!

- **All visits are FREE**  
(sick visits, well visits, in-office screenings, etc.)
- \$0 copay, \$0 coinsurance, \$0 deductible
- Easy appointment scheduling
- Short wait time to see a provider

The CAMC Employee Wellness Center provides free primary care and wellness services for CAMC employees and their families (spouse and dependents 11 and older) who are enrolled in CAMC's PPO medical plan (high deductible health plan members not eligible).

## HOURS

Monday through Friday, 8 a.m. to 4 p.m.

Call to schedule an appointment  
(no walk-ins please)



**(304) 388-2130**

## OFFERING

- Primary care for non-emergency illnesses (i.e. colds, flu, eye infections, allergies, sinus infections and more!)
- Chronic disease management
- Diabetes education and management
- Mental health services
- Addiction services
- No cost for more than 40 common lab tests (visit [camc.org/EmployeeWellnessCenter](http://camc.org/EmployeeWellnessCenter) for a complete list of lab tests covered)



### Welcome Kimberly Spurlock, DO – Medical Director of Primary Care

*Dr. Spurlock sees patients at the CAMC Employee Wellness Center and CAMC Primary Care in Nitro.*

*Services provided by Dr. Kimberly Spurlock and Crystal Holstein, Nurse Practitioner*

3418 Staunton Ave. Charleston, WV 25304

# Not feeling well? *Skip the trip!*



Talk with a doctor, physician assistant or nurse practitioner via phone, web or mobile app anytime, day or night!

- **Download** the 24/7 Care app
- **Set up** your account
- **Log in anytime** from your home, office or when you travel to request secure video visits
- **\$49** per visit (public); **Free** for CAMC employees

## 24/7Care



**Charleston Area  
Medical Center**

 **Vandalia Health**

All providers are U.S. board-certified physicians and licensed physician assistants and nurse practitioners who can diagnose, treat and prescribe medication for non-emergency conditions such as:

- COVID-19
- Sore throat
- Diarrhea
- Earache
- Fever
- Insect bite
- Allergies
- Muscle strain
- Nosebleed
- Rash
- Eye infection
- Vomiting
- And more!

[camc.org/24-7Care](http://camc.org/24-7Care)

Apple users:



Android users:



# Hear it. See it. *Report it.*

Vandalia Health  
Speak Up Line  
**1-877-777-0787**

[VandaliaHealth.ethicspoint.com](http://VandaliaHealth.ethicspoint.com)



Scan here to connect.



Don't stay silent when you have concerns. Use the Speak Up Line to report suspected issues, and let us take it from there. The Vandalia Health Speak Up Line can be used to report employee concerns such as:

- **Code of Conduct violations**
- **Patient Safety concerns**
- **HIPAA/Patient Privacy issues**
- **Human Resources concerns**
- **Improper coding/billing**
- **Conflicts of Interest**
- **Compliance issues**

Call the toll-free number listed above or submit a report online via [VandaliaHealth.ethicspoint.com](http://VandaliaHealth.ethicspoint.com) 24 hours a day, 7 days a week. All reports are confidential, and anonymous reports cannot be traced back to you. The Speak Up Line is hosted by a third-party vendor. You may report concerns anonymously to help us maintain an ethical workplace without fear of retaliation. We expect the highest standards of ethical conduct and patient care from everyone in our organization. Please help us maintain this excellence.





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

When this notice refers to “we” or “us,” it means Charleston Area Medical Center, Inc. (“CAMC”), including CAMC General Hospital, CAMC Memorial Hospital, Teays Valley Hospital and CAMC Women and Children’s Hospital, all off-site departments, and hospital clinics. It also means the employees of CAMC, the physicians who practice medicine in the CAMC hospitals, and all of the other health care providers who join with CAMC in providing you with this notice.

Each time you are a patient of CAMC, a record of your visit is made. Although this record belongs to CAMC, you have certain rights in regard to the information that is collected about you. In addition, we have certain legal responsibilities to you in how we use and disclose your health information. We understand that health information is personal and that protecting your information is important. This notice will explain your rights and our responsibilities in regard to protected health information that is made, collected and maintained in CAMC’s hospitals, clinics and off-site departments. It will also tell you how we may use and disclose your protected health information. **If you have any questions about this notice or our privacy practices, please call our privacy office at (304) 388-1187.**

## **YOUR HEALTH INFORMATION RIGHTS**

### **You have the right to:**

**Learn how your health information may be used or disclosed without your express authorization.** This notice will describe those situations and provide you with examples.

