

# HIPPA

## Health Insurance Privacy & Portability Act

### 1. OUR PLEDGE REGARDING MEDICAL INFORMATION

The privacy of your medical information is important to us. We understand that your medical information is personal, and we are committed to protecting it. We create a record of your care and services you receive at our organization. We need this record to provide you quality and to comply with certain legal requirements. This notice will tell you about the ways we may use and share medical information about you. We also describe your rights and certain duties we have regarding the use and disclosure of medical information.

### 2. OUR LEGAL DUTY:

#### LAWS REQUIRES US TO:

- A. Keep your medical information private.
- B. Give you this notice describing your legal duties, privacy practices, and your rights regarding your medical information.
- C. Follow the terms of the notice that is now in effect.

#### We have the right to:

- 1. Change our privacy practices and the terms of this notice at any time, providing that the changes are permitted by law.
- 2. Make the changes in our privacy practices and the new terms of our notice effective for all medical information that we keep, including information previously created or received before the changes.

#### Notice of Change to Privacy Practices:

- 1. Before we make an important change in our privacy practices, we will change this notice and make the new notice available upon request.

## Acknowledgement Form