Landers Family Chiropractic

Notice of Privacy Practices

This notice describes how information about you may be used and disclosed and how you can get access to this information.

Please review it carefully.

Effective: 2-19-16

Introduction

Landers Family Chiropractic is committed to giving you quality care and protecting your private health information (PHI). We are also committed to treating and using PHI about you responsibly. This notice of health information practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information.

This notice is effective 9/26/11.

Understanding your Health Information

Each time you visit our office, a record of your visit is made. Typically, this record contains symptoms, examination and test results, diagnosis, treatment, and a plan for future care.

This information serves as a:

- Basis for planning your treatment,
- Means of communication among the many health professionals who contribute to your care,
- Legal document describing care you received,
- Means by which you or a third party payer can verify that services billed were provided,
- A tool in educating health professionals,
- A source of data for medical research,
- A source of information for public health officials charged with improving the health of this state and Nation,

- A source of data for our planning and marketing,
- A tool with which we can assess and continually work to improve the care we render and the outcome we achieve.

Understanding what is in your record and how PHI is used helps you to ensure its accuracy, better understand who, what when, where, and why others may access your PHI, and make more informed decisions when authorizing disclosures to others.

Your Health Information Rights

Although your health record is the physical property of Landers Family Chiropractic, the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of information practices upon request,
- Inspect and copy your health record as provided for by federal law (a reasonable fee may be charged to cover the cost of copying),
- Amend your health record as provided by federal law,
- Obtain an accounting of disclosures of your PHI as provided by federal law,
- Request communication of your PHI by alternative means or at alternative locations,
- Request a restriction on certain uses and disclosures of your PHI as provided for by federal law, and
- Revoke your authorization to use or disclose PHI except to the extent that action has already been taken.

Our Responsibilities

- To maintain the privacy of your PHI
- To provide you with this notice as to our legal duties and privacy practices with respect to information e collect and maintain about you,
- To abide by the terms of this notice, and
- To accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change our practices and to make new provisions effective for all PHI we maintain. Should our information practices change, we will mail revised notice to the address you have supplied. Your responsibility is to notify us of address and insurance changes.

We will not use or disclose your PHI without your authorization, except as described in this notice. We will also discontinue to use or disclose your PHI after we have received a written revocation of the authorization according to the procedures included in the authorization.

Examples of Disclosures for Treatment, Payment, and Health Operations:

<u>Treatment</u>: We may use your PHI within our office to provide health care services to you or we may disclose your PHI to another provider if it is necessary to refer you to them for services.

<u>Payment</u>: We may disclose your PHI to a third party such as an insurance carrier, an HMO, a PPO, or in order to obtain payment for services provided to you.

<u>Personal Injury</u>: We may disclose your PHI to your attorney in order to obtain payment for services provided to you.

<u>Operations</u>: We may use your PHI to conduct internal quality assessment and improvement activities and for business management and general administrative activities.

<u>Business Associates</u>: There are some services provided in our organization through contacts with associates. Examples include physician services in the emergency department, radiology, and certain lab tests, referrals to other physicians, and other who may provide work in our office. We may need to disclose your PHI to our business associates so they may perform the job we have asked of them. We have an agreement with these associates to protect your PHI as well.

<u>Notification</u>: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, your location, and general condition.

<u>Communication with family</u>: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend, or any other person you identify, PHI relevant to that person's involvement in your care or payment related to your care.

Research: We may disclose PHI to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

<u>Law Enforcement</u>: We may disclose PHI for law enforcement purposes as required by law or in response to a valid subpoena.

<u>Workers Compensation</u>: We may disclose PHI to the extent authorized by and to the extent necessary to comply with laws relating to workers' compensation or other established programs by law.

<u>Public Health</u>: As required by law, we may disclose your PHI to public health or legal authorities charged with law relating to workers' compensation or other programs. Your provider is required by law to report communicable diseases and certain conditions to the Center for Disease Control in Atlanta, GA. Your PHI will be protected by our office and the CDC or health center.

FOR MORE INFORMATION

OR TO REPORT A PROBLEM

You may file a complaint with our practice's Privacy Officer, Maria Landers at 256-586-5322, or with the Department of Health and Human Services. There will be no retaliation for filing a complaint.

Office for Civil Rights

U.S. Dept. of Health & Human Services

200 Independence Ave. SW

Room 509 F, HHH Building

Washington, DC 20201