

## Notice of Privacy Practices for Harpeth Family Medicine, PC

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

The Health Insurance Portability and Accountability Act (HIPAA) requires us to maintain the privacy of Protected Health Information (PHI). This Notice explains your rights and our legal obligations regarding the privacy of your PHI.

The Act allows us to use and disclose your PHI in the following circumstances:

- **Treatment:** We may use PHI to give you medical treatment or services and to manage and coordinate your medical care. For example, we may disclose PHI to doctors, nurses, pharmacists, technicians, or other personnel who are involved in taking care of you.
- **Payment:** We may use and disclose PHI to bill and collect payment from you, the responsible party for your bill, an insurance company, or another third party for treatment and services. For example, we may need to give information regarding your treatment plan to your insurance company in order for it to pay for the treatment.
- **Health Operations:** We may use and disclose PHI for our health care operations. For example, we may use PHI to train new employees or for audits.

Uses and disclosures of your PHI for uses not covered by this Notice or the law will be made only with your written authorization. We cannot disclose your PHI to your employer or school without your authorization unless required by law. You will receive a copy of your authorization and may revoke it at any time by submitting a written revocation to our Privacy Officer. We will honor that revocation beginning the date we receive the written signed revocation.

You have several rights regarding your PHI. When you wish to use one of these rights, please inform our office so that we may give you the correct form for documenting your request. You have the following rights, subject to certain limitations, regarding your PHI:

- **Right to Inspect and Copy.** You have the right to inspect and/or receive a copy of your records. Your request must be in writing, and we must verify your identity before allowing the request. We are required to allow the access or provide the copy within 30 days of your request. We may provide the copy to you or to your designee in an electronic format acceptable to you or a hard copy. If you choose to have your PHI transmitted electronically, you will need to provide a written request to HFM listing the contact information of the individual or entity who should receive your electronic PHI. If your request is denied, you may request a review of the denial by a licensed healthcare professional who was not directly involved in the denial of your request, and we will comply with the outcome of the review.
- **Right to Request Restrictions.** You have the right to request restrictions on how your PHI is used for treatment, payment, and health operations. You also have the right to request a limit on the PHI we disclose about you to someone involved in your care or the payment of your care. We are not required to agree to your request. If we agree, we will comply with your request unless we terminate our agreement or if the information is needed to provide you with emergency treatment.
- **Right to Restrict Disclosures to Your Health Plan.** You have the right to restrict certain disclosures to your health plan if the disclosure is for payment or health care operations and pertains to a health care service for which you have paid out of pocket in full. We will honor this request unless we are otherwise required by law to disclose this information. This request must be made at the time of the service.

- **Right to Request Confidential Communications.** You have the right to request confidential communications. These requests must be in writing, may be revoked in writing, and must give us an effective means of communication or us to comply. For example, you may request that we call your cell phone rather than your home phone. We will not ask you the reason for your request.
- **Right to Request Amendments.** You have the right to request amendments. If you feel that PHI we have is incorrect or incomplete, you may ask us to amend the information. The request must be in writing and may be denied.
- **Right to an Accounting of Disclosures.** This will tell you how we have used or disclosed your PHI. We are not required to list certain disclosures including (1) disclosures made for treatment, payment, and healthcare operations purposes, (2) disclosures made with your authorization, (3) disclosures made to create a limited data set, and (4) disclosures made directly to you.
- **Right to Receive Notice of a Breach.** We are required to inform you by first class mail or by email if you have indicated a preference to receive information by email of any breach that may have affected your PHI.
- **Right to Receive a Copy of This Notice.** At any time you have the right to request a copy of this Notice, either electronic, paper, or both. You can get a copy of this Notice on our website <http://>

For certain PHI, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, let us know so we can follow your instructions. In these cases you have the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

HFM will never share your information for marketing purposes or sale of your PHI unless you give us written permission.

HFM may be required to disclose your PHI under the following circumstances:

- **Public health and safety:** We can share your PHI in certain situations like the prevention of disease, to assist with product recalls, to report adverse reactions to medications, suspected abuse, neglect, or domestic violence or to prevent or reduce a serious threat to anyone's health or safety.
- **Research:** We can use or share your PHI for health research.
- **Compliance with the law:** We will share your PHI if state or federal laws require, including the Department of Health and Human Services if it wants to see that we're complying with federal privacy laws.
- **Organ and tissue donation requests:** We can share your PHI with organ procurement organization.
- **Medical examiner or funeral director:** We can share your PHI with a coroner, medical examiner, or funeral director when an individual dies.
- **Workers' compensation, law enforcement, and other government requests:** We can use or share your PHI for workers' compensation claims, law enforcement purposes or with a law

enforcement official, with health oversight agencies for activities authorized by law or special government functions such as military, national security, and presidential protective services.

- Lawsuits and legal actions: We can share your PHI in response to a court or administrative order, or in response to a subpoena.

We reserve the right to change this Notice, and the right make the changed Notice effective for all PHI HFM maintains. A copy of our current Notice is posted in our office and on our website.

If you have any questions about our privacy practice, please contact our Privacy Officer. If you believe your privacy rights have been violated, you may file a complaint with us or with the Office for Civil Rights. To file a complaint with us, please contact our Privacy Office in writing. HFM will not retaliate or discriminate against you for filing a complaint.

Privacy Officer:

Reena Bhika  
8115 Isabella Lane  
Suite 12  
Brentwood, TN 37027  
Tel: 615-309-0080  
practicemanager@harpethfamilymedicine.com

Office for Civil Rights

<http://www.hhs.gov/ocr/privacy/hipaa/complaints/index.html>

We are required to abide by the policies stated in this Notice of Privacy Practices, which became effective March 23, 2009, and most recently revised on May 7, 2015.