

USES AND DISCLOSURES REQUIRING YOU TO HAVE AN OPPORTUNITY TO OBJECT

Springfield Heart Surgeons LLC (SHS) is required by law to maintain the privacy of health information about you and to provide individuals with notice of our legal duties and privacy practices with respect to health information. SHS is required to ensure the confidentiality, integrity, and availability of all of your information in electronic format and to protect against any reasonably anticipated uses or disclosures of information. SHS is required to abide by the terms of the Notice of Privacy Practices in effect at the time.



Springfield Heart Surgeons
www.springfieldheartsurgeons.com

Your Health Information Rights

Although your health record is the physical property of SHS, the information in your health record belongs to you. You have the following rights:

RIGHT TO REQUEST RESTRICTIONS - You have the right to request that we restrict the disclosures of health information about you to carry out treatment, payment, or health care operations.

We are not required to agree to any requested restriction. However, if we do agree, we will follow that restriction unless the information is needed to provide emergency treatment.

RIGHT TO RECEIVE CONFIDENTIAL COMMUNICATIONS - You have the right to request that SHS communicate health information about you, to you, in a certain way or at a certain location.

RIGHT TO INSPECT AND COPY - With a few very limited exceptions, you have the right to inspect and obtain a copy of health information about you.

RIGHT TO AMEND - You have the right to ask SHS to amend health information about you.

RIGHT TO AN ACCOUNTING OF DISCLOSURES - You have the right to receive an accounting of disclosures of health information about you.

RIGHT TO A COPY OF THE NOTICE OF PRIVACY PRACTICES - You have the right to obtain a paper copy of the Notice of Privacy Practices.

RIGHT TO COMPLAIN - You may complain to us and to the United States Secretary of Health and Human Services if you believe your privacy rights have been violated by SHS.

Privacy Officer 937-324-5511
Privacy Contact Person 937-324-5511
Security Officer 937-324-5511
1671 North Limestone Street
Springfield, Ohio 45503

For more information, contact any of the HIPAA representatives above.
ALL COMPLAINTS MUST BE SUBMITTED IN WRITING.

HIPAA Privacy Practices of SHS

Revised March 2022



Springfield Heart Surgeons, LLC
Understanding Your Health Information

Tel: 937-324-5511

To view entire notice go to

www.springfieldheartsurgeons.com

HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

Springfield Heart Surgeons LLC (SHS) uses and discloses personal health information for a variety of reasons. The agency has a limited right to use and disclose your information for purposes of treatment, payment and health care operations. For uses beyond that, SHS must have your written authorization unless the law permits or requires us to make the use or disclosure without your authorization. Authorizations can be revoked at any time to stop future uses or disclosures except those we have already undertaken in reliance upon your authorization.

If SHS discloses your health information to an outside entity in order for that entity to perform a function on our behalf, we must have in place an agreement from the outside entity which extends the same degree of privacy protection to your information that we must apply to your health information.

However, the law provides that SHS is permitted to make some uses or disclosures without your consent or authorization. The following describes and offers examples of our office's potential uses or disclosures of your health information.

TREATMENT - SHS may use health information about you to provide, coordinate or manage the healthcare you receive from SHS and other providers. SHS may consult with other health care providers concerning you and, as part of the consultation share your health information with them.

PAYMENT - SHS may use and disclose health information about you so we can be paid for the services we provide to you. This can include billing a third party payer, such as your insurance company.

HEALTH CARE OPERATIONS—SHS may use and disclose health information about you for SHS operations. These are necessary for us to operate SHS and to maintain quality for our patients. SHS may also use information for accreditation or licensing activities, or for our quality assurance or compliance programs.

NOTIFICATION - SHS may use or disclose health information about you to contact you to remind you of an appointment for treatment or services.

USES AND DISCLOSURES OF HEALTH INFORMATION NOT REQUIRING CONSENT OR AUTHORIZATION

The law provides that SHS may use or disclose your health information without consent or authorization in the following circumstances:

When required by law

For public health activities

About suspected abuse, neglect or domestic violence

For health oversight activities

For judicial and administrative proceedings

Relating to a death

For organ, eye or tissue donation

For research purposes

To avert a serious threat to health or safety

For specialized government functions

For Worker's Compensation