



Summary of Notice of HIPAA Privacy Practices

This summary notice of privacy practices serves to inform you how BEAT REHABILITATION AND WELLNESS, LLC may use and disclose your protected health information (PHI). Beat Rehab creates and maintains a record of the care and services you receive from us. We need this record to provide you with quality care and to comply with certain legal requirements. We are required by law to protect the health information that identifies you and to inform you of our legal duties and privacy practices.

Uses and Disclosures of Protected Health Information (PHI) by Patient Consent

- Treatment: We may use PHI to provide you with health care treatment or services. This includes but is not limited to discussions with referring physicians to plan care and treatment.
- Payment: We may use and disclose PHI to third party or insurance company to obtain benefit information and prior approval for treatment or to justify medical care.
- Health Care Operations: We may use and disclose PHI to ensure that you are receiving the highest quality of care possible.

Uses and Disclosures of Protected Health Information (PHI) as required by Law

We will disclose PHI about you when required to do so by federal, state, or local law. Such examples are:

- To avert a serious threat to health or safety, for military personnel or veterans to Dept. of Veterans Affairs
- Supply information regarding Worker's Compensation claims to insurance companies, case managers, or employers
- Public health risks, National Security and Intelligence Agencies
- In response to a subpoena, court order, or other lawful request
- Health Oversight Agency for activities authorized by law (audits, investigations, etc)
- Law Enforcement requests, Coroners or Health Examiners, Protective Services for the President and Others

Your Rights as a Patient to your Protected Health Information (PHI) You have the following rights:

- To inspect and copy your medical records
- To request an amendment to your medical records although Beat Rehab is not required by law to change your records
- To request an accounting of the disclosures that Beat Rehab has made
- To request restrictions or limitations on your PHI and request confidential communications
- To obtain a copy of this notice at any time

** For all requests, please note that BEAT PHYSICAL THERAPY has 30 days to respond to your request and have the right to charge you copying fees.

Changes to this Notice

BEAT PHYSICAL THERAPY reserves the right to change this notice at any time. We reserve the right to make the revised notice effective for health information we already have about you as well as information we receive in the future.

Complaints

You may file a complaint with us or with the Secretary of the United States Department of Health and Human Services if you believe your privacy rights have been violated.

To file a complaint with us, contact our Privacy Officer, Alreen Day Alfonso, PT at 5840 Banneker Rd, Suite 230, Columbia, MD 21044

Notice: All complaints must be made in writing and should be submitted within 180 days of when you knew or should have known of the suspected violation. There will be no retaliation against you for filing a complaint.

To file a complaint with the Secretary, mail it to: Secretary of the U.S. Department of Health and Human Services, 200 Independence Ave, S.W., Washington, D.C. 20201. Call (202) 619-0257 (or toll free (877) 696-6775) or go to the website of the Office for Civil Rights, www.hhs.gov/ocr/hipaa/, for more information. There will be no retaliation against you for filing a complaint.