



**HIPPA**  
**Notice of Privacy Practice**  
*March 2009*

This notice describes how health information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

**Disclosures of medical information:**

The following are descriptions of different ways we may disclose your information.

**For treatment:** We may use health information about you to provide you treatment or services. We may disclose health information about you to doctors, nurses, technicians, health students, or other hospital personnel who are involved in taking care of you.

**Payment:** We may use and disclose health information about your treatment and services to bill and collect payment from you, your insurance company or a third party payer. We may also tell your health plan about treatment you are going to receive to determine whether your plan will cover it.

**Health Care Operations:** We may disclose information to guarantee that the Vein Care Center is running appropriately, and to make sure that the patients are receiving quality care. We may also use your medical information to determine if additional services need to be offered.

**Treatment Alternatives:** We may disclose medical information about you to propose treatment options that may interest you.

**Business Associates:** There are some services provided in our organization through contracts with business associates. This information may be provided to the businesses to help them to perform the tasks we have asked of them.

**As Required by Law:** We will reveal medical information about you when required to do so by federal, state, or local law.

**Military and Veterans:** If you are a member of the armed forces, we may disclose medical information as requested by the authorities.

**Healthcare Audits:** We may release information to an audit agency authorized by law. The audits would contain investigations, inspections, and licensure.

**Lawsuits:** If you are involved in a lawsuit, we may give medical information in response to a court order.

**Your Health Information Rights:** Although your health record is the physical property of the healthcare facility, you have the right to:

**Inspect and Copy:** You have the right to inspect and obtain a copy of the health information that is used to make decisions about your care. This includes medical and billing records. If you feel that the health information given is incorrect, you may ask the Vein Care Center to correct the information. You have the right to request an accounting of disclosures.

**Complaints:** If you believe your privacy rights have been dishonored, you may file a complaint with the Vein Care Center by following the process outlined in the Vein Care Center's Patient Rights documentation. You may contact our Business Manager, Nancy Lohr, at 419-227-4472 for further information about the complaint process. This notice was created and becomes effective on April 17, 2008.

**Right to Have a Copy of this Privacy Notice:** You have the right to have a copy of this notice. You may ask the Vein Care Center for a copy of this at any time.