

***Women's Health Innovations of Arizona***  
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## **HIPAA NOTICE OF PRIVACY PRACTICES**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.**

**PLEASE REVIEW IT CAREFULLY!**

*Women's Health Innovations of Arizona* has been, and will always be, totally committed to maintaining client confidentiality. We will only release healthcare information about you in accordance with federal and state laws and ethics of the counseling profession.

This notice describes our policies related to the use and disclosure of your healthcare information.

### **Uses And Disclosures Of Your Health Information For The Purposes Of Providing Services**

Providing treatment services, collecting payment, and conducting healthcare operations are necessary activities for quality care. State and federal laws allow us to use and disclose your health information for these purposes.

**Treatment:** We may need to use or disclose health information about you to provide, manage, or coordinate your care or related services, which could include consultants and potential referral sources.

**Payment:** Information needed to verify insurance coverage and/or benefits with your insurance carrier, to process your claims as well as information needed for billing and collection purposes. We may bill the person in your family who pays for your insurance.

**Healthcare Operations:** We may need to use information about you to review our treatment procedures and business activity. Information may be used for certification, compliance, and licensing activities.

### **Uses Or Disclosures Of Your Information Which Do NOT Require Your Consent**

There are some instances where we may be required to use and disclose information without your consent. Some of these are, but are not limited to: information you and/or your child or children report about physical or sexual abuse of a minor or elderly person. Then, by Arizona State Law, we are obligated to report this to Child Protective Services or Adult Protective Services; information that informs us that you are in danger of harming yourself or others; information to remind you of, or to reschedule, appointments or treatment alternatives; information shared with law enforcement if a crime is committed on our premises or against our staff; or as required by law such as a subpoena or court order.