



VICTORY

REHABILITATION

This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

Your rights

You have the right to:

- *Get a copy of your paper or electronic medical record.* You can ask to see or get an electronic or paper copy of your medical record and other health information we may have about you. We will provide you with a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable cost-based fee.
- *Correct your paper or electronic medical record.* You can ask us to correct health information about you that you think is incorrect or incomplete. We may say no to your request but will provide you with reasoning for that decision within 60 days.
- *Request confidential communication.* You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- *Ask us to limit the information we share.* You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request if your request will affect your care. If you pay for a service or health

- care item out of pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer.
- *Get a list of those with whom we've shared your information.* You can ask for a list (accounting) of the times we have shared your health information for six years prior to the date you ask, who we shared it with, and why. We will include all of the disclosures except for those about treatment, payment, and health care operations.
- *Get a copy of this privacy notice.* You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically.
- *Choose someone to act for you.* If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- *File a complaint if you believe your privacy rights have been violated.* You can file a complaint if you feel we have violated your rights by contacting

HIPPA Privacy Officer

Jerison Speer

Victory Rehabilitation, LLC
122 Enterprise Court, Suite E
Columbus, GA 31904
706-507-5917

jerison@victoryrehabilitation.net

- *File a complaint if you believe your privacy rights have been violated.* You can file a complaint if you feel we have violated your rights by contacting the US Department of Health and Human Services for Civil Rights by
 - sending a letter to 200 Independence Avenue, SW, Washington, DC 20201
 - calling 1-877-696-6775
 - visiting www.hhd.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Your choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below. In these cases, you have both the right and choice to tell us to

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation. If you are not able to tell us your preference, for example, if you are unconscious, we may share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission

- Marketing purposes
- Most sharing of psychotherapy notes

Other uses and disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

- *Treat you.* We can use your health information and share it with other professionals who are treating you.

- Example: A doctor treating you for an injury asks another doctor about your overall health conditions.

- *Run our organization.* We can use and share your health information to run our practice, improve your care, and contact you when necessary.

- Example: We use health information about you to manage your treatment and services.

- *Bill for your services.* We can use and share your health information to bill and get payment from health plans or other entities.

- Example: We give information about you to your health insurance plan so it will pay for your services.

- *Comply with the law.* We will share information about you if state or federal law requires it, including the Department of Health and Human Services if it wants to see that we are complying with federal privacy law.

- *Address workers' compensation, law enforcement, and other government requests.*

- *Respond to lawsuits and legal actions.* We can share health information about you in response to a subpoena.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html. WE can share health information about you for certain situations such as

- Preventing disease
- Helping with product recalls

- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than described here.

For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp/html.

Changes to the terms of this notice:

We can change the terms of this notice and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our website.

*Effective date of this notice:
May 14, 2024