**Obtain a paper copy of this Notice of Privacy Practices upon request.** Even if

you receive this notice electronically, you may ask for a written copy.

**Ask to inspect and copy our record of your health information.** You may make a written request to inspect or copy your medical chart. We may deny your request in certain circumstances; for example, if access to the information would be harmful to you or someone else, or the law does not allow you to have access to the information. If that happens, you can ask us to have the denial reviewed. Unless the denial is based upon a law that does not allow you access to the record, we will arrange to have the denial reviewed by a health care professional who did not participate in the original decision. If you are given a copy of your records, we will charge you our regular fee for making the copy and sending it to you. If your record is maintained in an electronic health record, we can provide it to you in hard copy (print format) or you may ask that it be supplied electronically. If you choose to receive your records through electronic media, the form of that media will be in our discretion. For more information about inspecting or copying your health care record, call our privacy office at **(304) 388-1187.**

**Request a restriction on certain uses and disclosures of your information.** We can use and disclose your health information without your authorization for treatment and payment purposes and for health care operations. However, you may make a written request that we limit our use or disclosure when carrying out these activities.

We are not required to comply with your request, but if we do agree, we will restrict our use and disclosure unless the information is needed to provide you with emergency care. For more information on how to request a restriction, **call our privacy office at (304) 388-1187.**

**Request that your protected health information not be provided to your insurance company (such**

**as in connection with insurance reimbursement) where the service is paid in full at the time that the health care service is provided.** To do so, you must notify your health care professional or CAMC in writing, and provide payment at the time that your health care service is provided.

**Request an amendment to your health care record.** You may make a written request asking that we make changes to your health care record. We are not required to make your requested amendments. For example, your request may be denied if we did not create the record, if it is not part of our records, if it is a record that you do not have a right to access, or if we believe the record is accurate and complete. However, if we deny your request, we will give you the reason for the denial in writing. If you disagree with the denial, you may submit a written statement of your disagreement, which we will file and distribute with future disclosures of the record you wanted to amend. For more information about how to request amendments and the process we will follow, **call our privacy office at (304) 388-1187.**

**Obtain an accounting of disclosures of your health information that you have not expressly authorized.** The law requires us to keep track of certain disclosures we make of your health information, although we are not required to keep track of all of the disclosures. For example, we do not have to keep track of disclosures we make to you, or disclosures for treatment, payment or health care operations. We also do not keep track of disclosures made for national security for the facility directory or to family members or other people involved in your care, to law enforcement officials or correctional institutions that have you in custody, to health oversight agencies, incidental disclosures, disclosures in a limited data set, or in response to an authorization you have signed. You may make a written request

for a list of the disclosures we have tracked. The list will include the date of each tracked disclosure, the name of the party who received your information, a brief description of what was disclosed, and the purpose of the disclosure. Your request can ask for disclosures made as far back as six years before the request, but cannot ask for disclosures made before April 14, 2003. We will notify you of the cost involved, if any charges are going to be made to you, so that you can choose to withdraw your request before costs are incurred. For more information on what disclosures we track and how to request a list, **call our privacy office at (304) 388-1187.**

Request confidential communications of your health information by receiving it in a certain manner or at a certain location. You may make a written request that we communicate with you about your medical information in a certain way or at a certain location. We will try to accommodate all reasonable requests. If you would like more information about how to request confidential communications, **call our privacy office at (304) 388-1187.**

Revoke an authorization to use or disclose health information except to the extent that action has already been taken. You may sign a written authorization request that we disclose your health information to someone else. If you later decide that you want to cancel your authorization, you should tell us in writing that you want to revoke the authorization. Except for disclosures that have already been made or mailed, we will comply with your request. For more information about signing an authorization or revoking one, **call our privacy office at (304) 388-1187.**

To receive notification if there is a breach of your unsecured protected health information. You will be notified in writing when we become aware that there has been a breach of your medical record or protected health information.

