

Leaders in experienced, state-of-the-art medical & surgical care for the eyes

## PATIENT PRIVACY AND CONFIDENTIALITY GUIDELINES

We are required by the Health Insurance Portability and Accountability Act of 1996 (HIPPA) to not disclose to anyone any personal health or identifiable information about our patients without their authorization. We may be required to disclose health and personal information about you in your treatment, to bill for our services and to collect payment form you or your insurance company or to review the quality of services to you. We may disclose information about you for the benefit of governmental benefit programs or in response to a warrant or subpoena. We may be required to provide health information about you to outside business associates such as our transcriptionist. These business associates are required to sign a contract with us stating that any information they come in contact with must be held in the strictest of confidence. We may be required to disclose personal information about you to contact you as a reminder of an appointment, to renew or prescribe medications or for alternative treatment options. We also may need to release medical information about you to your spouse and family members.

Eye Care Professionals will make every effort to protect your health and personal information, however many instances in a medical practice require us to divulge this type of information.

We have instituted a number of measures to protect you from identity theft. In accordance with the Fair and Accurate Credit Transactions (FACT) Act, we identify, detect and respond to red flags in the handling of patient information. This includes limiting access to patient financial information. In the event that we find any cause for concern, we will notify you immediately.

Eye Care Professionals has my permission to release information concerning my personal health or identifiable information for but not limited to the information above.

## PRINTED NAME OF PATIENT SIGNATURE

## DATE

SIGNATURE OF PARENT OR GUARDIAN

We reserve the right to make changes to this notice at any time. In the event there is a material change to this notice, the revised notice will be posted.

If you have any complaints concerning our privacy practices you may contact our Privacy Officer, Jan Bishop by mail at the above address or e-mail her at jan@renoeyecare.com

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