



HIPAA NOTICE OF PRIVACY PRACTICES

Effective Date: 1 July 2014

THIS NOTICE DESCRIBES HOW PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

If you have any questions about this Notice, please contact Heather Goesch Nutrition via email at heathergnutrition@gmail.com.

PLEDGE REGARDING PROTECTED HEALTH INFORMATION

Heather Goesch Nutrition understands that protected health information about you and your health is personal, and is committed to protecting this information about you. This Notice applies to all records of your care generated by Heather Goesch Nutrition.

LEGAL DUTIES

Law Requires Heather Goesch Nutrition to:

1. Ensure protected health information that identifies you is kept private;
2. Provide you with this Notice describing legal duties, privacy practices, and your rights regarding your protected health information;
3. Follow the terms of the Notice that is currently in effect.

Heather Goesch Nutrition has the Right to:

1. Change the terms of this Notice at any time, provided that the changes are permitted by law;
2. Make any new Notice provisions effective for all protected health information maintained, including information created or received prior to these changes.

Notice of Change to Privacy Practices:

1. Before making important changes in the privacy practices, Heather Goesch Nutrition will amend this Notice and make the revised version available upon request. The revised Notice will also be posted on the Web site (www.heathergnutrition.com).

USE AND DISCLOSURE OF YOUR PROTECTED HEALTH INFORMATION

The following section describes different ways that Heather Goesch Nutrition is permitted to use and disclose your protected health information without your written authorization.

For Treatment. Heather Goesch Nutrition may use protected health information about you to provide, coordinate or manage your medical treatment or services. Heather Goesch Nutrition may disclose your

protected health information to doctors, nurses, technicians, medical students, or other health care providers, including clergy, if applicable, who are involved in taking care of you.

For Payment of Services. Your protected health information may be used and disclosed so that the services you receive from Heather Goesch Nutrition may be billed to and payment may be collected from you.

For Health Care Operations. Your protected health information may be used and disclosed for health care operations of Heather Goesch Nutrition, such as assessing and improving quality of services, business planning, coordination of care, as well as receiving and maintaining all of the appropriate accreditation, certificates, licenses and credentials needed to serve you.

Additional Uses and Disclosures.

Subject to applicable state law, in some limited situations the law allows or requires Heather Goesch Nutrition to use or disclose your health information for purposes beyond treatment, payment, and operations. These potential disclosures are set forth below.

As Required By Law. Heather Goesch Nutrition will disclose protected health information about you when required to do so by federal, state or local law.

Judicial and Administrative Proceedings. If you are involved in a lawsuit or dispute, Heather Goesch Nutrition may disclose your information in response to a court or administrative order. Your protected health information may also be disclosed in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made, either by Heather Goesch Nutrition or the requesting party, to inform you of the request or to obtain an order protecting the information requested.

Law Enforcement. Heather Goesch Nutrition may release protected health information as required by law, or in response to an order or warrant of a court, a subpoena, or an administrative request. Protected health information may also be disclosed in response to a request related to identification or location of an individual, victims of crime, decedents or a crime on the premises.

Public Health Activities. As required by law, we may disclose your protected health information to public health or legal authorities charged with preventing or controlling disease, injury, disability, including child abuse or neglect. Your protected health information may be disclosed to persons subject to jurisdiction of the Food and Drug Administration for purposes of reporting adverse events associated with product defects or problems, to enable product recalls, repairs or replacements, to track products, or to conduct activities required by the Food and Drug Administration. When authorized by the law to do so, Heather Goesch Nutrition may notify a person who may have been exposed to a communicable disease or otherwise be at risk of contracting or spreading a disease or condition.

Worker's Compensation. We may disclose information as necessary to comply with laws relating to worker's compensation or other similar programs established by law.

Victims of Abuse, Neglect, or Domestic Violence. Heather Goesch Nutrition may disclose protected health information about you to appropriate authorities if there is reason to believe that you are a possible victim of abuse, neglect or domestic violence, or the possible victim of other crimes. Your protected

health information will only be shared if it is necessary to prevent a serious threat to your health or safety, or the health or safety of others.

Health Oversight Activities. Heather Goesch Nutrition may disclose protected health information to a health oversight agency for oversight activities authorized by law, including audits, investigations or proceedings, and inspections, as necessary for licensure and for the government to monitor the health care system, government programs, and compliance with civil rights laws.

Special Government Functions. If you are a member of the armed forces, Heather Goesch Nutrition may disclose or use health information for military personnel and veterans for national security and intelligence purposes, protective services for the President, medical suitability or determinations for the Department of State.

Research in Limited Circumstances: Heather Goesch Nutrition may disclose your protected health information to researchers when their research has been approved by an institutional review board or privacy board that has reviewed the research proposal and established protocols to ensure the privacy of your information.

