



Notice of Privacy Practices

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

1. *Optometric EyeCare Center* is permitted to make uses and disclosures of protected health information for treatment, payment and health care operations, as described in the following examples:
 - a. For treatment – *[Referral to another eye care specialist]*.
 - b. For payment – *[Submission of claim to third party payer]*.
 - c. For health care operations –
2. *Optometric EyeCare Center* is permitted or required, under specific circumstances, to use or disclose protected health information without the individual's written authorization.
3. Other uses and disclosures will be made only with the Individual's written authorization, and the individual may revoke such authorization.
4. *Optometric EyeCare Center* intends to engage in (n)one or more of the following activities:
 - a. *Optometric EyeCare Center* may contact the individual to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to the individual or patient.
 - b. *Optometric EyeCare Center* may contact the individual/Patient to raise funds for *Optometric EyeCare Center*; or
 - c. A group health plan, or a health insurance issuer or HMO with respect to a group health plan, may disclose protected health information to the sponsor of the plan.
5. The Individual has the following rights regarding protected health information:
 - a. The right to request restrictions on certain uses and disclosures of protected health information. *Optometric EyeCare Center* is not required to agree to a requested restriction, however.
 - b. The right to receive confidential communications of protected health information, as applicable.

- c. The right to inspect and copy protected health information, as provided in the Privacy Regulation.
 - d. The right to amend protected health information, as provided in the Privacy Regulation.
 - e. The right to receive an accounting of disclosures of protected health information.
 - f. The right to obtain a paper copy of the Notice from the covered entity upon request. This right extends to an individual who has agreed to receive the Notice electronically.
6. *Optometric EyeCare Center* is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and Privacy practices with respect to protected health information.
 7. *Optometric EyeCare Center* is required to abide by the terms of the Notice currently in effect.
 8. *Optometric EyeCare Center* reserves the right to change the terms of this Notice. The new Notice provisions will be effective for all protected health information that it maintains.
 9. *Optometric EyeCare Center* will provide individuals or patients with a revised Notice by posting on the company web site (eyecarecenter.net).
 10. Individuals may complain to *Optometric EyeCare Center* and to the Secretary of the Department of Health and Human Services, without fear of retaliation by the organization, if they believe their privacy rights have been violated. A brief description of how the individual may file a complaint follows: (*Submission in writing to Optometric EyeCare Center, Compliance Officer*).
 11. *Optometric EyeCare's* contact person for matters relating to complaints is:
 - a. *H. Russell Tolar*
 - b. 1-252-451-5253.
 - c. 2325 Sunset Ave, Rocky Mount, NC 27514
 12. This Notice is first in effect on *[April 1, 2003 – The effective date must not be earlier than the date on which the Notice is printed or otherwise published]*.

NOTICE OF PRIVACY PRACTICES ACKNOWLEDGEMENT

I hereby acknowledge that I have received a copy of EyeCare Center's Notice of Privacy Practices

Individual's Name (Please Print)

Individual's Signature

Date