

Notices of Privacy Practices and insurance Authorization

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE READ IT CAREFULLY

We respect our legal obligation to keep health information that identifies you private. We are obligated by law to give you notice of our privacy practices. This notice describes how we protect your health information and what rights you have regarding it.

TREATMENT, PAYMENT, AND HEALTH CARE OPERATIONS

The most common reason why we use or disclose your health information is for treatment, payment, or health care operations. Examples of how we use or disclose information for treatment purposes are: setting up an appointment for you, testing or examining your eyes for prescribing glasses, contact lenses, or eye medications and faxing them to be filled; referring you to an eye doctor or clinic for eye care or low vision aids or services; or getting copies of your health information from another professional that may have seen you before us.

Examples of how we use or disclose your health information for payment purposes are: asking you about health or vision care plans, or other sources of payment; preparing and sending bills or claims; and collecting unpaid amounts (either ourselves or through a collection agency or attorney). "Health care operations" mean those administrative and managerial functions we must do in order to run our office.

Examples of how we use or disclose your health information for health care operations are: financial or billing audits; internal quality assurance; personnel decisions; participation in managed care plans; defense of legal matters; business planning and outside storage of our records.

*We routinely use your health information inside our office for these purposes without any special permission. If we need to disclose your health information outside of our office for these reasons, we usually will not ask you for special written permission.

USES AND DISCLOSURES FOR OTHER REASONS WITHOUT PERMISSION

In some limited situations, the law allows or requires us to use or disclose your health information without your permission. Not all the situations will apply to us; **some may never come up at our office at all.**

Such uses or disclosures are:

- **When a state or federal law mandates that certain health information be reported for a specific purpose**
- **For public health purposes, such as contagious disease reporting, investigation or surveillance, and notices to and from the federal and drug administration regarding drugs or medical devices**
- **Disclosures to governmental authorities about victims of suspected abuse, neglect, or domestic violence**
- **Uses and disclosures for health oversight activities, such as for the licensing of doctors, for audits by Medicare or Medicaid, or for investigation of possible violations of health care laws**
- **Disclosures for judicial and administrative proceedings, such as in response to subpoenas or orders of courts or administrative agent**
- **Disclosures for law enforcement purposes, such as to provide information about someone who is or is suspected to be a victim of crime, to provide information about a crime at our office, or to report a crime that happened somewhere else.**
- **Disclosure to a medical examiner to identify a dead person or to determine the cause of death: or the funeral directors to aid in burial or to organizations that handle organ or tissue donations.**
- **Uses or disclosures for health-related research.**
- **Uses and disclosures to prevent a serious threat to health or safety.**
- **Uses and disclosures for specialized government functions, such as for the protection of the president or high-ranking government officials, for lawful national intelligence activities, for military purposes, or for the evaluation and health of members of the foreign service**
- **Disclosures of de-identified information**
- **Disclosures relating to worker's compensation programs.**
- **Disclosures of a "limited data set" for research, public health, or health care operations**
- **Incidental disclosures that are an unavoidable by-product of permitted uses or disclosures**
- **Disclosures to "business associates" who perform health care operations for us and who commit to respect the privacy of your health information.**

**Unless you object, we will also share relevant information about your care with your family or friends who are helping you with your eye care.