Earth Integrated Medicine, LLC

It's About Options

YOUR HEALTH INFORMATION PRIVACY RIGHTS

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), you have certain privacy rights concerning your health care information. Under this law your health care provider generally cannot give your information to your employer, use or share your information for marketing or advertising purposes, or share private notes about your mental health counseling sessions without your written consent. As one of your health care providers it is our responsibility to keep your information safe and secure. We also need to make sure that your information is protected in a way that does not interfere with your health care. It is important that you understand that your information can be used and shared in the following ways:

-For your treatment and care coordination. Multiple health care providers may be involved in your treatment directly and indirectly.

-With your family, friends, relatives, or others that you identify who are involved in your health care or health care bills.

-To protect the public's health, such as reporting when the flu is in your area.

-To make required reports to the police, such as gunshot wounds.

-Obtain payment from third party payers.

In order to provide you with service that best meets your privacy needs, please tell us how best to contact you when needed. Please check all that apply:

___Please do not phone me at home. Use this alternate phone number:_____

___Please do not phone me at work. Use this alternate phone number:_____

___Please do not leave messages on answering machine.

___Please do not contact me by email.

___Please send mail, including my bills, to this alternate address:_____

___Other request (please describe):_____

_____

Patient Name (Please Print. Include parent/guardian name if patient is a minor.)

_____

Patient Signature (Parent/guardian signature if minor)

_____ _____/_____/_____ Date

If have questions and would like additional information, ask your provider for clarification. If you believe your privacy rights have been violated, you can file a complaint with the U.S. Department of Health and Human Services, Office of Civil Rights. You can find the Office for Civil Rights for your state at: http://www.hhs.gov/ocr/regmail.html.

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