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**Notice of Privacy Practices**

**Our practice is dedicated to maintaining the privacy of your health information. We are required by law to maintain the confidentiality of your health information.**

**With my consent, San Tan Foot and Ankle, PLC may use and disclose protected health information about me and/or dependent to carry out treatment, payment, and healthcare operations.**

**Treatment:**

Your health information may be used by staff members or disclosed to other healthcare professionals for the purpose of evaluating your health, diagnosing medical condition and providing treatment.

**Payment:**

Your health information may be used to seek payment from your health plan, other sources of coverage such as automobile insurer, or credit card companies that you may use to pay for services.

**Healthcare Operations:**

Your health information may be used as necessary to support the day to day activities and management of San Tan Foot and Ankle, PLC. For example, we may use a sign in sheet, call you by name in the waiting room, or contact you by phone or mail to remind you of your appointment.

**Use and disclosure of your health information in certain special circumstances**

The following circumstances may require us by law to use or disclose your health information:

1. Public authorities and health oversight agencies that are authorized by law to collect information.

2. Lawsuits and similar proceedings in response to a court or administrative order.

3. When necessary to reduce or prevent a serious threat to your health and safety and only to a person or organization able to help prevent the threat.

4. Federal officials for intelligence and national security activities authorized by law.

5. Workers’ compensation

**Your Rights Regarding Your Health Information**

The right to receive confidential communications. You can request that our practice communicate with you in a particular manner, such as home rather than work.

You have the right to inspect and obtain a copy of the health information that may be used to make decisions about you, including patient medical records and billing records.

The right to request restrictions on the use and disclosure of your protected health information. This means that you may ask us, in writing, not to use or disclose any part of your protected health information for the purpose of treatment, payment or other healthcare operations. Additionally, you may request that any or part of your health information not be disclosed to family members who may be involved in your care.

You may request an amendment to your health information if it is your belief that it is not accurate or incomplete. This request must be made in writing and include a reason that supports your request. The provider may or may not agree to your request for an amendment and will be placed into the health record.

The right to designate a personal representative to consent to or authorize the use of disclosure of protected health information.

Right to file a complaint. If you believe your privacy rights have been violated, you may file a complaint with our practice. All complaints must be submitted in writing to:

San Tan Foot and Ankle PLC

3200 S Alma School Rd #203

Chandler, AZ 85248

Our practice will obtain your written authorization for uses and disclosures that are not identified by this notice or permitted by applicable law.

You are entitled to receive a copy of this Notice of Privacy Practices. Please contact our office directly at

480-917-2300 if you require any further information regarding this notice.

Notice effective on or after July2012

Last revision April 2016