

Notice of Privacy Practices

Your Information. Your Rights. Our Responsibilities.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

Please review it carefully.

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

responsibilities to help you.			
Get an electronic or paper copy of your medical record	 You can ask to see or get an electronic or paper of your medical record and other health information we have about you. Ask about how to do this. We will provide a copy or a summary of your health information, usually within 15 days of your request. We may charge a fee for third party requests. 		
Ask us to correct your medical record	 You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we will tell you why in writing within 60 days. 		
Request confidential communications	 You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests. 		
Ask us to limit what we use or share	 You can ask us not to use or share certain health information for treatment, payment or our operations. We are not required to agree to your request, and we may say "no" 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. 		
Get a list of those with whom we've shared information	 You can ask for a list (accounting) of the times we've shared your health information with for six years prior to the date you ask, who we shared it with and why. 		
Get a copy of this privacy notice	 You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly. 		
Choose someone to act for you	 If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take 		

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 2.
- You can file a complaint with the U.S. Department of Health and Human Services
 Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W.,
 Washington, D.C. 20201 Calling 1-877-696-6775 or visiting www.hhs.gov/ocr/privacy/
 hipaa/complaints/
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share your information with your family, close friends, or others involved in your care.
- Share information in a disaster relief situation
- Include your information in a hospital directory

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.

In these cases we never share your information unless you give us written permission:

Marketing purposes.

any action.

Sale of your information.

Other Uses and Disclosures

How do we typically use or share your health information? We typically use or share your health information in the following ways.

Treat you	 We can use your health information and share it with other professionals who are treating you. 	Example: A doctor treating you for an injury asks another doctor about your overall health condition.
Run our Organization	 We can use and share your health information to run our practice, improve your care, and contact you when necessary. 	Example: We use health information about you to manage your treatment and services.
Bill for your services	 We can use and share your health information bill and get payment from Heath plans and other entities. 	Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information? We are allowed or required to share your information in other ways- usually in ways that 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. For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

Help with public health and safety	We can share health information about you for certain situations such as:
issues	 Preventing disease.
	 Helping with product recalls.
	 Reporting adverse reactions to medications.
	 Reporting suspected abuse, neglect, or domestic violence.
	 Preventing or reducing a serious threat to anyone's health or safety.
Do research	 We can use or share your information for health research.
Comply with the law	 We will share information about you if state of federal law requires it, including with the Department of Health and Human Services if it wants to see that we are complying with federal privacy law.
Response to organ and tissue donation requests	 We can share health information about you with organ procurement organizations.
Work with a medical examiner or funeral director	 We can share health information with a coroner, medical examiner or funeral director when an individual dies.
Address workers' compensation, law	We can use or share health information about you:
enforcement, and other government requests	• For worker's compensation claims.
	 For law enforcement purposes or with a law enforcement official.
	 With health oversight agencies for activities authorized by law.

For special government functions such as military, national security, and

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know 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 tell use we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

presidential protective services.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp/html.

Changes to the Terms of This Notice

We can change the terms of this notice, and the changes will apply to all the information we have about you, the new notice will be available upon request, in our office, and on our web site.

This Notice of Privacy Practices applies to the following organizations:

Alamo Heights Complete Care
CEC Alamo Heights ER Physicians
Complete Emergency Care City Base
CEC City Base ER Physicians
Complete Emergency Care I
CEC San Antonio ER Physicians
Complete Emergency Care La Vernia
CEC La Vernia ER Physicians
Westlake Complete Care
CEC Westlake ER Physicians
Complete Emergency Care Southlake
CEC Southlake ER Physicians

Complete Emergency Care Tyler
CEC Tyler ER Physicians
ERCA Camp Bowie
Camp Bowie ER Physicians
22250 Bulverde CEC Fossil Creek
Fossil Creek ER Physicians
TLC Corpus Emergency Care
CEC Corpus ER Physicians
CEC Lakeway Urgent Care Physicians
Lakeway Complete Care

CEC Lakeway ER Physicians

Complete Emergency Care Colorado Springs
Colorado Complete Urgent Care Physicians
CEC Colorado ER Physicians
Complete Emergency Care De Zavala
CEC De Zavala ER Physicians
2013 Broadway Emergency Care
2013 Pearl ER Physicians
Complete Care Nacogdoches Road
15140 Narsan ER Physicians
Star ER
7007 Indiana ER Physicians

For questions please contact our Privacy Officer:

Julie Radley 2360 Dean Way Southlake, TX 76092 817-421-0034