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Ophthalmology**

**H I P A A  
Notice of Privacy Policies**

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.

**Introduction**

We understand the importance of privacy and are committed to maintaining the confidentiality of your medical information. We make a record of the medical care we provide and may use these records to provide or enable other health care providers to provide quality medical care, to obtain payment for services provided to you as allowed by your health plan, and to enable us to meet our professional and legal obligations to operate this medical practice properly. We are required by law to maintain the privacy of your protected health information. This notice describes how we may use and disclose your medical information. If you have any questions about this notice, please contact our privacy officer at (650) 992-9221.

**How This Practice May Use or Disclose Your Health Information**

- Basis for planning your care and treatment, means of communication among the many health professionals who contribute to your care.
- To obtain payment for the services we provide or enable other providers in the course of treatment to obtain payment.
- To mail Appointment reminders.
- For legal services and health plan audits.
- Notification and communication with family, or your personal representative or other individual responsible for your care and general condition.

**Your Health Information Rights**

Although your health record is the physical property of Susan M. Longar, MD, the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of information practices upon request.
- Inspect and copy your health record.
- Amend your health record.
- Obtain an accounting of disclosures of your health information.
- Request a restriction on certain uses and disclosures of your information.
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

## **Our Responsibilities**

We are required to:

- Maintain the privacy of your health information.
- Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- Abide by the terms of this notice.
- Notify you if we are unable to agree to a requested restriction.

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should we change this information, you will be notified at your next visit.

We will not use or disclose your health information without your authorization, except as described in this notice. We will also discontinue to use or disclose your health information after we receive a written authorization from you.

## **Examples of Who We May Disclose Information for Treatment, Payment and Health Operations**

- *Business associates:* Includes radiology department, laboratory, third party billing and computer tech.
- *Communication with family:* Close relative, personal friend, caretaker.
- *Funeral directors:* We may disclose information to be consistent with the law.
- *Organ procurement organization:* Consistent by law, we need to disclose health information organ procurement organization, banking for purpose of tissue donation and transplant.
- *Marketing:* May be used to send appointment reminders.
- *Fund Raising:* We may contact you to be a part of fund-raising.
- *Food and Drug Administration:* We may disclose information to the FDA to enable product recalls, repairs, or replacement.
- *Workers compensation:* We may disclose information to comply with the laws relating to workers compensation.
- *Public health:* We may disclose health information to public health charged with preventing disease, injury, or disability.
- *Law enforcement:* We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

If you believe your privacy rights have been violated, you can file a complaint to the practice's Privacy Officer or write to: U.S. Department of Health and Human Services, 200 Independence Avenue, Room 509F, HHH Building, Washington, DC 20201