



Notice of Privacy Practices

This notice describes how your medical information may be used and disclosed and how you can access this information. Please review it carefully. This notice describes the privacy practices of the health care providers of Balanced Health Acupuncture Inc. The health care providers covered by this notice may share health information with each other to carry out treatment, payment, or health care operations. These practitioners are collectively referred to as "Balanced Health Acupuncture," "BHA," or "We" in this notice, unless specified otherwise.

OUR DUTIES

Balanced Health Acupuncture is required by law to maintain the privacy of your protected health information and to provide you with this notice of its legal duties and privacy practices with respect to your health information. We are also required to inform you of any breach of your PHI.

OUR USES AND DISCLOSURES

The privacy rules generally allow the use and disclosure of your health information without your permission (known as an authorization) for purposes of health care treatment, payment activities, and health care operations. Here are some examples of what that might entail:

- **Treatment** means providing, coordinating or managing health care and related services by one or more health care providers. Treatment also can include coordination or management of care between a provider and a third party, and consultation and referrals between providers. For example, we may share health information about you with other physicians who are treating you.
- **Payment** includes activities with health insurance plans to obtain payment for services provided, and to make coverage determinations. This can include eligibility determinations, reviewing services for medical necessity or appropriateness, utilization management activities, claims management, and billing. If you wish that we not disclose your information for services paid for out-of-pocket to health plans, you can request this restriction in writing.
- **Health care operations** include the business aspects of running this practice, such as conducting quality assessment and improvement activities, auditing functions, cost-management analysis, and consumer service. They may also include review of health care practitioners and evaluation of provider performance, training programs in which students, trainees or practitioners in areas of health care learn under supervision to practice or improve their skills, and accreditation, certification, licensing and credentialing activities.

We may also create and distribute de-identified health information by removing all references to individually identifiable information. We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you. At times we may conduct fundraising efforts for the local community and various organizations. If you do not wish to receive those communications, you can tell us not to contact you with those matters.

Other allowable uses or disclosures of your health information

In certain cases, your health information can be disclosed to a family member, close friend, or other person whom you identify is involved in your care or payment for your care. If you would like to identify someone as such, and authorize BHA to release information to him or her, your request to BHA must be done in writing.

Balanced Health Acupuncture also is allowed to use or disclose your health information without your written authorization for uses and disclosures required by law, for public health activities, and other specified situations, including:

- disclosures to Workers' Compensation or similar legal programs, as authorized by and necessary to comply with such laws,
- disclosures related to situations involving threats to personal or public health or safety,
- disclosures related to situations involving judicial proceedings or law enforcement activity,
- disclosures to a coroner or medical examiner to identify the deceased or determine cause of death; and to funeral directors to carry out their duties,
- disclosures subject to approval by institutional or private privacy review boards and subject, to certain assurances by researchers regarding necessity of using your health information and treatment of the information during a research project,

- certain disclosures related to health oversight activities, specialized government or military functions and Health and Human Services investigations.

Except as described in this notice, other uses and disclosures will be made only with your written authorization. You may revoke your authorization as allowed under the HIPAA rules. However, you cannot revoke your authorization retroactively if BHA has taken action relying on it. In other words, you cannot revoke your authorization with respect to disclosures BHA has already made.

YOUR RIGHTS

You have the following rights with respect to your protected health information that BHA maintains. These rights are subject to certain limitations, as discussed below.

- ***Request restrictions on certain uses and disclosures of your health information***
You have the right to ask BHA to restrict the use and disclosure of your health information for treatment, payment, or health care operations, except for uses or disclosures required by law. You have the right to ask BHA to restrict the use and disclosure of your health information to family members, close friends, or other persons you identify as being involved in your care or payment for your care. You also have the right to ask BHA to restrict use and disclosure of health information, to notify those persons of your location, general condition, or death — or to coordinate those efforts with entities assisting in disaster relief efforts. If you want to exercise this right, your request to BHA must be in writing. BHA is not required to agree to a requested restriction. If BHA does agree, a restriction may later be terminated by your written request. If we do not agree, we will explain why in writing within 60 days. BHA may also disclose health information about you if you need emergency treatment, even if BHA has agreed to a restriction.
- ***The right to reasonable requests to receive confidential communications of protected health information from us by alternative means or at alternative locations.*** You must make such a request to BHA in writing and you must include a statement of disclosure of all or part of the information that could endanger you.
- ***Inspect and receive a copy your health information***
With certain exceptions, you have the right to inspect or obtain an electronic or paper copy of your health information in a “Designated Record Set.” This may include medical and billing records maintained: enrollment, payment, claims adjudication, and case or medical management record systems. However, you do not have a right to inspect or obtain copies of information compiled for civil, criminal, or administrative proceedings. All requests must be in writing.
- ***Request that we amend your health information that is inaccurate or incomplete***
With certain exceptions, you have a right to request that BHA amend your health information in a Designated Record Set. BHA may deny your request for a number of reasons. However, we will provide you a written statement as to why it was denied within 60 days. All requests must be in writing, and you must include a statement to support the requested amendment.
- ***Receive an accounting of disclosures of your health information***
You have the right to a list of certain disclosures BHA has made of your health information. This is often referred to as an “accounting of disclosures.” You may receive information on disclosures of your health information going back for six years from the date of your request. All requests must be in writing. You do not have a right to receive an accounting of any disclosures made: for treatment, payment, or health care operations; to you about your own health information; incidental to other permitted or required disclosures; where authorization was provided; for national security or intelligence purposes or to correctional institutions or law enforcement officials in certain circumstances.
- ***Right to obtain a paper copy of this notice from BHA upon request***

CHANGES TO THE INFORMATION IN THIS NOTICE

This notice is effective as of September 23, 2013. However, BHA reserves the right to change the terms of its privacy policies at any time, and to make new provisions effective for all health information that BHA maintains. This includes health information that was previously created or received, not just health information created or received after the policy is changed. If changes are made to BHA’s privacy policies described in this notice, you will be provided with a revised Privacy Notice.

CONTACT

If you have any questions or concerns about this HIPAA Patient Privacy notification, please contact Leslie Murphy, Lic.Ac., by email at leslie@balancedhealthacu.com.