Coroners, Medical Examiners, and Funeral Directors: Heather Goesch Nutrition may share the protected health information of a person who has died with a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. Protected health information may also be disclosed to funeral directors or an organ procurement organization consistent with applicable law to enable them to carry out their duties.

Correctional Institutions and other Law Enforcement Custodial Situations. If you are an inmate of a correctional institutions or under the custody of a law enforcement official, Heather Goesch Nutrition may release protected health information about you to the correctional institution or law enforcement official as necessary for your or another person's health and safety.

Uses and Disclosures You Can Object To.

Unless you object, or request that only a limited amount or type of information be shared, Heather Goesch Nutrition may use or disclose protected health information about you in the following circumstances:

Notification. Heather Goesch Nutrition may share with a family member, relative, your personal representative, or other person identified by you protected health information directly relevant to that person's involvement in your care or payment for your care. Information may also be shared to notify these individuals of your location, general condition, or death.

Disaster Relief: Heather Goesch Nutrition may disclose protected health information with a public or private agency (such as the American Red Cross) for disaster relief purposes. Even if you object, this information may still be shared if necessary for the emergency circumstances.

YOUR INDIVIDUAL RIGHTS

You Have a Right To:

1. **Inspect and copy** protected health information that may be used to make decisions about your care. Usually this includes medical and billing records.

To inspect and copy protected health information you must submit a request to heathergnutrition@gmail.com. If your request is for copies, be advised that Heather Goesch Nutrition will charge a fee for the costs of copying, mailing or other supplies associated with your request. Your request will be responded to no more than 30 days after receiving it.

Under limited circumstances, Heather Goesch Nutrition is not required to comply with your request. In these circumstances, you will receive a response in writing, stating why your request was denied and describe any rights you may have to request a review of our denial.

2. **Amend or supplement** any of your protected health information that you feel is incorrect or incomplete.

To request an amendment, you must submit a request to heathergnutrition@gmail.com, providing a reason that supports your request. Your request for an amendment or supplement will be acted upon no later than 60 days after receiving it.

Heather Goesch Nutrition may deny your request if it does not include a reason to support the request, and will provide a written denial to you. In addition, your request may be denied if you ask for an amendment to information that:

- a. Was not created by Heather Goesch Nutrition;
 - b. Is not part of the protected health information kept by Heather Goesch Nutrition;
 - c. Is not part of the information which you would be permitted to inspect and copy; or
 - d. Is believed to be accurate and complete.
3. **Request an Accounting of Disclosures** – a list of any disclosures Heather Goesch Nutrition made of your protected health information.

To request this list, you must submit a request to heathergnutrition@gmail.com. You may ask for disclosures made up to six years before your request. Be advised that the first list you request within a 12-month period will be free; you will be charged for costs related to providing any additional lists.

Heather Goesch Nutrition is required to provide a listing of all disclosures except the following:

- a. For your treatment;
 - b. For billing and collection of payment for services;
 - c. For health care operations made to or requested by you, or that you authorized;
 - d. Occurring as a byproduct of permitted use and disclosures;
 - e. For national security or intelligence purposes, or to correctional institutions or law enforcement regarding inmates.
4. **Right to request a restriction or limitation** on the protected health information used or disclosed about you for services, payment or health care operations or to persons involved in your care. Heather Goesch Nutrition is not required to agree to your request. If the request is granted,

Heather Goesch Nutrition will comply with your request unless the information is needed to provide you emergency treatment, the disclosure is to the Secretary of the Department of Health and Human Services, or the disclosure is for one of the purposes described in the “Additional Uses and Disclosures” section on pages 2-3.

To request restrictions, you must submit a request to *heathergnutrition@gmail.com*.

5. **Right to request confidential communication** about medical matters, i.e., conducted in a certain way or at a certain location. For example, you can ask to be contacted only at work or by mail.

To request confidential communications, you must submit a request to *heathergnutrition@gmail.com*. All reasonable requests will be accommodated.

6. **Receive a Paper Copy of This Notice** at any time by contacting Heather Goesch Nutrition.

QUESTIONS AND COMPLAINTS

If you have any questions about this Notice, or believe that we may have violated your privacy rights, you may file a complaint with Heather Goesch Nutrition, or file a written complaint to the United States Department of Health and Human Services. A complaint to the Secretary should be filed within 180 days of the occurrence or action that is the subject of the complaint.

If you file a complaint, we will not take any action against you or change our treatment of you in any way.

CLIENT WRITTEN ACKNOWLEDGEMENT CONFIRMING RECEIPT OF HIPAA NOTICE OF PRIVACY PRACTICES

I, _____, have received and reviewed the HIPAA Notice of Privacy Practices for Heather Goesch Nutrition.

Signature:

Date: