

EYE SEE RAVENSWOOD
NOTICE OF PRIVACY PRACTICES

This notice describes how medial information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

We respect our legal obligation to keep your health information private. We are obligated by law to give you notice of our privacy practices. This Notice describes how we protect your health information and what rights you have regarding it. We reserve the right to change our privacy practices and the terms of this Notice at any time; provided changes are permitted by applicable law. We reserve the right to make the changes in our privacy practices and the new terms of our Notice effective for all health information that we maintain, including health information we created or received before we made the changes. In the event we make a material change in our privacy practices, we will change the Notice and provide it to you.

We may provide you with healthcare information regarding your care and products or services that we offer. We will not use your health information for marketing communications, nor will we sell your contact information.

TREATMENT, PAYMENT AND HEALTH CARE OPERATIONS

The most common reason that we use or disclose your health information is for health care operations, treatment, or payment. Examples of how we utilize your information for healthcare operations are; financial or billing audits, internal quality assurance, participation in managed care plans, defense of legal matters and business planning. Examples of internal disclosure are: setting up an appointment, examining your eyes, prescribing glasses and/or contact lenses and medications. Treatment examples of disclosure include: referring you to another physician for continuation of care, or getting copies of your health information from another professional. Disclosure for payment purposes are; asking you about your health or vision care plans or sources of payment, preparing and sending bills or claims and collecting unpaid amounts (either ourselves or through a collection agency or attorney). We routinely use your health information inside our office for these purposes without special permission. If we need to disclose your health information outside of our office we will ask you for special written permission.

USES AND DISCLOSURES FOR OTHER REASONS WITHOUT PERMISSION

In some limited situations, the law allows or requires us to use or disclose your health information without your permission. Not all of these situations will apply to you: most will never come up at our office. Such uses or disclosures are:

- When a state or federal law mandates that certain health information be reported for a specific purpose.
- For public health purposes such as contagious disease reporting, investigation or surveillance, and notices to and from the Federal Food and Drug Administration regarding drugs or medical devices.
- Disclosures to governmental authorities about victims of suspected abuse, neglect or domestic violence.
- Uses and disclosures for health oversight activities, such as for the licensing of doctors; for audits by Medicare or Medicaid; or for investigation of possible violations of health care laws.
- Disclosures of judicial and administrative proceedings such as in response to subpoenas or orders of courts or administrative agencies.
- Disclosures for law enforcement purposes such as to provide information about someone who is or is suspected to be a victim of a crime; to provide information about a crime at our office; or to report a crime that happened elsewhere.
- Uses of disclosures for health related research
- Disclosure to a medical examiner to identify a dead person or to determine the cause of death; or to funeral directors to aid in burial; or to organizations that handle organ or tissue donations.
- Uses and disclosures to prevent a serious threat to health or safety.
- Uses or disclosures for specialized government functions such as for the protection of the president or high-ranking government officials; for lawful national intelligence activities for military purposes; or for the evaluation and health of members of the foreign service.
- Disclosures of de-identified information
- Disclosure relating to workman's compensation programs.
- Disclosure of a "limited data set" for research, public health or health care operations.
- Incidental disclosures that are unavoidable by-product of permitted uses or disclosures.
- Disclosures to "business associates" who perform health care operations for us, and who commit to respect the privacy of your health information.

If given permission, we will share relevant information about your eye care with your family or friends.