

Notice of Privacy Practices for Protected Information



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.

Medi-Chair LLC is required by federal (US) law to maintain the privacy of certain confidential health care information. This confidential health care information is known as Protected Health Information or PHI. Medi-Chair LLC is also required to provide you with a notice of out legal duties and privacy practices with respect to your PHI. Medi-Chair LLC is also required to abide by the terms of the version of this Notice currently in effect.

<u>Use and Disclosure of PHI Without Your Authorization</u> Medi-Chair LLC is permitted to use PHI without your written authorization, or opportunity to object, in certain situations, and unless prohibited by a more stringent stat law, including:

- For the treatment, payment of health care operations activates of another health care provider who treat you;
- For health care and legal compliance activities;
- To a family member, other relative, or close personal friend or other individual involved in your care if we obtain your verbal agreement to do so or if we give you an opportunity to object to such a disclosure and you do not raise an objection, and in certain other circumstances where we are unable to obtain your agreement and believe the disclosure is in your best interests;
- To a public health authority in certain situations as required by law (such as to report abuse, neglect or domestic violence;
- For health oversight activities including audits or government investigations, inspections, disciplinary proceedings, and other administrative or judicial actions undertaken by the government (or their contractors) by law to oversee the health care system;
- For judicial and administrative proceedings as required by a court or administrative order, or in some cases in response to a subpoena or other legal process;
- For law enforcement activities in limited situations, such as when responding to a warrant;
- For military, national defense and security and other special government functions;
- To avert a serious threat to the health and safety of a person or the public at large;
- For workers' compensation purposes, and in compliance with workers' compensation laws;
- Medi-Chair LLC has a duty to notify affected individuals following a breach of unsecured PHI

Any other use of disclosure of PHI, other than those listed above will only be made with your written authorization. You may revoke your authorization at any time, in writing, except to the extent that we have already used or disclosed medical information in reliance on the authorization.

Use and Disclosure of PHI That Require Your Authorization

- For the purpose of receiving fundraising communications
- To pay out-of-pocket for a service and the right to require Medi-Chair LLC to not submit PHI to the individual's health plan

Clients Rights: As a Medi-Chair, LLC client, you have a number of rights with respect to your PHI, including:

The right to access, copy or inspect your PHI This means you may inspect and copy most of the medical information about you that we maintain. We will normally provide you with access to this information within 30 days of your request. We may also charge you a reasonable fee for you to copy any medical information that you have the right to access. In limited circumstances, we may deny you access to your medical information, an you may appeal certain types of denials. We have available forms to request access to your PHI and we will provide a written response if we deny you access and let you know your appeal rights. You also have the right to receive confidential communications of your PHI. If you wish to inspect and copy your medical information, you should contact our privacy officer.

The right to amend your PHI You have the right to ask us to amend written medical information that we may have about you. We will generally amend your information within 60 days of your request and will notify you when we have amended the information. We are permitted by law to deny your request to amend your medical information only in certain circumstances, like when we believe the information you have asked us to amend is correct. If you wish to request that we amend the medical information that we have about you, you should contact our privacy officer.

The right to request an accounting You may request an accounting from us of certain disclosures of your medical information that we have made in the six years prior to the date of your request. We are not required to give you an accounting of information we have used or disclosed for purposes of treatment, payment of health care operations, or when we share your health information with our business associates, like our billing company or a medical facility where you are treated. We are also not required to five you an accounting of our uses of protected health information for which you have already given us written authorization. If you wish to request an accounting, contact our privacy officer.

The right to request that we restrict the uses and disclosures of your PHI You have the right to request that we restrict how we use and disclose your medical information that we have about you. Medi-Chair LLC is not required to agree to any restrictions you request, but any restrictions agreed to by Medi-Chair LLC in writing are binding on Medi-Chair LLC.

Internet, Electronic Mail, and the Right to Obtain Copy of Paper Notice on Request If we maintain a website, we will prominently post a copy of this Notice on our website. If you allow us, we will forward you this Notice by electronic mail instead of on paper and you may always request a paper copy of the Notice.

<u>Revisions on the Notice</u> Medi-Chair LLC reserves the right to change their terms of this Notice at any time, and the changes will be effective immediately and will apply to all protected health information that we maintain. Any material changes to the Notice will be promptly posted in our facilities and posted to our website, if we maintain one. You can get a copy of the latest version of this Notice by contacting our privacy officer.

Privacy Officer Contact Information: Paula Redman, Privacy Officer	I hereby acknowledge t	y acknowledge that I have been provided with a copy of this Notice	
Medi-Chair LLC 1601 S. Pantano Rd., #107			
Tucson, AZ 85710-6750	Signature	Print Name	
Toll free Phone: 800-727-6684 X4	· ·		
Phone: 520-546-6002 X4			
Fax: 520-546-5530	Address	City, State & Zip Code	
Email: paula@redmanpowerchair.com			
	Date		