## Dr. Bob Smith Health Center at SMU **Notice of Privacy Practices**

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

It is the policy of Memorial Heal W K & H Q W H U D W 6 R X W K H U Q 0 H W K R G L V W 8 Q &HQWHU′ WR FRPSO\ ZLWK WKH +HDOWK ,QVXUDQFH 3RUWDE WKH +HDOWK ,QIRUPDWLRQ 7HFKQRORJ\ IRU (FRO  $^{3}+,3$ \$\$′  $^{3}+,7(&+'$ \$FW RI enDtinOg Geglul PtiSnGs.HP

The Health Center is required by law to maintain the privacy of your protected health information <sup>3</sup> 3 + , ánd to provide you with a notice of its legal duties and privacy practices with respect to your protected health information. Accordingly, this Notice of 3ULYDF\ 3UDFWLFHV 31RWLFH′ LV LQWHQGHG WR LQIRU^ 'a"

The effective date of this Notice is: September 23, 2013 (the effective date may not be earlier than the date on which the Notice is printed or otherwise published).

THE FOLLOWING IS A SUMMARY OF THE CIRCUMSTANCES UNDER WHICH AND PURPOSES FOR WHICH YOUR PHI MAY BE USED

for purposes of treatment, payment, and operations (TPO) in accordance with state and federal law. Use and disclosure of your protected health information for purposes of TPO do not require your authorization. We typically use or share your protected health information in the following ways:

- x Using and disclosing information for treatment purpose To maintain quality healthcare, it will be necessary to share protected health information with all members of your treatment team. This may include employees in the Health Center as well as other health care providers. For example, a physician treating you for an injury may ask another doctor about your overall health condition or disclose your treatment records to other health care providers who are providing health care treatment to you.
- x Using and disclosing in formation for payment purposes. The Health Center can use and share your protected health information to bill for and receive payment from health plans and other entities. Necessary information will be shared with appropriate payer sources and their representatives for payment purposes including, but not limited to eligibility, benefit determination, and utilization review. It will also be

necessary for our internal billing personnel to have access to protected health information to carry out their job functions.

x Using and disclosing infor mation for operations purposes. Necessary information will be shared for conducting business operations of the Health Center. Some examples of such business operations include, but are not limited to peer review, accreditation, quality assessment activities, training of staff, licensing, and conducting or arranging for other business activities.

We may enter into contracts with entities known as Business Associates that provide services to or perform functions on behalf of the Health Center. We may disclose protected health information to Business Associates once they have agreed in writing to safeguard the protected health information. For example, we may disclose your protected health information to a Business Associate to handle billing or to provide legal, accounting, auditing, and information technology services. Business Associates are also required by law to protect protected health information.

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- x Disclosures f or Health Care Oversight. The Health Center may disclose protected health information so that government agencies can monitor or oversee the health care system and government benefit programs and be sure that certain health care entities are following regulatory programs or civil rights laws like they should.
- x Disclosures for Judicial or Administrative Proceedings. The Health Center may disclose protected health information in a court or other type of legal proceeding if it is requested through a legal process, such as a court order or a subpoena.
- x Disclosures for Law Enforcement Purposes. As permitted or required by State law, the Health Center may disclose your protected health information to a law enforcement official for certain law enforcement purposes as follows: (1) as required by law for reporting of certain types of wounds or other physical injuries