## OUR RESPONSIBILITIES TO YOU

We are required to:

- **Maintain the privacy of your health information.**
- **Provide you with notice of our legal duties and privacy practices.**

- **Abide by the terms of our Notice of Privacy Practices. We reserve the right to change our privacy practices and to make any new practices apply to all of the health information we maintain. However, if we do make changes, we will provide you with a new Notice of Privacy Practices on your next visit to CAMC or upon your request.**

## HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION WITHOUT YOUR WRITTEN AUTHORIZATION

Federal and state laws allow us to use and disclose your medical information without your written authorization in the following ways. We have provided you with some examples for each category of use or disclosure, but cannot list every permitted use or disclosure. Therefore, if you have any questions about specific uses or disclosures, **please call our privacy office at (304) 388-1187.**

### 1. For treatment, payment, or health care operations

**We will use your health information for treatment purposes.**

**For example:** Information obtained by a nurse, physician, or other member of your health care team will be written in your medical record, and the record will be shared by all the people who are caring for you. By sharing information, they can plan your treatment, follow your progress, and arrange for your care after you leave CAMC.

We also may give your family physician, referring physician or other health care providers copies of records they need to treat you once you are discharged from CAMC.

**We will use your health information for payment.**

**For example:** A bill, or portions of your hospital chart, may be sent to your health insurance company to help it process payment for your visit. These records usually include information about your diagnosis, procedures you had and supplies that were used to treat you.

**We will use your health information for regular health care operations.**

**For example:** Members of the medical staff, risk and safety managers, hospital lawyers and members of quality

improvement teams may use information in your medical record to assess the quality of care given to you and to do claims reviews. We may use your health information, along with the information of other patients, to create data that does not identify any of you in order to compare outcomes of care. This information may be used to improve the quality and effectiveness of care, to respond to concerns you have raised, and to address safety issues.

We also may give your health information to business associates who provide a service to the hospital. Examples include pharmacy and equipment vendors, outside laboratories, CAMC-affiliated research teams, copy services, collection agencies and financial consultants. In these cases, we will only give our business associates the pieces of your health information that they need to do the job we have asked them to do. We will also require our business associates to have appropriate safeguards to protect the privacy of your information.

### 2. For public health activities

**We may disclose your health information to public health agencies.**

**For example:** Records of the birth or death of patients will be reported to the state agency that keeps a vital statistics registry.

We will also provide information to other public health agencies that are authorized by law to collect medical information for public health investigations or to control disease or prevent injury.

**We will disclose your health information to appropriate authorities in cases of suspected abuse or neglect.**

**For example:** If health care providers at CAMC suspect that you have been the victim of child or elder abuse or neglect, we will provide your health information to the proper state agency or agencies authorized to conduct an investigation.

**We will disclose your health information to the Food and Drug Administration (FDA) when necessary.**

**For example:** If you get hurt by or have an unexpected reaction to an FDA-regulated product, we will report the event to the FDA, so that it can investigate, monitor or track the safety of the product.



**We will report cases of communicable disease to the proper government agencies.**

**For example:** We will follow the West Virginia law that requires us to notify the Health Department when a patient is diagnosed with a serious disease that can be spread to others, such as HIV or tuberculosis.

**We may disclose health information to an employer when required by law.**

**For example:** If an employer sends its employee to CAMC to evaluate whether the employee has a work-related injury that the employer must report, we may provide the results of the evaluation to the employer.

**3. For health oversight activities, judicial and administrative procedures, and law enforcement**

**We will disclose your health information to health oversight agencies as required by law.**

**For example:** We may disclose your health information to a government benefit program so that it can determine your eligibility. We also may disclose your health information to a government agency that is auditing the hospital or inspecting it to determine if the hospital is complying with program standards.

**We may disclose your health information in response to a court order, subpoena, or in the course of a judicial or administrative proceeding.**

**For example:** If we receive a valid order from a court requiring us to disclose your health information, we will comply with the order, but will only disclose the information specifically required by the order.

If we receive a subpoena or other legal process, we will not disclose your health information until we receive satisfactory assurance that you have been sent notice of the request, and have not filed objections, or that other steps have been taken to protect the health information from being used improperly.

