

ACADIANA OTOLARYNGOLOGY HEAD & NECK SURGERY, L.L.C.
NOTICE OF OUR HEALTH INFORMATION PRACTICES

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

Understanding Your Health/Record Information: Each time you visit a hospital, physician, or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnosis, treatment, and a plan for future care or treatment. It may also contain correspondence and other administrative documents. All of this information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment
- Means of communication among the many health professionals who contribute to your care
- Legal document describing the care you received
- Means by which you or a third-party payer can verify that services billed were actually provided
- A tool in educating health professionals
- A source of data for medical research
- A source of information for public health officials charged with improving the health of the nation
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Your Health Information Rights: Although your health record is the physical property of the healthcare practitioner or facility that compiled it the information belongs to you. You have the right to:

- Inspect and obtain a copy of your health record.
- Amend your health record.
- Request a restriction on certain uses and disclosures of your information.
- Obtain a paper copy of the notice of information practices.
- Obtain an accounting of disclosures of your health information.
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.
- Receive confidential communications of protected health information.

Our Responsibilities: This organization is required to:

- Maintain the privacy of your health information
- Provide you with notice as to our legal duties and privacy with respect to information we collect and maintain about you
- Abide by the terms of the notice
- Notify you if we are unable to agree to a requested restriction
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We will not use or disclose your health information without your consent or authorization except as {provided by law or} described in this notice. We reserve the right to change the terms of this notice and to make the new notice provisions effective for all protected health information that we maintain. We will post the most current version of this Notice of Privacy Practices in a location that is accessible for your review.

Examples of Disclosures for Treatment, Payment and Health Operations: Pursuant to law and the consent form, which you have signed:

We will use your health information for treatment. For example: Information obtained by a nurse, physician, or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you.

We will use your health information for payment. For example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used. In the event that payment is not made, we may also provide limited information to collection agencies, attorneys, credit reporting agencies and other organizations as necessary to collect for services rendered.

We will use your health information for regular health operations. For example: Members of the staff may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.

Appointment Reminders: We may contact you to provide reminders of your appointment with our office.

Business Associates: There are some services provided in our organization through contracts with business associates. Examples include physician services in the emergency department and radiology, certain laboratory tests, collection agencies, and a copy service we use when making copies of your health record. When these services are contracted, we may disclose your health information to our business associate so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, your location and general condition.

Communication with family: Health professionals, using their best judgement, may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

Funeral Directors: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

Workers compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Public health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Correctional institution: Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.

Law enforcement: We may disclose certain health information for law enforcement purposes as required by law or in response to a valid subpoena.

[Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.]

For More Information or to Report a Problem: If you have any questions and would like additional information, you may contact our office. *{If you believe your privacy rights have been violated you can file a complaint with the director of health information management or with the secretary of Health and Human Services. There will be no retaliation for filing a complaint.}*