



# Notice of Privacy Practices

EFFECTIVE AS OF 08/20/2012

In 1996 the U.S. Federal government passed the Health Insurance Portability and Accountability Act (HIPAA), which created national standards to protect patient medical records and other personal health information.

At Affordable Care Health Clinic (ACHC), we respect your privacy. We are required by law to keep your Protected Health Information (PHI) private and to provide you with notice of our legal duties and privacy practices.

This notice describes our responsibilities to you as your healthcare provider, how we might use and share your medical information, and your guaranteed rights as patients. **Please review it carefully.**

## PROTECTED HEALTH INFORMATION



Protected Health Information (PHI) covers:

- ★ Information used within a facility
- ★ Verbal or written information
- ★ Information stored in computer files
- ★ Information stored in paper files
- ★ Data shared between providers, payers or third parties

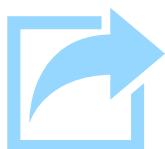
## OUR RESPONSIBILITY



As your healthcare provider we are required to:

- ★ Keep your health information private and safe
- ★ Give you this privacy notice
- ★ Follow the terms of this privacy notice
- ★ Let you know if your information has been compromised

## HOW WE USE & SHARE YOUR INFORMATION



We will NEVER sell your information or use it for marketing without your written permission. We might use and share your health information to:

- ★ **Treat you**—share information with other providers involved in your care
- ★ **Bill for services**—submit claims to your insurance (for lab only)
- ★ **Run our clinic**—improve care and train staff / nursing students
- ★ **Avoid serious threats** to health or safety
- ★ **Comply with the law** (e.g., public health reporting, abuse or neglect, law enforcement, legal proceedings, etc.)

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## Notice of Privacy Practices—continued

### PATIENT RIGHTS CHECKLIST



As a patient, HIPAA guarantees that you have the following rights:

- ★ Right to privacy
- ★ Right to receive a copy of your medical records
- ★ Right to request corrections to your medical records
- ★ Right to confidential communications (phone, email, text, etc.)
- ★ Right to provide authorization for use of your medical records for reasons other than treatment, billing and clinic operations
- ★ Right to request that we not share your information with specific individuals
- ★ Right to request that we keep your presence in our facility private from specific individuals
- ★ Right to receive a paper copy of this privacy notice
- ★ Right to register complaints with our facility and Federal agencies—without fear of retaliation—if you feel your rights have been violated

### QUESTIONS / COMPLAINTS



If you have any questions about our privacy policies or believe your privacy rights have been violated, please contact us immediately via mail, text, fax or email:

- ★ **Mail**—104 N. Stygler Rd., Gahanna, OH 43230
- ★ **Text**—(614) 475-2273
- ★ **Fax**—(614) 475-4329
- ★ **Email**—info@affordablecareclinic.com

You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. For more information visit <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>.

### CHANGES TO THIS NOTICE

We may change our privacy practices from time to time. If we do, we will update this notice and make it available in our office.