

NOTICE OF PRIVACY PRACTICE EFFECTIVE APRIL 14, 2003

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

We understand that your health information is personal. Protecting your health information is important; we follow strict federal and state laws that require us to maintain the confidentiality of your health information.

When you receive care from us, we may use your health information in caring for you, billing for services, and conducting our normal business known as health care operations.

Examples:

Methods of care:

We keep records of the care provided to you. Health care providers use these records to deliver quality care to meet your specific needs. For example, your doctor may share your health information with a specialist who will assist you in your care.

Payment:

We keep billing records that include payment information and documentation of the services provided to you. Your information may be used to obtain payment from you, your insurance company, or another third party. We may also contact your insurance company to verify coverage for chiropractic care and to obtain payment.

Health Care Operations:

We use your health information to maintain a high quality of care, provide customer service, conduct required business duties, and better serve you.

To use your health information for other than the above uses requires your signed authorization.

There are limited situations when we are permitted or required to disclose health information without your signed authorization. These situations include:

- For public health purposes
- To protect victims of abuse, neglect, or domestic violence
- For health oversight activities such as investigations, audits, and inspections
- For law suits and legal proceedings or otherwise required by law

We are required by law to:

- Maintain the privacy of your health information
- Provide this notice that describes the ways we may use and share your health information
- Follow the terms of the notice currently in effect

- We reserve the right to make changes to this notice at any time and make the new privacy practices effective with patient information we maintain. You may request a copy of any notice from our Privacy Officer.

You have the right to:

- Request restrictions on how we use and share your health information. We will consider all requests for restrictions carefully, but are required to follow the laws
 - Request that we use a specific telephone number or address to communicate with you
 - Inspect and copy your health information, including billing records. (Fees may apply)
 - Request amendments or additions to your health record
 - Request an accounting of certain disclosures of your information made by us
- (All of the above requests must be made in writing through our Privacy Officer.)

This notice summarizes our Privacy Practices. If you would like further information about your privacy right, have concern that your privacy right have been violated or disagree with a decision that we have made about access to your chiropractic health care information, contact our Privacy Officer, Dr. Veronica Gutierrez.

We will investigate all complaints and resolve all issues of concern to you. You may also file a written complaint with the Office of Civil Right of the U.S. Dept. of Health and Human Services.

We are required by law to have you sign an acknowledgment of Receipt of Notice of Privacy Practice.

You May obtain a copy from the front desk.