



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.

Family Audiology is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about the privacy practices at Family Audiology please contact:

Ashley Camblin
4105 W. Spring Creek Pkwy
Suite 702
Plano, TX 75024
(972) 943-0466

Effective Date of This Notice: April 14, 2005

I. How Family Audiology may Use or Disclose Your Health Information

Family Audiology collects health information from you and stores it in a chart and on a computer. This is your medical record. The medical record is the property of Family Audiology, but the information in the medical record belongs to you. Family Audiology protects the privacy of your health information. The law permits Family Audiology to use or disclose your health information for the following purposes:

1. Treatment. If another treatment provider is treating you, we may discuss your case in order to coordinate care between us. The kinds of health care information we may disclose about you in such circumstances could include your diagnosis, hearing test results, etc...
2. Payment. If you are covered by health insurance we may disclose diagnostic treatment details to your insurance provider in order to obtain payment for services rendered.
3. Regular Health Care Operations. An example of regular health care operations that can occur would be: your medical records may be randomly inspected by people who conduct quality assurance reviews to ensure that high standards of care are being maintained.
4. Information provided to you. You have the right to access your health information by completing a request for patient access to health information form.
5. Notification and communication with family. We may disclose your health information to notify or assist in notifying a family member, your personal representative or another person responsible for your care about your location, your general condition or in the event of your death. If you are able and available to agree or object, we will give you the opportunity to object prior to making this notification. If you are unable or unavailable to agree or object, our health professionals will use their best judgment in communication with your family and others.
6. Required by law. As required by law, we may use and disclose your health information.
7. Public health. As required by law, we may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or

- disability; reporting child abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.
8. Health oversight activities. We may disclose your health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings.
 9. Judicial and administrative proceedings. We may disclose your health information in the course of any administrative or judicial proceeding.
 10. Law enforcement. We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena and other law enforcement purposes.
 11. Deceased person information. We may disclose your health information to coroners, medical examiners and funeral directors.
 12. Organ donation. We may disclose your health information to organizations involved in procuring, banking or transplanting organs and tissues.
 13. Research. We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board or Family Audiology privacy board.
 14. Public safety. We may disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.
 15. Specialized government functions. We may disclose your health information for military, national security, prisoner and government benefits (only for health plans) purposes. (Note that disclosures for government benefits purposes are limited to health plans only.)
 16. Worker's compensation. We may disclose your health information as necessary to comply with worker's compensation laws.
 17. Marketing. We may contact you to provide appointment reminders or to give you information about other treatments or health-related benefits and services that may be of interest to you.
 18. Change of Ownership. In the event that Family Audiology is sold or merged with another organization, your health information/record will become the property of the new owner.

II. When Family Audiology May Not Use or Disclose Your Health Information

Except as described in this Notice of Privacy Practices, Family Audiology will not use or disclose your health information without your written authorization. If you do authorize Family Audiology to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

III. Your Health Information Rights

1. You have the right to request restrictions on certain uses and disclosures of your health information. Family Audiology is not required to agree to the restriction that you requested.
2. You have the right to receive your health information through a reasonable alternative means or at an alternative location. (This requires requests in writing; specification of method; payment for method, as applicable.)
3. You have the right to inspect and copy your health information.

4. You have a right to request that Family Audiology amend your health information that is incorrect or incomplete. Family Audiology is not required to change your health information and will provide you with information about Professional Audiology Associates' denial and how you can disagree with the denial.
5. You have the right to request an accounting of disclosures of your health information as required to be maintained by law by delivering a written request to our office. An accounting will not include internal uses of information for treatment, payment, or operations, disclosures made to you or made at your request, or disclosures made to family members or friends in the course of providing care.
6. You have a right to a paper copy of this Notice of Privacy Practices.

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, contact:

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IV. Changes to this Notice of Privacy Practices

Family Audiology reserves the right to amend this Notice of Privacy Practices at any time in the future, and to make the new provisions effective for all information that it maintains, including information that was created or received prior to the date of such amendment. Until such amendment is made, Family Audiology is required by law to comply with this Notice. Revised Notice of Privacy Practices will be displayed in the waiting room when amended as well as the patient will be notified at time of visit.

V. Complaints

Complaints about this Notice of Privacy Practices or how Family Audiology handles your health information should be directed to:

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Plano, TX 75024
(972) 943-0466

If you are not satisfied with the manner in which this office handles a complaint, you may submit a formal complaint to: Department of Health and Human Services Office of Civil Rights Hubert H. Humphrey Bldg. 200 Independence Avenue, S.W. Room 509F HHH Building Washington, DC 20201

You may also address your complaint to one of the regional Offices for Civil Rights. A list of these offices can be found online at <http://www.hhs.gov/ocr/regmail.html>.