



Notice of Privacy Practices

Effective Date: October 1, 2004

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. If you have any questions, please contact a Patient Care Coordinator at Hearing HealthCare Centers. All locations are noted on the final page of this document.

Who will follow this notice?

Hearing HealthCare Centers provides health care to our patients through our audiologists, hearing instrument specialists, audiology assistants and patient care coordinators. The Privacy Practices in this notice will be followed by:

- Any hearing health care professional who treats you at any of our locations.
- All employed associates or volunteers at any of our locations.
- Any business associate or partner with whom we share our health information.

Our pledge to you

We understand that medical information about you is personal. We are committed to protecting medical information about you. We create a record of the care and services you receive to provide quality care and to comply with legal requirements. This notice applies to all of the records of your care that we maintain, whether created by our facility staff or acquired from another health care provider. We are required by law to:

- Keep medical information about you private.
- Give this notice of our legal duties and Privacy Practices with respect to medical information about you.
- Follow the terms of the notice that is currently in effect.

Change to this Notice

We may change our policies at any time. Changes will apply to medical information we already hold, as well as new information after the change occurs. Before we make a significant change in our policies, we will change our Notice of Privacy Practices and post the new notice in our lobbies and on our Web site (www.hearinghealthcarecenters.com). You can receive a copy of the current notice at any time. The effective date is listed below the title. You will be asked to acknowledge in writing your receipt of this notice.

How we may use and disclose medical information about you

- We may use and disclose medical information about you for treatment (such as sending medical information about you to a specialist as part of a referral); to obtain payment for treatment (such as an insurance company, third party payer, Medicare or other entity (or their authorized representatives) involved in the payment of your bill may include copies or excerpts of your medical record which are necessary for payment of your account. For example, a bill sent to a third party payer may include information that identifies you, your diagnosis and the procedures and supplies used. We may also provide payment information to other care providers who have been involved in your care and to support our health care operations (such as comparing patient data to improve treatment methods).
- We may use or disclose medical information about you without your prior authorization during routine healthcare operations including quality assurance, utilization review, internal auditing, accreditation, certification, licensing or credentialing activities of Hearing HealthCare Centers, medical research and educational purposes. Subject to certain requirements, we may give out

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medical information without prior authorization for public health purposes, abuse or neglect reporting, health oversight audits or inspections, research studies, worker's compensation purposes and emergencies. We also disclose medication information when required by law, such as in response to a request from law enforcement in specific circumstances, or in response to valid judicial or administrative orders.

- We also may contact you for appointment reminders, or to tell you about or recommend possible treatment options, alternatives, health-related benefits or services that may be of interest to you.
- Our waiting areas are shared and your name will be called when the Audiologist/Specialist is ready for your appointment. If you object to this manner of notification, please tell us.
- Some of our treatment areas are shared and there may be other patients and/or employees in the same area where you are being treated. If you object to this manner of treatment, please tell us.
- We may disclose medical information about you, on your behalf, to a family member or friend or other caregiver who is involved in your medical care, to someone who helps pay for your care, or to disaster relief authorities so that your family can be notified of your location and condition. If you have any objection to the use and disclosure of your health information in this manner, please tell us.
- Hearing HealthCare Centers may engage outside companies to carry out certain aspects of routine healthcare operations. The entities are called the "business associates" of Hearing HealthCare Centers. Hearing HealthCare Centers may need to disclose your information to the business associates to allow them to perform their duties. The business associates will, in turn, use and disclose your information as they conduct business on Hearing HealthCare Centers' behalf. Examples of business associates include, but are not limited to, hearing aid manufacturers, consultants, accountants, lawyers, third party billing companies, data management companies and shredding companies. Hearing HealthCare Centers requires the business associate to protect the confidentiality of your health information.

Other uses of medical information

Uses and Disclosures Requiring Your Authorization: Hearing HealthCare Centers may not disclose your health information to persons outside of Hearing HealthCare Centers for purposes other than treatment, payment or healthcare operations without your authorization. You have the right to revoke any authorization you have previously given by submitting a written statement of revocation to Hearing HealthCare Centers.

Uses and Disclosures that are required or permitted without consent or authorization

Regulatory Agencies:

Hearing HealthCare Centers may disclose your health information to government and certain private health oversight agencies, e.g. the Department of Public Health and Environment, or the Board of Medical examiners, for activities authorized by law, including, but not limited to, licensure, certification, audits, investigations and inspections. These activities are necessary to monitor compliance with the requirement of government programs.

Law Enforcement/Litigation:

Hearing HealthCare Centers may disclose your health information for law enforcement purposes as required by law or response to a court order.

Workers Compensation:

Hearing HealthCare Centers may release health information about you for worker's compensation or similar programs. These programs provide benefits for work-related injuries or illnesses.

Military/Veterans:

Hearing HealthCare Centers may disclose your health information as required by military command authorities, if you are a member of the armed forces.

Your rights regarding medical information about you

Although all records concerning your treatment obtained at Hearing HealthCare Centers are the property of Hearing HealthCare Centers you have the following rights concerning your health information:

- In most cases, you have the right to look at or get a copy of medical information that we use to make decisions about your care, when you submit a written request or by calling Hearing HealthCare Centers. A fee for the cost of copying, mailing or other related supplies may be charged.

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- If you believe that information in your record is incorrect or if important information is missing, you have the right to request that we correct the records by submitting a request in writing that provides your reason for requesting the amendment. We may deny your request to amend a record if the information was not created by us; if it is not part of the medical information maintained by us; or if we determine that record is accurate. You may appeal a decision by us not to amend a record. Such appeals must be in written form.
- You have the right to a list of those instances where we have disclosed medical information about you, other than for treatment, payment, health care operations or where you specifically authorized a disclosure, when you submit a written request. The request must state the time period desired for the accounting, which must be less than a 6-year period and starting after October 1, 2004. The first disclosure list request in a 12-month period is free, other requests will be charged according to our cost of producing the list. We will inform you of the cost before you incur any costs.
- You have the right to request that medical information about you be communicated to you in a confidential manner, such as sending mail to an address other than your home. You may request this by notifying us in writing of the specific way or location for us to communicate with you.
- You may request, in writing, that we not use or disclose medical information about you for treatment, payment or healthcare operations or to persons involved in your care except when specifically authorized by you, when required by law, or in an emergency. We will consider your request but we are not legally required to accept it. We will inform you of our decision on your request.

All written requests or appeals should be submitted to our Patient Care Coordinator at the office listed at the bottom of this notice.

Complaints and Concerns

- If you are concerned that your privacy rights may have been violated, or you disagree with a decision we made about access to your records, you may contact our main office listed below.
- Finally you may send a written complaint to the US Department of Health and Human Services Office of Civil Rights.
- Under no circumstance will you be penalized or retaliated against for filing a complaint or concern.

Privacy Office Information

To contact Hearing HealthCare Centers privacy office:

Hearing HealthCare Centers

Attn: Patient Care Coordinator
1515 N. Main St, Ste 15
Longmont, CO 80501
Phone: 303 776-8748
Fax: 303 684-9915

Longmont

1515 N. Main St, #15
Suite 15, 80501
303 776-8748

Boulder

4800 Baseline Rd
Suite E-108, 80303
303 499-3900