**We may disclose your health information to law enforcement officials under certain circumstances.**

**For example:** If you are the victim of a gunshot or other type of injury that must be reported to law enforcement, we

will disclose your health information as required by law. In the case of a medical emergency, we may disclose your health information to law enforcement officials if disclosure appears necessary to alert law enforcement to the commission or location of a crime, or the identity of the perpetrator. If you are the suspected victim of a crime that does not have to be reported, we may disclose your health information to a law enforcement official who requests the information, but (1) only if you agree, or (2) if you are unavailable or incapacitated at the time, only if the law enforcement official tells us that the information is needed quickly for law enforcement activity and is not intended to be used against you. We will disclose your information under these circumstances only if we believe at the time that disclosure is in your best interests.

We also may disclose your health information to a law enforcement official for the purpose of identifying or locating a suspect, fugitive, material witness, or missing person, although we will only disclose limited information and will not disclose information related to your DNA or blood- typing.

If we receive a grand jury subpoena, court order, or a warrant for your health information, we may disclose it if the information requested is limited in scope and is material to a legitimate law enforcement investigation.

We may disclose your health information if we believe it is relevant to or constitutes evidence of criminal activity on CAMC's premises.

**4. In cases of death, organ or tissue donation, and research**

**We will disclose health information to coroners, medical examiners, and funeral directors as required by law.**

**For example:** If the medical examiner requests health information to help determine the cause of a patient's death, we will provide the requested information. Likewise, if a patient has died with a blood- borne disease, such as HIV, we will inform the funeral director who is handling the body, so that precautions may be taken to avoid the spread of the disease.

**We will disclose health information necessary to carry out organ or tissue donation.**

**For example:** We will follow federal and state laws that require us to contact an organ procurement agency whenever a patient is dying or has died and to share relevant information with the agency so that it can determine if the patient is a candidate for organ or tissue donation.

**We may disclose health information for certain types of research.**

**For example:** We may disclose health information to a researcher, whose project has met the safeguards and requirements of a research approval board after it has considered the patient's need for privacy, as long as the information will be protected and will not be used for any other purpose. In certain limited circumstances, as strictly defined by applicable laws, CAMC is permitted to use patient data for research or other similar types of evaluation purposes, without obtaining a patient authorization. For example, certain types of public health reviews, as well as research involving a so-called "limited data set" of personal identifiers that do not reveal the identity of the patient, is permitted without a patient authorization.

**5. To avert a threat to health or safety**

**We may use or disclose your health information if we believe, in good faith, that the use or disclosure will prevent or lessen a serious and imminent threat of harm to the health and safety of a person or the public.**

**For example:** If you have suffered a head injury that makes you unable to safely drive a motor vehicle, we may disclose your relevant health information to the Department of Motor Vehicles.

**6. For specialized government functions**

**We may disclose your health information, when appropriate, to assure the proper execution of a military mission, for national security and intelligence, and for the protection of the president of the United States or heads of state.**

**For example:** If the president of the United States visits Charleston and requires medical care, we may disclose your health information if

it is deemed to be necessary to protect the safety of the president during his visit.

**We may disclose your health information to a correctional institution if you are an inmate of that institution.**

**For example:** We will provide your health information to the correctional institution in which you are an inmate if the institution represents that the information is necessary for your health, safety or treatment, or for the health and safety of other inmates and correctional officers.

**7. For fundraising activities, marketing and informational purposes**

**We may use or disclose information about you for fundraising.**

**For example:** We may disclose limited information about you to our fundraising affiliate, the CAMC Foundation, so that the foundation may contact you in regard to various fundraising activities to support the hospital. If you do not want to be contacted, please call our foundation office at **(304) 388-9860** or email them at [camcfoundation@camc.org](mailto:camcfoundation@camc.org) and ask to be removed from any fundraising list. **You may also write to our privacy office at 130-138 57th St., Building 3, Unit 2, Charleston, WV 25304 and ask to be removed from any fundraising list.**

**We may use or disclose information about you for limited marketing purposes.**

**For example:** We may disclose limited information about you to our marketing department to provide you with a nominal promotional gift, such as a newsletter describing special services we offer.

**We may use or disclose information about you for additional health information and scheduling.**

**For example:** We may disclose limited information about you to arrange for the scheduling of treatment, to remind you of an appointment, to recommend possible treatments to you, or to provide information about health services that might be of interest to you.

