

# HIPAA Privacy Document

## Tony Schwartz Bodywork LLC

### **The Company is Required by Law to:**

- Make sure that health information that identities you is kept private.
- Give you this notice of our legal duties and privacy practices with respect to health information about you and follow the terms of the notice is currently in effect.
- We will disclose health information about you when required to do so by federal, state, or local law.

### **Law Enforcement Disclosers:**

- We may release health information if asked to do so by a law enforcement official: in reporting certain injuries, as required by law, gun shoot wounds, burns, injuries to perpetrators of crime.
- We may release health information in response to a court order subpoena, warrant, summons, or similar process to identify or locate a suspect, fugitive, material witness, or missing person.
- We may release information about the victim if a crime, if the victim agrees to disclosure or under certain limited circumstances, we are unable to obtain the person's agreement.
- We may release information about death we believe may be the result of a criminal conduct.
- Release information in emergency circumstances to report a crime, the location of the crime or any victims.

### **Military and Veterans Disclosers:**

- If you are a member of the armed forces or separated/discharged from the military services, we may release health information about you as required by military command authorities or the Department of Veterans Affairs as may be applicable. We may also release health information about foreign military personal to the appropriate foreign military personal to the appropriate foreign military authorities.

### **Workers Compensation:**

- We may release health information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.

### **Discloser of Public Health Risks:**

- We may disclose health information about you to public health activates. These activities generally include the following but are not limited to:

- To prevent or control disease, injury or disability
- To report births or deaths
- To report child abuse or neglect
- To report reactions to medications or problems with products
- To notify people of recalls of products they may be using
- To notify person or organization required to receive information on FDA - regulated products
- To notify a person who may have been exposed to a disease or maybe at risk for contracting or spreading a disease or condition.
- To notify the appropriate government authority if we believe a patient has been victim of abuse, neglect, or domestic violence. We will only make this discloser if you agree or when required by law.

### **Health Oversight Activity:**

We may disclose health information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.

### **Lawsuits and Disputes:**

If you are involved in a lawsuit or a dispute, we may disclose health information about you in response to a court or administrative order. We may also disclose health information about you in response to a subpoena, discovery request, or other lawful process be someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

### **Disclosers to Coroners and Funeral Directors:**

We may release health information to a coroner or health examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release health information about patients to funeral directors as necessary to carry out their duties.

### **Disclosers to National Security & Intelligence Activities:**

We may release health information about you to authorized federal officials for intelligence, counter intelligence, and other national security activities authorized by law.

### **Protective Services for the President and Others:**

We may disclose health information about you to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state or conduct special investigations.

Inmates: Inmates are not serviced by this company and does not conduct health care services in any locations where persons are under detention. For those on conditional release or monitoring by electronic devices we are authorized to provide healthcare and administrative records if requested in the process of an investigation.

**Your Rights Regarding Health Information About You:**

-Right to Request and Inspect or Copy: You have the right to inspect and copy health information that may be used to make decisions about your care. Usually, this includes health and billing records. To inspect and get a copy of your health care information please contact the company or request a copy during your appointment. The file can be reviewed at that time and a copy can be copied and mailed or picked up in a reasonable period of time. A log is kept showing who has viewed your file or requested that have been made for your file. This log is kept within your file for inspection at any time. Once file content has been copied and given to the client or authorized party this company has no responsibility as to protection of the information held within your file on behalf of those who obtain your information.

-Right to Amend: If you feel that the health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as we keep the information. To request along with what would be preferred to the present content found in the file.

-We may deny your request for an amendment if it is not in writing or does not include a reason to support the request if you ask us to amend information that: 1) was not created by us, unless the person or entity that created the information is no longer available to make the amendment. 2) was provided for the purpose of deceptions or concealment of a court, law enforcement, or legal proceedings.

-We may deny any amendment that is outside the company's scope of practice.

-Right to an Accounting and Disclosures:

You have the right to request a list of accountings for any disclosures of your health information we have made, except for uses and disclosures for treatment, payment, and health care operations.

-Right to Request Restrictions: You have the right to request restrictions or limitations on the health information we use or disclose about your treatment, payment, or health care operations. You also have the right to request a limit on your health information we disclose about you to someone who is involved in your care or payment for your care, such as a family member including but limited to a spouse or other party.

- Right to Request Confidential Communication: You have the right to request that we communicate with you about health matters in a certain way or at a certain location. This means should be requested and confirmed within your health care file notes and marked. It is the client's responsibility to ensure that this is documented within the file upon disclosure to the company.

- Right to a Paper Copy of this Notice: You have a right to a copy of this notice and any changes which take place with this company's policies.

**How We May Use and Disclose Health Information About You:**

- For Treatment: We may use health information about you to provide you with health care treatment or services. We may disclose health information about you to doctors, nurses, technicians, health students, or other health care personnel who are involved in your care needed for your health upon request of you or a health care provider if you are unable to do so.

- We may use your medical notes, payment records, or contact information needed to operate our company.

- If medical or industry research is conducted within or outside the company which does not disclose your name or other identifying information.

- **Complaints:** If you believe that your privacy has been violated, you may file a complaint with the company in writing. You may also contact the Federal Department of Health and Human Services.