



Notice of Privacy Practices

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

At Symmetry Family Health we understand that medical information about you and your health is personal. We are committed to protecting medical information about you. We create a record of the care and services you receive directly from one of our physicians. We need this record to provide you with quality care and to comply with certain legal requirements. This Notice of Privacy Practices (“Notice”) applies to all the records of your care generated by Practice.

This Notice will tell you about the ways in which Symmetry Family Health may use and disclose your protected health information (“PHI”). This Notice also describes your rights and certain obligations Symmetry Family Health has regarding the use and disclosure of PHI.

REGULATORY REQUIREMENTS.

Symmetry Family Health is required by law to maintain the privacy of your PHI, to provide individuals with notice of Practice’s legal duties and privacy practices with respect to PHI, and to abide by the terms described in the Notice currently in effect.

RIGHTS.

You have the following rights regarding your PHI:

Restrictions.

You may request that Symmetry Family Health restrict the use and disclosure of your PHI. To request restrictions, you must make your request in writing to our Privacy Officer using the applicable Practice form. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the restrictions to apply, for example, disclosures to **your spouse**.

Alternative Communications.

You have the right to request that communications of PHI to you from Symmetry Family Health be made by particular means or at particular locations. For instance, you might request that communications be made at your work address, instead of your home address. Your requests must be made in writing using Symmetry Family Health form and sent to the Privacy Officer. Symmetry Family Health will accommodate your reasonable **requests**.

Inspect and Copy.

Generally, you have the right to inspect and copy your PHI that Practice maintains, provided you make your request in writing to Practice’s Privacy Officer. If you request copies of your PHI, we may impose a reasonable fee to cover copying and postage. If we deny access to your PHI, we will explain the basis for denial and your opportunity to have your request and the denial reviewed by a licensed health care professional (who was not involved in the initial denial decision) designated as a reviewing official. If Symmetry Family Health does not maintain the PHI you request and if we know where that PHI is located, we will tell you how to redirect your request.

Amendment.

If you believe that your PHI maintained by Symmetry Family Health is incorrect or incomplete, you may ask us to correct your PHI. Your request must be made in writing, and it must explain why you are requesting an amendment to your PHI. We can deny your request if your request relates to PHI: (i) not created by Symmetry Family Health; (ii) not part of the records Symmetry Family Health maintains; (iii) not subject to being inspected by you; or (iv) that is accurate and complete. If your request is denied, we will provide you a written denial that explains the reason for the denial and your rights to: (i) file a statement disagreeing with the denial; (ii) if you do not file a statement of disagreement, submit a request that any future disclosures of the relevant PHI be made with a copy of your request and Symmetry Family Health denial attached; and (iii) complain about the denial.