# Kat Motlagh's Health Clinics Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to the information, please review it carefully.

Kat Motlagh's Health Clinics (KMHC) uses health information about you for treatment, to obtain payment for treatment. For administrative purposes, and to evaluate the quality if care that you receive. Your health information is contained in a medical record that is the physical property of Kat Motlagh's Health Clinics.

### How KMHC may use or disclose your health information

<u>For Treatment</u>: KHMC may use your health information to provide you with medical treatment or services. For example, information obtained by a health care provider, such as a physician, nurse, or other person providing health services to you, will record information in your record that is related to your treatment. This information is necessary for health care providers to determine what treatment you should receive. Health care providers will also record actions taken by them in the course of your treatment and note how you respond to the actions.

<u>For Payment</u>: KMHC may use and disclose your health information to others for purposes of receiving payment for treatment and services that you receive. For example, a bill may be sent to you or a third-party payer, such as an insurance company or health plan. The information on the bill may contain information that identifies you, your diagnoses, and treatment or supplies used in the course of treatment.

<u>For Health Care Operations</u>: KHMC may use and disclose health information about you for operational purposes. For example, your health information may be disclosed to members of the medical staff, risk or quality management personal, and others to:

- Evaluate the performance of our staff
- Assess the quality of care and outcomes in your case and similar cases
- Learn how to improve our facilities and services
- Determine how to continually improve the quality and effectiveness of the health care we provide.

**Appointments**: KHMC may use your information to provide appointment reminders or information about treatment alternatives or other health-related and services that may be of interest to you.

**Required by Law:** KMHC may use and disclose information about you as required by law. For example, KMHC may disclose information for the following purposes:

- For judicial and administrative proceedings pursuant to legal authority.
- To report information related to victims of abuse, neglect, or domestic violence or domestic battery.
- And to assist law enforcement officials in their law enforcement duties.

<u>Public Health</u>: Your health information may be used to disclose for public helath activities such as assisting public authorities to prevent or control disease, injury, or disability, or other health oversight activities.

<u>Decedents</u>: Health information may be disclosed to funeral directors or coroners to enable them to carry out their lawful duties.

<u>Organ / Tissue Donation</u>: Your health information may be used or disclosed for cadaveric organ, eye, or tissue donation purposes.

**Research**: KMHC may use your health information for research purposes when an institutional review board privacy board that has reviewed the research proposal and established protocols to ensure the privacy of your health information has approved the research.

**Health and Safety**: Your health information may be disclosed to avert treat a series treat or safety of you or any other person pursuant to applicable.

<u>Government Functions</u>: Specialized government functions such as protection of public officials or reporting to various branches of the armed services that may require use or disclosure of your health information.

<u>Workers Compensations</u>: Your health information may be used or disclosed in order to comply with laws and regulations related to workers compensation.

## **Your Health Information Rights**

You have a right to:

- Request a restriction on certain uses and disclosures of your information as provided by 45 C.F.R. 164.522; however, KMHC is not required to agree to a requested restriction.
- Obtain a paper copy of the notice of information practices upon request
- Inspect and obtain a copy of your health record as provided for in 45 C.F.R. 164.524
- Amend your health record as provided for in 45 C.F.R. 164.526
- Request in written that communications of your health information by alternative means or at alternative locations
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken
- Receive an accounting of disclosures made of your health information as provided by 45 C.F. R.

#### **Complaints**

You may complain to KMHC and to the US Department of Health Services if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

#### **Obligations of KMHC**

KMHC is required to:

- Maintain the privacy of protected health information
- Provide you with this notice of its legal duties and privacy practices with respect to your health information.

- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction on how your information is used or disclosed.
- Accommodate reasonable requests you may make to communicate health information by alternative means or at alternative locations
- Obtain your written authorization to use or disclose your health information for reasons other than those above and permitted under law

KMHC reserves the right to change its information practices and to make new provisions effective for all protected health information it maintains. Revised notices will be made available to you at your next appointment after the change.

## **Contact Information:**

If you have any questions or complaints, please contact: Kat Motlagh's Health Clinics 16250 Ventura Blvd Suite 225 Encino, CA 91436 Office # (818) 382-6400 Fax # (818 528-3271