



Byrd Eye Clinic
3677 Fort Street
Lincoln Park, MI, 48146
313.383.1300

PRIVACY NOTICE POLICY

Effective April 14, 2003 Updated October 24, 2011

This notice describes how medical information about you may be used and disclosed and how you can obtain access to this information. Please review it carefully.

USE AND DISCLOSURES OF HEALTH INFORMATION

With your consent, we may use health information about you for treatment (such as sending your medical record information to a specialist as part of a referral), to obtain payment for treatment (such as sending billing information to a health insurance plan), for administrative purposes, and to evaluate the quality of care you receive (such as comparing patient data to improve treatment methods). If you are involved in a lawsuit or a dispute, we may use your medical information to defend the office or to respond to a court order. We may use or disclose identifiable health information about you without your authorization for several other reasons. Subject to certain requirements, we may give out health information without your authorization for public health purposes, abuse or neglect reporting, health planning, auditing purposes, research studies, funeral arrangements and organ donation, worker's compensation purposes and emergencies. We provide information when otherwise required by law, such as for law enforcement in specific circumstances. We may also contact you about appointment reminders or treatment alternatives. In any other situation, we will ask for your written authorization before using or disclosing any identifiable health information about you. If you choose to sign an authorization to disclose information, you can later revoke that authorization to stop any further uses and disclosures. We may change our policies at any time. Before we make a significant change in our policies, we will post the new notice in the waiting area, in each examination room and on our website. You can also request a copy of our notice at any time.

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. If you request copies, we reserve the right to charge you a modest fee for each page. 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. If you believe that information in your record is incorrect or if important information is missing, you have the right to request an amendment for as long as the information is kept by this office. To request an amendment, your request must be made in writing and submitted to the office secretary and/or Thomas J. Byrd, M.D. In addition, you must provide a reason that supports your request. This right does not permit you to alter or change the original record created by your healthcare provider or his/her staff. We may deny request to amend or correct your records.

You have the right to request that your health information be communicated to you in a confidential manner such as sending mail to an address other than your home. If this notice was sent to you electronically, you may obtain a paper copy of the notice. You may request in writing that we don't use or disclose your information for treatment, payment or administrative purposes to family, friends or other persons involved in your care except when specifically authorized by you, when required by law, or in emergency circumstances. We will consider your request but are not legally required to accept it.

COMPLAINTS

If you are concerned that we have violated your privacy rights, or you disagree with a decision we made about your access to your records, you may contact the person listed below. You may also send a written complaint to the US Department of Health and Human Services. The person listed below can provide you with the appropriate address upon request. Under no circumstances will you be retaliated against for filing a complaint.

OUR LEGAL DUTY

We are required by law to protect the privacy of your information, provide this notice about our information practices and follow these practices described in this notice. If you have any questions or complaints, please contact:

Therese Schafer, Office Secretary, and/or Thomas J. Byrd, M.D
Byrd Eye Clinic
3677 Fort Street, Lincoln Park, MI 48146
313.383.1300
Email: info@byrdeyeclinic.com