

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.

Effective: October 21, 2015

A Federal regulation, known as the "HIPAA Privacy Rule," requires that we provide detailed notice in writing of our privacy practices. We know that this Notice is long. The HIPAA Privacy Rule requires us to address many specific things in this notice. We will ask you to sign a form saying that you have received this notice.

In this Notice, we describe the ways that we may use and disclose health information about our patient. The HIPAA Privacy Rule requires that we protect the privacy of health information that identifies a patient, or where there is a reasonable basis to believe the information can be used to identify a patient. This information is called "protected health information" or "PHI". This Notice describes your rights as our patient and our obligations regarding the use and disclosures of PHI. We are required by law to:

- Maintain the privacy of PHI about you;
- Give you this Notice of our legal duties and privacy practices with respect to PHI; and
- Comply with the terms of our Notice of Privacy Practices that is currently in effect.

Teaneck Speech and Language Center is required by law to keep your PHI safe. This information may include:

- notes from your doctor, teacher, or other health care provider
- your medical history
- your test results
- treatment notes
- insurance information

How your PHI may and may not be used or shared

We may use or share your PHI without your permission for the following reasons:

- **Treatment**. We may share information with doctors and other health care providers who care for you. For example, if your doctor orders speech therapy, we will share the results of our treatment with that doctor.
- **Payment.** We may use and share information about the treatment you receive with your insurance company or other payer to facilitate payment for services. This may include sharing important medical information. We may share information to:
 - o get the insurance company's permission to start treatment
 - o get permission for more treatment
- Health Care Operations. We may use and share your PHI to run the Center and make sure all patients receive good care. For example, we may use your PHI to:
 - o see how well our services are working
 - o see how well our staff is doing
 - o see how we compare to other practices
 - o make our services better



- o help others study health care services
- Abuse and Neglect. We may share your PHI with government agencies when there is evidence of abuse, neglect, or domestic violence.
- Appointment Reminders. We will use your information to remind you of upcoming appointments. Reminders may be sent in the mail, by email, or by phone call or voicemail message. If you do not wish to get reminders, please tell your speech-language pathologist.
- As Required by Law. We will share your information when we are told to do so by federal, state, or local law. We will also share information if we are asked by the police or courts.
- **Government Functions.** Your information may be shared for national security or military purposes. If you are a veteran, your information may be shared with the Office of Veteran's Affairs.
- Marketing. We may use your information to let you know of other services that might be of interest to you.
- **Public Health Risks.** We may report information to public health agencies as required by law. This may be done to help prevent disease, injury, or disability. It may also be done to report medical device safety issues to the Food and Drug Administration and to report diseases and infections.
- **Regulatory Oversight.** We may use or share your information to report to agencies overseeing health care. This may include sharing information for audits, licensure, and inspections.
- **Research**. We may share your PHI with researchers to be included in their research project. Information will only be shared for projects that have been through a special approval process. These projects have rules to protect your privacy, too.
- Threats to Health and Safety. Your PHI may be shared if it is believed that it will prevent a threat to your health and safety or the health and safety of others.
- Worker's Compensation. We will share your information with Worker's Compensation if your case is being considered as a work-related injury or illness.

We may not use or share your PHI without your permission for any situation that is not listed in this notice. You will be asked to sign a form, called an authorization, to allow us to use or share your information. You are allowed to take back this authorization, called revoking authorization, at any time. We will not be able to get the information back that we shared with your permission.

Your Privacy Rights

You have the right to:

- Ask us not to share your information. You can ask us not to use or share your information for treatment, payment, or health care operations. You can also ask us not to share information with people involved in your care, like family members, friends, or teachers. You must ask for limits in writing. We must share information when required by law. We do not have to agree to what you ask.
- Ask us to contact you privately. You can ask us to only contact you in a certain way or at a certain place. For example, you may want us to call you but not email. Or you may want us to call you at work and not at home. You must ask us in writing. We will do all we can to do as you ask.



- CREATING PATHWAYS TO BETTER COMMUNICATION
 Look at and copy your PHI. You have the right to see a summary of your treatment, medical, and billing information. You may not be able to see or copy information put together for a court case, certain lab results, and copyrighted materials, such as test protocols.
 - Ask for changes to your PHI. You can ask us to change information that you think is wrong. You can also ask that we add information that is missing. You must ask us in writing and give us a reason for the change. We do not have to make the change.
 - Get a report of how and when your information was used or shared. You can ask us to tell you when your information was shared and with whom we shared it. There are some rules about this:
 - o You need to ask us in writing.
 - o You must tell us the dates you are asking about and if you want a paper or electronic copy.
 - o You may get information going back 6 years, but it cannot be for earlier than April 14, 2003. This is the date when the government privacy rules took effect.
 - Get a paper copy of this privacy notice. You can get a paper copy of this notice at any time. You can get a copy even if you have already signed the form saying you have seen this notice.

Who is Covered by This Notice

The people that must follow the rules in this notice are:

- All speech-language pathologists and other professionals working at Teaneck Speech & Language Center
- Anyone who is allowed to add PHI to your file, including professional and administratiave staff

Changes to the Information in This Notice

We may change this notice at any time. Changes may apply to information we already have in your file and any new information. Copies of the new notice will be available from our staff. The notice will have a date on the front page to tell you when it went into effect.

Complaints

You may file a complaint if you think we did something wrong with your information. You can complain to your regional office of the United States Office of Civil Rights. To find out more about filing complaints, go to <u>www.hhs.gov/ocr/privacy/hipaa/complaints/index.html</u>. All complaints must be in writing. You will not get in trouble for filing a complaint.

Contacts

If you have any questions about this notice or your privacy rights, please ask your speech-language pathologist or contact one of the partners at TSLC. 201-862-0333 or info@teaneckspeech.com.