



## HIPAA Privacy Policy

### Notice of privacy practices for protected health information

This notice describes how your medical information may be used, disclosed and how you may access this information.

It is the policy of Amirikia Eye Center, M.D.P.C. or Amirikia Eye Center to disclose your protected health information (Medical Record) that includes pertinent procedures and diagnosis to the following;

- \* Your health insurance plan for payment of claims for services rendered.
- \* To your primary care physician or referring physician for treatment
- \* In case of emergency for treatment purposes
- \* As Required by law, for example, a subpoena requesting your medical record
- \* For teaching and case studies after it has been de-identified, in other word, not personally identifiable by your name, social security number, or date of birth.

It is the practice of Amirikia Eye Center to make reminder calls to patients that give the date and or reason for your up-coming appointment, this along with any outstanding balance information may be left on your voicemail or answering machine.

You may be contacted by phone, letter or email with test results or follow-up treatment options. We make every effort to protect your privacy. If you do not wish to be contacted in this manner, please indicate this to our staff.

Amirikia Eye Center will not use or disclose your Protected Health Information or Medical Record in anyway other than those listed in this notice without your signed authorization. This authorization may be revoked by written notification, except to the extent that Amirikia Eye Center has acted in reliance thereon. In addition, you have the following rights:

- \*The right to request restrictions certain uses and disclosure
- \*The right to receive confidential communications
- \*The right to inspect and copy your Protected Health Information (Medical Record)
- \*The right to amend your Protected Health Information
- \*The right to an accounting disclosure of your Protected Health Information
- \*The right to request a paper copy of any electronic notice

Amirikia Eye Center is required by law to maintain the privacy of your Medical Record and to abide by this notice. We reserve the right to change this notice of our Privacy Practices and will issue a revised notice if it changes