**8. As required by law**

**We will use or disclose your health information to the extent that the law requires it.**

**For example:** If you were in an accident that was caused by someone else's negligence and your medical bills were paid by Medicaid, the law may require

us to provide your health information to Medicaid so that it can collect reimbursement from the person who caused the accident. We also may have to disclose information to Workers' Compensation if you have made a claim for benefits.

**Uses and disclosures of health information to which you may object**

The law allows us to use your health care information in some instances, unless you object in advance. These instances include the following:

- While you are in the hospital, religious affiliation information about you may be collected and stored electronically and shared with clergy members.
- While you are in the hospital, information such as your name, room number, and general condition may be put in a hospital directory and released to people who ask for you by name.
- Information about your condition may be given to family members, relatives or close personal friends who are involved in your care, or to notify them of your location and general condition, when you are in an emergency condition, or when you are incapacitated.
- Information may be given to disaster relief organizations.

You have the right to avoid disclosures to Health Plans for Payment or Healthcare Operations.

**Uses and disclosures of health information that require your authorization**

Uses and disclosures for marketing purposes and disclosures that constitute a sale of protected health information will require your authorization. All other uses and disclosures of your health information, except those listed previously in this notice, will be made only with your valid written authorization. You may revoke an authorization at any time by writing down your revocation and sending it to our privacy office at 130- 138 57th St., Building 3, Unit 2, Charleston, WV 25304. The revocation will be valid upon our receipt of it, except to the extent that we have already relied upon it and taken action on it.

The law specially protects certain types of health information. This information will only be used and/or disclosed with a valid

written authorization if all requirements of the law are met. This information includes:

- Psychotherapy notes
- Records related to the Human Immunodeficiency Virus (HIV)
- Records of drug and/or alcohol abuse testing, diagnosis or treatment

**Uses and disclosures of health information when you are incapacitated, incompetent or deceased**

If you become incapacitated or incompetent, your health information will be treated the same way it was treated when you were capable and competent. If an authorization or objection is required, your personal representative or surrogate health care decision maker will be treated in the same manner as you would be treated.

Your health information will remain protected even after your death. If an authorization is required for the release of your health information after your death, the executor or administrator of your estate must sign the authorization.

**Uses and disclosures of health information involving minors**

The health information of minors will be treated like any other health information except for the following special rules:

- As provided in West Virginia law, both parents of a child will have equal access to the child's records except as limited by court order or other West Virginia law. The parent objecting to a release of records to the other parent has the duty to provide us with a court order prohibiting the release.
- As provided in West Virginia law, records of the diagnosis, treatment or counseling of a minor for drug or alcohol abuse or addiction will not be released to parents or guardians without the consent of the minor.
- As provided in West Virginia law, records of the diagnosis, testing or treatment of a minor for a sexually transmitted disease will not be released to parents or guardians without the consent of the minor.
- As provided in West Virginia law, records involving the use of birth control by a minor, or of prenatal care rendered to a minor, will not be released to parents or guardians without the consent of the minor.

For more information, to make a written request, to report a problem or to file a complaint

This notice is required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Standards have been developed to implement the requirements of HIPAA and provide more detail about the rights and responsibilities described in this notice. If you would like additional information regarding HIPAA, you may access it electronically at the following website: [www.cms.hhs.gov/](http://www.cms.hhs.gov/).

If you have questions and would like additional information about our privacy

practices, or if you want to make a written request under this notice, you may **call our privacy office at (304) 388-1187**.

If you believe your privacy rights have been violated, you can file a complaint with us during regular business hours, either by calling the Compliance Hotline at **1-877-777-0787**, or our privacy office at **(304) 388-1187**. The contact person will tell you what additional steps to take. You can also file a complaint by contacting the Secretary, United States Department of Health and Human Services.

***THERE WILL BE NO RETALIATION FOR FILING A COMPLAINT.***

Effective date and practice changes

This Notice of Privacy Practices is effective April 14, 2003. We reserve the right to change our privacy practices and to make the new provisions effective for all protected health information we maintain at CAMC's hospitals, off-site departments and hospital clinics. Should our privacy practices change, you will receive a revised notice on your next visit to a CAMC facility or upon your request.











**Charleston Area  
Medical Center**

 **Vandalia Health**

PO Box 1547  
Charleston, WV 25326

*camc.org*