

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.

Sumter Hearing Associates (SHA) is required by law to maintain the privacy of health information and to provide notice of its legal duties and privacy practices with respect to health information. We understand that the information about you and your health is personal. We value your trust, and are committed to protect the personal information you share with us. We record each visit in a chart in order to provide you with quality care, and to comply with legal requirements.

SHA is required by law to:

- Make sure that medical information that identifies you is kept private.
- Give you notice of our legal responsibilities and privacy procedures with respect to information about you.
- Follow the terms of the notice presently in effect.

If there are questions about any part of privacy policies at SHA, Virginia Corley will serve as the contact person. She should be contacted at the above address or by telephone:

Effective Date of This Document: 04/14/03

I. How SHA may Use or Disclose Health Information

SHA collects health information from patients and/or parent/guardian and stores it in a chart kept at 1116 F Alice Drive. This is the medical record. This may include information from the patient interview and health history, referral forms or reports from other agencies, audiologic evaluations, screening and complete diagnostics, hearing aid evaluations and information needed to appropriately select and fit amplification and assistive listening devices. The medical record is the property of SHA, but the information in the medical record is available upon request to the patient or parent/guardian. The law permits SHA to use or disclose your health information for the following purposes:

1. Treatment. The results of the evaluation(s) are used to provide audiologic services and recommendations. We may disclose this information to doctors, nurses, technicians, allied health professionals or other personnel who are involved in your health care. For example the records may be provided to the referring agency for co-ordination of care, or to a physician for treatment of a medical condition that was identified or substantiated by the audiologic evaluation. Or, results that show a conductive hearing loss in a child will be sent to the primary care physician (PCP) so that appropriate medical intervention can be initiated.
2. Payment. We may use and disclose medical information so that the services received may be billed to and payment collected from you, an insurance company or a third party. This includes all information necessary to obtain payment for services or goods. For example, an

insurance company may need additional explanations in addition to the procedures performed and the diagnosis code.

3. Health Care Operations. This includes the results of all testing and evaluations to case managers or physicians involved in the care of the individual. For example, a child with a hearing loss will be better served if the classroom teacher and others on the educational team is aware of the degree and implications of the hearing loss to the educational process. The results and recommendations will be provided to the school district and the school.

4. Information provided to you. You have the right to inspect and copy medical information from your chart that is generated at SHA. It does not include notes or records from other providers. A request must be made in writing to inspect or copy your evaluations, or examine your chart in the office. A small charge (up to 20c /sheet) may be incurred for copying.

5. Right to Amend. You have the right to amend you health information if you believe it is incorrect or incomplete, and you may request an amendment for as long as SHA keeps your information. A request must be made in writing, with a written explanation of the reason for your request. We have the right to deny your request if you ask us to amend information that is in our opinion: a) accurate and complete, b) not part of the PHI kept by SHA, c) not part of the PHI which you should be allowed to inspect or copy; or d) not created by SHA.

6. Directory. We do not maintain a directory in our facilities.

6. Notification and communication with family. We may disclose health information to notify or assist in notifying family members, personal representatives or another person responsible for the care of the individual. If the patient objects, we will give the opportunity to object prior to making this notification. If someone is unable or unavailable to agree or object, our health professionals will use their best judgment in communication with the family and others.

7. Required by law. As required by law, we may use and disclose health information. For example, we may release PHI in response to a court order or subpoena.

8. Public health. As required by law, we may disclose an individual's 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.

9. Health oversight activities. We may disclose health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings.

10. Judicial and administrative proceedings. We may disclose health information in the course of any administrative or judicial proceeding.

11. Law enforcement. We may disclose 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.

12. Deceased person information. We may disclose health information to coroners, medical examiners and funeral directors.

13. Organ donation. We may disclose health information to organizations involved in procuring, banking or transplanting organs and tissues.

14. Research. We may disclose health information to researchers conducting research that has been approved by an Institutional Review Board. SHA will only do this with signed permission from the patient or parent/guardian.

15. Public safety. We may disclose 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.

16. Worker's compensation. We may disclose health information as necessary to comply with worker's compensation laws.

17. Marketing. We may contact patients to provide appointment reminders or to give information about other treatments or health-related benefits and services that may be of interest.

18. Change of Ownership. In the event that SHA is sold or merged with another organization, your health information/record will become the property of the new owner.

II. When SHA May Not Use or Disclose Your Health Information

Except as described in this Notice of Privacy Practices, SHA will not use or disclose health information without written authorization. If SHA is authorized to use or disclose your health information for another purpose, the authorization may be revoked in writing at any time.

III. Your Health Information Rights

1. The patient has the right to request restrictions on certain uses and disclosures of your health information. SHA is not required to agree to the restriction that is requested.

2. The patient has the right to receive health information through a reasonable alternative means or at an alternative location. Copies can be mailed to the patient or parent/guardian by request in writing specifying the address. A small charge (20c/sheet) may be made and charges for postage included.

3. The patient has the right to inspect and copy his/her health information. A small fee will be charged.

4. The patient has a right to request that SHA amend health information that is incorrect or incomplete. SHA is not required to change health information and will provide information about SHA's denial and how the patient can disagree with the denial.

5. The patient has a right to receive an accounting of disclosures of health information made by SHA, except that SHA does not have to account for the disclosures described in parts 1 (treatment), 2 (payment), 3 (health care operations), 4 (information provided to patient) of section I of this Notice of Privacy Practices.

6. The patient has a right to a paper copy of this Notice of Privacy Practices.

IV. Changes to this Notice of Privacy Practices

SHA 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, SHA is required by law to comply with this Notice.

Any change will be communicated to patients during the next office visit.

V. Complaints

Complaints about this Notice of Privacy Practices or how SHA handles your health information should be directed to: Kimberly L. Kelly, M.Aud., CCC-A at the above address.

If the patient is not satisfied with the manner in which this office handles a complaint, a formal complaint may be made 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

VI. Handling of Charts and Patient Information in the Office.

1. A black out pen will be used to obscure the patient name after signing in for an appointment.
2. Charts will not be left in the diagnostic or hearing aid fitting room.
3. Charts not in use are filed in the office, where office personnel can ensure no patient has access.
4. Charts of patients waiting for their appointment will be on top of the cabinet in the office, so as not to be seen by patients checking out.
5. Fax cover sheets will be sent with all faxed information requesting an immediate call if the information was sent to the wrong location.
6. Phone messages will not identify any health information, but request a returned call.
7. The door to the diagnostic room and the fitting room will be closed when history information is being taken.