

Greenville Speech & Language Therapy, PLLC

NOTICE OF PRIVACY PRACTICES

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.

The Health Insurance Portability & Accountability Act of 1996 (HIPAA) requires all health care records and other individually identifiable health information (protected health information) used or disclosed to us in any form, whether electronically, on paper, or orally, be kept confidential. This federal law gives you, the patient, significant new rights to understand and control how your health information is used. HIPAA provides penalties for covered entities that misuse personal health information. As required by HIPAA, we have prepared this explanation of how we are required to maintain the privacy of your health information and how we may use and disclose your health information.

Without specific written authorization, we are permitted to use and disclose your health care records for the purposes of treatment, payment and health care operations.

- **Treatment** means providing, coordinating, or managing speech and language services by one or more speech-language pathologists. We may also share medical information with the patient's physicians.
- **Payment** means obtaining reimbursement for services, confirming coverage, billing or collection activities, and utilization review.
- **Health Care Operations** include the business aspects of running our practice, such as conducting quality assessment and improvement activities, auditing functions, cost-management analysis, and customer service.

In addition, your confidential information may be used to remind you of an appointment (by phone or mail) or provide you with information about treatment options or other health related services including release of information to friends and family members that are directly involved in your care or who assist in taking care of you. However, we will only disclose medical information that these people need to know.

We will use and disclose your PROTECTED HEALTH INFORMATION when we are required to do so by federal, state, or local law. We may disclose your PROTECTED HEALTH INFORMATION to public health authorities that are authorized by law to collect information, to a health oversight agency for activities authorized by law included but not limited to: response to a court or administrative order, if you are involved in a lawsuit or similar proceeding, response to a discovery request, subpoena, or other lawful process by another party involved in the dispute, but only if we have made an effort to inform you of the request or to obtain an order protecting the information the party has requested. We will release your PROTECTED HEALTH INFORMATION if requested by a law enforcement official for any circumstance required by law. We may release your PROTECTED HEALTH INFORMATION for workers' compensation and similar programs.

Any other uses and disclosures will be made only with your written authorization. You may revoke such authorization in writing and we are required to honor and abide by that written request, except to the extent that we have already taken action relying on your authorization.

PRIVACY RIGHTS

- Restricted Use and Disclosure: You may request that Greenville Speech & Language Therapy, PLLC not provide PROTECTED HEALTH INFORMATION to certain people including family members or relative. However we are not required to agree to a requested restriction.
- Confidentiality: You may request that Greenville Speech & Language Therapy, PLLC provide your health information in a confidential manner. You can request that we send your appointment cards, reports, bills and other mailings to a different address or that we notify you of this kind of information in another way, such as by telephone. You must make this request in writing and specify another address or means of communication.
- Inspection and Copy: You may ask to see and copy your speech and language records unless that information is protected by law. You must make this request in writing. We will act upon your request within 30 days and may charge you a legally acceptable amount for copying costs.
- Amend Speech & Language Records: You may ask us to change information in the speech & language record. If your request is denied, you can write a Statement of Disagreement with the denial that we will keep in your chart.
- Accounting of Disclosures: You may ask us to provide you with information about disclosures of PROTECTED HEALTH INFORMATION outside of treatment, payment and healthcare operations. Requests for accountings will not be made prior to April 14, 2003. Your request can go back six (6) years after April 14, 2009.
- Paper Copy: You may request a paper copy of this notice if you received this notice electronically.
- Privacy Violations: We are required by law to maintain the privacy of your PROTECTED HEALTH INFORMATION and to provide you with this notice of our legal duties and privacy practices with respect to PROTECTED HEALTH INFORMATION

Greenville Speech & Language Therapy, PLLC is required to abide by the terms of the Privacy Practices Notice currently in effect. We reserve the right to change the terms of this Privacy Practices Notice and to make new notice provisions effective for all PROTECTED HEALTH INFORMATION maintained by Greenville Speech & Language Therapy, PLLC. If the terms of this notice are changed, we will provide you with a revised version at the time of treatment or upon request.

If you feel your privacy rights have been violated, you may file a complaint with the Department of Health and Human Services, Office of Civil Rights privacy office listed below.

Filing a complaint will not affect the quality of the services you receive from Greenville Speech & Language Therapy, PLLC and you will not be retaliated against for filing a complaint.

The U.S. Department of Health & Human Services
Office of Civil Rights
2000 Independence Avenue S.W.
Washington, D.C. 20201
Toll Free: 1-877-696-6775

HHS.mail@hhs.gov