Notice of Privacy Practices

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

Understanding Your Private Health Information (PHI)

Each time you visit the UNT Speech and Hearing Center, a record of your visit is made. This record often contains documentation of treatment you received and recommendations for future treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment
- Means of communication among the other health professionals who contribute to your care
- Legal document describing the care you received
- Means by which you or a third-party payer can verify that services billed were provided

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and our responsibilities to help you.

- You may ask to see or receive an electronic or paper copy of or medical record and other health information we have about you. A request must be issued in writing to the Center. The Center must respond within 15 days or request a 30-day extension with cause for extension stated. The Center may charge a reasonable cost-based fee.
- You may choose someone to act for you (e.g. medical power of attorney or legal guardian). That person can exercise your rights and make choices about your health information.
- You may request to change or amend your PHI if you feel it is incomplete or inaccurate. Requests must be made in writing. The Center may deny your request, but will provide you with a reason as to why.
- You may inform us to contact you in a specific way (phone, mobile, e-mail, etc.) or to send mail to a different address than that listed in your record.
- You may ask us to limit what we use or share about you as it relates to treatment, payment, or our operations. We are not required to agree to your request, and we may decline if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will agree unless a law requires us to share that information.
- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations (TPO), and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another within 12 months.
- You may ask for a copy of this Notice at any time.

Your Choices about your PHI

For certain health information, you can tell us your choices about what we share. You have both the right and choice to tell us to share information with your family, close friends, or others involved in your care or share information in a disaster relief situation.
If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

We may never share your PHI unless you give us written permission for marketing or the sale of your information.

**How we can Use and Disclose your PHI**

Your PHI can be used without your written consent by the UNT Speech and Hearing Center for treatment, to bill for our services, or to run our clinic (TPO).

**Treatment** – Your PHI may be shared with other Health Care professionals in order to provide you the best care. These Health Care professionals may be other clinicians within the UNT Speech and Hearing Center or other providers outside of the Center who are involved in your treatment, such as your referring provider.

**Bill for Services** – Your PHI may be shared with billing personnel in order to assure that you are properly charged for services provided. PHI may also be shared with your medical insurance plan administrators to assure payment of a claim.

**Run our Clinic** – Your PHI may be shared with UNT Speech and Hearing Center personnel to operate our day-to-day clinic, improve your care and services, and contact you when necessary.

We are allowed or required to share your information in other ways without your consent, usually to contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. These ways include:

- Sharing information to help with public health and safety issues
- To perform health research
- To comply with state or federal law, including the Department of Health and Human Services for internal audit purposes
- For workers’ compensation claims, law enforcement purposes and with health oversight agencies as authorized by law
- Other government requests, such as military or national security
- Responding to lawsuits and legal action (court or administrative order or subpoena)

We may not disclose substance abuse treatment records, mental health records and HIV/AIDS records, except as permitted by law.

**Release of Protected Health Information (PHI)**

Except for the reasons stated above, a signed authorization is required to release your information and will specify to whom your information will be released and for what purpose. You may revoke an authorization by submitting a written request to the center; however, such a revocation is only valid from the date of the written request and does not include releases prior to that date.
Our Responsibilities to You

- The Speech and Hearing Center is required by law to maintain the privacy and security of your PHI.
- We will inform you promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you give us written permission.
- Provide you with this notice of our legal duties and privacy practices regarding your health information.

Changes to this Notice

The Center may make changes to the privacy practices. The updated Privacy Notice will be posted in our office, on our web site, and is available to you upon request.

Reporting a Complaint or Problem

You have the right to report a complaint if you believe your privacy rights have been violated. The complaint should be submitted in writing and should specify how the privacy policies were violated. The complaint must be filed within 180 days of the act or omission. The complainant will not be subject to any retaliation for filing a complaint.

To file a complaint regarding Protected Health Information, you may contact Heath and Human Services (https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf), or you may contact the respective Contact Person for speech or audiology complaints:

Andrea Seibold, Au.D., FAAA  Theresa Kouri, Ph.D., CCC-SLP
Clinical Director of Audiology  Clinical Director of Speech-Language Pathology

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The UNT Speech and Hearing Center provides services to clients in a non-discriminatory manner without regard to race, color, religion, sex, national or ethnic origin, disability, age, sexual orientation, genetic information, citizenship, or status as a covered veteran.