

# RADIANT HEALTH

## Natural Medical Center

### **Notice of Privacy Policies HIPAA**

**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.**

This office is required by a federal regulation, known as the HIPAA privacy Rule, to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices. This office will not use or disclose your health information except as describes in this notice. The office is permitted by federal privacy laws to make uses and disclosures of your health information for purposes of treatment, payment, and health care operations. Protected health information is the information we create and obtain in providing our services to you. The health information about you is documented in a medical record and on a computer. Such information may include documenting your symptoms, medical history, examination and test results, diagnoses, treatment, and applying for future care or treatment. It includes billing documents for those services.

#### **Our Responsibilities**

- Maintain the privacy of your health information as required by law
- Provide you with a notice as to our duties and privacy practices as to the information we collect and maintain about you
- Abide by the terms of this notice
- Notify you if we can not accommodate a requested restriction or request
- We reserve the right to amend, change, or eliminate provisions in our privacy practices and access practices and to enact new provisions regarding the protected health information we maintain. If our information practices change, we will amend our notice. You are entitled to receive a revised copy of the notice by calling and requesting a copy of our “notice” or by visiting our office

#### **To Request Information or File a Complaint**

If you have question, would like additional information, want to report a problem regarding the handling of your information, if you believe your privacy rights have been violated and wish to file a written complaint with our office, please contact the office manager. You may also file a complaint by mailing or e-mailing it to the Secretary of Health and Human Services.

- We can not, and will not, require you to waive your rights under the Privacy Rule including the right to file a complaint with the Secretary of Health and Human Services (HHS) as a condition of receiving treatment from the office.
- We can not, and will not, retaliate against you for filling a complaint with the Secretary of Health and Human Services.
- For more information and a detailed printout of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), please visit their website at
- <http://www.hhs.gov/ocr/privacy>