

**PROVIDER NOTICE
OF PRIVACY PRACTICES**

Uses and disclosure of health information

We use health information about you for treatment, to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care that you receive. Continuity of care is part of treatment and your records may be shared with other providers to whom you are referred. Information may be shared by paper mail, electronic mail, fax or other methods.

We may use or disclose identifiable health information about you without your authorization for several reasons. Subject to certain requirements, we may give out health information without authorization for public health purposes, for auditing purposes, for research studies, and for emergencies. We provide information when otherwise required by law enforcement in specific circumstances. In any other situation, we will ask for your written authorization to disclose information. You can later revoke that authorization to stop at any future uses and disclosures.

We may change our policies at any time. Before we make a significant change in our policies, we will change our notice and post the new notice in the waiting area. You can also request a copy of our notice at any time. For more information about our privacy practices, contact the person listed below.

Individual Rights

In most cases, you have the right to look at or get a copy of health information about you that we use to make decisions about you. You also have the right to receive a list of instances where we have disclosed health information about you for reasons other than treatment, payment or related administrative purposes and other than when you explicitly authorized it. If you believe that information in your records is incorrect or if important information is missing, you have the right to request that we correct the existing information in or add missing information.

Complaints

If you are concerned we have violated your privacy rights, or you disagree with a decision we made about access to your records, you may contact the person below. You also may send a written notice of complaint to the U.S. Department of Health and Human Services. The person listed below can provide you with the appropriate address upon request.

Our Legal Duty

We are required by law to protect the privacy of your information, provide this notice about our information practices, follow the information that are described in this note, and obtain your acknowledgment of receipt of this notice.

If you have any questions or complaints, please contact:

Office Manager: LaNita Vance

Address: 1001 N. Meridian ID 83642

Phone: (208) 258-7558

Signature of Responsible Party

Date