

Notice of Privacy Policy

Dear Patients:

HIPPA (Health Insurance Portability and Accountability Act) was established by congress to develop national safeguards to protect the confidentiality of patient medical information. The Privacy Section of this law was put into effect on April 14, 2003.

Our Notice of Privacy Practices is subject to change. If we change our notice, you may obtain a copy of the revised notice from the Clinic Front Desk.

Please sign the acknowledgment of receipt under "office policies" on the Patient Confidential information form, to indicate that you have received the notices for you and other minor family members and or dependents who receive care from Sarah Taylor L.Ac.

Respectfully,

Sarah Taylor L.Ac.

This notice describes how medical information about you may be used and disclosed by Sarah Collins LAc. And how you can get access to this information. Please review it carefully.

What is this notice and why is it important?

This notice is required by law to inform you of how your health information will be protected, how Sarah Collins LAc. May use or disclose your health information, and about your rights regarding your health information. If you have any questions about this notice, please contact Sarah Collins.

Understanding Your Health Information

Each time you visit Sarah Collins a record of your visit is made. Typically, this record contains a description of your symptoms, medical history, examination and test results, diagnosis, treatments, and a plan for future care. This information, referred to as your medical record, serves as a:

<ul style="list-style-type: none">• Basis for planning your care and treatment• Means of communication among health care providers• Legal documents of the care you receive• Means by which you or a third-party payer can verify that services you received were appropriately billed	<ul style="list-style-type: none">• A data source for medical research and public health• A source of data for planning facilities, marketing healthcare services and fundraising• A tool for educating health professionals• A tool with which we can assess and work to improve the care we provide
---	--

Understanding what is in your record and how your health information is used helps you to ensure its accuracy; better understand how others may access and use your health information; and make more informed decisions when authorizing disclosures to others.

Your Health Information Rights

- **To Obtain a copy of this notice**
- **Authorization to use your health information.** Before I use or disclose your health information, other than as described below, I will obtain your written authorization, which you may revoke at any time to stop future use or disclosure.
- **Access to your health information.** You may request a copy of your health information that Sarah Collins keeps in your medical or billing record. Your request must be submitted in writing and you may request a form for this purpose by calling (206) 257-9343.

- **Amend your health information.** If you believe that the information we have about you is incorrect or incomplete, you may request that we correct or add information. Your request must be in writing and you may request a form for this purpose by calling (206) 257-9343.
- **Request confidential communications.** You may request that when we communicate with you about your health information, we do so in a specific way (e.g. At a certain mailing address or phone number.) We will make every reasonable effort to agree to your request.
- **Limit our use or disclosure of your health information.** You may request in writing that we restrict the use or disclosure of your health information for treatment, payment, health care operations, or any other purpose except when specifically authorized by you, when we are required by law, or in an emergency situation in order to treat you. We will consider your request and respond, but we are not legally required to agree if we believe your request would interfere with your ability to treat you or collect payment for our services.
- **Accounting disclosures.** You may request a list of disclosures of your health information that we have made for reasons other than treatment, payment or health care operations. Disclosures that we make with your authorization will not be listed. We will provide one list per year free of charge, but will charge for subsequent lists in the same year.

Our Responsibilities

- We are required by law to protect the privacy of your health information, establish policies and procedures that govern the behavior of our workforce and business associated, and provide this notice about our privacy practices, and abide by the terms of this notice.
- We reserve the right to change our policies and procedures for protecting health information. When we make a significant change in how we use or disclose your health information, we will also change this notice. The new notice will be posted in the clinic and will be available at the front desk.
- Except for the purpose related to your treatment, to collect payment for our services, to perform necessary business functions, or when otherwise permitted or required by law, we will not use or disclose your health information without your authorization. You have the right to revoke your authorization at any time. We are unable to take back any disclosure we have already made with your permission.

Examples of Uses and Disclosures for Treatment, Payment and Healthcare Operations

- Facilitate your medical treatment
- Collect payment for health care services we provide
- Facilitate routine healthcare operations
- Notify family and friends in order to facilitate your care
- Inform persons about your death

Examples of Uses and Disclosures for other Purposes

- Appointment reminders
- Marketing
- Research
- Workers Compensation
- Public Health
- To avert serious threat to health or safety of you or another person
- Correctional Institutions
- Law enforcement
- Food and Drug Administration
- Business Associates

Special Situations

- Specialized Government Functions
- Regulatory oversight

If you have questions, would like additional information, or want to request an updated copy of this notice, you may contact Sarah Collins at (206) 257-9343. If you believe we have not properly protected your privacy, have violated your privacy rights, or disagree with a decision we have made about your rights please contact Sarah Collins at (206) 257-9343.