

Healthy by Nature Family Wellness Clinic, LLC

Receipt of Notice of Privacy Practices for Protected Health Information
Effective April 1, 2016

This form is to notify you of how your medical information may be used and disclosed by Healthy by Nature Family Wellness Clinic, LLC and how you can get access to your own health information.

Healthy by Nature family Wellness Clinic, LLC and any employee is held by law [45 CFR 164.520] to keep your health information private and confidential.

How Your Health Information Is Used:

1. The health care provider uses the information you provide to formulate an individualized plan of care for you.
2. Healthy by Nature Family Wellness Clinic, LLC does not file claims to insurance, so your protected health information is not disclosed to your health care insurance provider. If you would like to submit claims on your own behalf to your insurance provider (with the exception of Medicare), you will be provided with Evaluation & Management codes and ICD-10 Diagnosis codes needed for claims excluding Medicare.
3. Your information may potentially be used for case study presentations. There will be no identifying information used such as names or initials. Age and gender will be used and patients will be referred to as "Patient #1", "Patient #2", etc. Please check the box at the end of this form if you prefer to not have your information used in potential case study presentations.
4. Some laboratories used for diagnostic testing at Healthy by Nature Family Wellness Clinic, LLC require information such as insurance information and diagnosis codes to process testing.
5. Your information may need to be sent to other business associates for continuation of care such as: diagnostic testing done at another facility, referral to specialty care, referral to emergency care, referral for therapies not provided at Healthy by Nature Family Wellness Clinic LLC.

Accessing Your Own Medical Information:

1. Patients are entitled to their own medical information. Your medical record is the physical property of Healthy by Nature Family Wellness Clinic, LLC, however, copies of your medical record will be made available to you upon request and completion of the Release of Information form.
2. You have the right to inspect and copy your medical information.
3. You may request for Healthy by Nature Family Wellness Clinic, LLC to amend your medical record if you feel there has been an error. The requested amendment may be denied. If it is denied, you will be notified of the reason for denial.

A copy of this form will be given to you at your request.

More information about the Health Information Privacy & Portability Act and how to file a complaint can be found at: <http://www.hhs.gov/ocr/privacy/index.html>

_____ Please do not use my health information in case study presentations.

Signature _____ Date _____