

Notice of Patient Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED OR DISCLOSED AND HOW YOU CAN OBTAIN ACCESS TO INFORMATION. PLEASE REVIEW IT CAREFULLY.

LEGAL DUTY

Rehability is required by law to protect the privacy of your personal health information, provide this notice about our information practices, and follow the information practices that are described herein.

USES AND DISCLOSURES OF HEALTH INFORMATION

Rehability uses your personal health information primarily for treatment, obtaining payment for treatment, conducting internal administrative activities, communicating with your other medical providers, and evaluating the quality of care that we provide. For example, Rehability may use your personal health information to contact you for appointment reminders, information about treatment alternatives, or other health related benefits that could be of interest to you.

Rehability may also use or disclose your personal health information without prior authorization for public health purposes, for auditing purposes, and for emergencies. We may provide de-identified information for research studies. We may also provide information when required by law.

In any other situation, Rehability's policy is to obtain your written authorization before disclosing your personal health information. If you provide us with a written authorization to release your information for any reason, you may later revoke that authorization to stop future disclosures.

Rehability may change its policy at any time. When changes are made, a new Notice of Information Practices will be posted in a common area of our clinic. You may also request an updated copy of our Notice of Information Practices at any time.

PATIENT'S INDIVIDUAL RIGHTS

You have the right to review or obtain a copy of your personal health information at any time. You have the right to request that we correct any inaccurate or incomplete information in your records. You also have the right to request a list of instances where we have disclosed your personal health information for reasons other than treatment, payment or other related administrative purposes.

You may also request in writing that we not use or disclose your personal health information for treatment, payment, any administrative purposes except when specifically authorized by you, when required by law, or in emergency circumstances. Rehability will consider all such requests on a case-by-case basis, but the Company is not legally required to accept them.

CONCERNS AND COMPLAINTS

If you have a complaint, are concerned that Rehability may have violated your privacy rights, disagree with any decisions we have made regarding access or disclosure of your personal health information, or you would like further information on Rehability's health information practices please contact our office at 403 W. Main St., Ste. B, Belgrade, MT 59714. You may also send a written complaint to the US Department of Health and Human Services.