



# *Lifting Spirits Therapy Services, Inc.*

## Notice of Privacy Practices

Effective Date: April 14, 2003

In 1996, the Federal Government established uniform privacy and security standards to protect patient's medical information. The standard is known as the Health Insurance Portability and Accountability Act (HIPAA). The deadline for compliance is April 14, 2003.

The purpose of this notice is to ensure that you (the health-care recipient) or your designated representatives are aware of your rights to ensure the privacy of your healthcare information. Lifting Spirits Therapy Services, Inc retains the right to update this notice at anytime. To obtain the most recent notice, please submit a request in writing to the Privacy Officer of Lifting Spirits Therapy Services, Inc.

### 1. Privacy of Patient Information:

We have created a record of the services and treatment that you receive through Lifting Spirits Therapy Services, Inc. The privacy of your medical information is important to us and we are committed to protect it. We are required by law to keep your medical information private and notify you of your legal rights and privacy practices.

### 2. Uses and Disclosure of Patient Information:

Your medical information will be used for treatment, payment, and operations to maintain the highest quality of care possible. HIPAA allows disclosure of this information to your designated/authorized next of kin, licensed healthcare providers involved in your care, and other healthcare entities including insurance companies, state and federal regulation agencies, as well as law enforcement agencies in the interest of public safety. If you are involved in a lawsuit or dispute, we may disclose medical information about you in response to a court or administrative order, subpoena, discovery request, or other lawful process. Any other uses and disclosures of your personal health information will be made only with your written authorization. You may revoke such authorization in writing and we are required to honor and abide by that written request, except to the extent that we have already taken actions relying on your authorization. You, the patient, however, reserve the right in writing restrictions on certain uses and disclosures.

In addition to the above entities, Lifting Spirits Therapy Services, Inc may communicate with the following persons on my behalf for treatment and my health conditions: for example: Treating Physicians, Therapists, Billing Service Provider, School System, etc:

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### 3. Your Rights Regarding Medical Information About You:

You have the right to inspect and copy your personal health information kept on file with Lifting Spirits Therapy Services, Inc.

- You have the right to amend information we have about you that is incorrect or incomplete.
- You have the right to request restrictions on the medical information we use or disclose about you for treatment and payment.
- You have the right to an accounting of disclosures of medical information about you.
- All of the above request may be submitted in writing to the Privacy Officer of Lifting Spirits Therapy Services, Inc. at the address listed below.



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#### 4. Patient's (or Designee's) Personal Communication:

You may communicate confidential information, including services, to me by the following means:

U.S. Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Patient's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Designated/Authorized Next of Kin: \_\_\_\_\_

(Please Print Clearly)

Designated Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Relationship to Patient: \_\_\_\_\_

#### 5. Patient's Access to Medical Information

You have the right to see and obtain a copy of your medical records at any time. You may request change in your health information and request the reason for any disclosure (not including treatment, payment, and healthcare procedures). If Lifting Spirits Therapy Services, Inc does not agree with your changes, you must be allowed to insert a statement of disagreement into the record. Lifting Spirits Therapy Services, Inc is not required to agree to your requested restrictions. However, if we agree, the restriction is binding.

#### 6. Confidentiality of Patient Information

Lifting Spirits Therapy Services, Inc. will attempt in all cases to preserve the confidentiality of all oral and written medical information and electric transmission of information to physicians, insurance companies, state and federal entities, and law enforcement agencies in the interest of the public safety. Lifting Spirits Therapy Services, Inc will not be held responsible in the event of a natural disaster, theft, or burglary of their physical or electric property, having taken reasonable precautions.

#### 7. How to File a Complaint

You may file a complaint if you feel that your privacy rights have been violated. Lifting Spirits Therapy Services, Inc will not retaliate against you if you file a complaint. You may file a formal, written complaint with us at the address below, or with the Department of Health & Human Services, Office of Civil Rights, in the Event you feel your privacy rights have been violated.

#### 8. Lifting Spirits Therapy Services, Inc Contract Information

You may contact Yuridia Garza, the Privacy Officer of Lifting Spirits Therapy Services, Inc for more information on our privacy policy at the below address and telephone number.

Please note this is a summary regarding our privacy policies. If you would like a detailed policy, please contact Lifting Spirits Therapy Services, Inc in writing or by telephone.

For more information about HIPAA or to file a complaint contact:

The U.S. Department of Health & Human Services Office of Civil Rights (877) 696-6775 (Toll-free)

P.O. Box 1071

Gainesville, GA 30503

(678) 908 - 7057



200 Independence Ave, S.W.  
Washington, D.C. 20201

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