

TEXAS NEUROSURGERY NOTICE OF PRIVACY PRACTICES

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.

Texas Neurosurgery uses health information about you for treatment, to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care that you receive. Your health information is contained in a medical record that is the physical property of Texas Neurosurgery.

HOW TEXAS NEUROSURGERY MAY USE OR DISCLOSE YOUR HEALTH INFORMATION.

For Treatment. Texas Neurosurgery may use your health information to provide you with medical treatment or services. For example, information obtained by a health care provider, such as a physician, nurse, or other person providing health services to you, will record information in your record that is related to your treatment. This information for health care providers to determine what treatment you should receive. Health care providers will also record actions taken by them during your treatment and note how you respond to the actions.

For Payment. Texas Neurosurgery may use and disclose your health information to others for purposes of receiving payment for treatment and services that you receive. For example, a bill may be sent to you or a third-party payor, such as insurance company or health plan. The information on the bill may contain information that identifies you, your diagnosis, and treatment or supplies used during treatment.

For Health Care Operations. Texas Neurosurgery may use and disclose health information about you for operational purposes. For example, your health information may be disclosed to members of the medical staff, risk or quality improvement personnel and others to:

- Evaluate the performance of our staff
- Assess the quality of care and outcomes in your cases and similar cases
- Learn how to improve our facilities and services; and
- Determine how to continually improve the quality and effectiveness of the health care we provide.

Appointments. Texas Neurosurgery may use your information to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

Patient Photo. Texas Neurosurgery may request that a digital image is taken of you and retained in your record for identification purposes.

Required by Law. Texas Neurosurgery may use and disclose information about you as required by law. For example, Texas Neurosurgery May disclose information for the following purposes:

- For judicial and administrative proceeding pursuant to legal authority
- To report information related to victims of abuse, neglect or domestic violence; and
- To assist law enforcement officials in their law enforcement duties.

Public Health. Your health information may be used or disclosed for public health activities such as assisting public health authorities or other legal authorities to prevent or control disease, injury, or disability, or for other health oversight activities.

Decedents. Health information may be disclosed to funeral directors or coroners to enable them to carry out their lawful duties.

Organ/Tissue Donation. Your health information may be used or disclosed for cadaveric organ, eye or tissue donation purposes.

Health and Safety. Your health information may be disclosed to avert a serious threat to the health or safety of you or any other person Pursuant to applicable law.

Government Functions. Your health information by being disclosed for specialized government functions such as protection of public officials or reporting to various branches of the armed services.

Workers' Compensation. Your health information may be used or disclosed to comply with laws and regulations related to Workers' Compensation.

Other uses. Other uses and disclosures will be made only with your written authorization, and you may revoke the authorization except to

the extent Texas Neurosurgery has acted in reliance on such.

YOUR HEALTH INFORMATION RIGHTS

You have the right to:

- Request a restriction on certain uses and disclosures of your information as provided by 45 C.F.R 164.522; however, Texas Neurosurgery is not required to agree to the requested restriction.
- Obtain a paper copy of the notice of information practices upon requests.
- Inspect and obtain a copy of your health record as provided by 45 C.F.R 164.524
- Request that your health record be amended as provided in 45 C.F.R 164.526
- Request communications of your health information by alternative means or at alternative locations; and
- Receive an accounting of disclosures made of your health information as provided by 45 C.F.R 164.528

Complaints

You may complain to Texas Neurosurgery and to the Department of Health and Human Services if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

Region VI – Dallas
Office for Civil Rights
U.S. Department of Health and Human Services
1301 Young Street, Suite 1169
Dallas, TX 75202
<http://www.hhs.gov/contacts>
Voice Phone 214-767-4056
FAX 214-767-0432
TDD 214-767-8940

Obligations of Texas Neurosurgery

Texas Neurosurgery is required by law to:

- Maintain the privacy of protected health information
- Provide you with this notice of its legal duties and privacy practices with respect to your health information.
- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction on how your information by alternative means or at alternative location; and

Texas Neurosurgery reserves the right to change its information practices and to make new provisions effective for all protected health information it maintains. Revised notices will be made to you by written request to Tammy Renfro or Colleen Nelson at the address below.

Contact Information

If you have any questions or complaints, please contact

Texas Neurosurgery, LLP
6080 N. Central Expy, Suite 150
Dallas, TX 75206

Effective: 9/1/2013

