

NOTICE OF PRIVACY PRACTICES

Healthy Horizons Pediatrics – 419 E. Lincoln Rd. Kokomo IN 46902; Phone: (765) 864-2400;
Fax: (765) 864-2401

Healthy Horizons Pediatrics - 3741 Rome Dr. Ste. B. Lafayette, IN 47905. Phone: (765)607-6160;
Fax: (765)607-6161

www.healthyhorizonsped.com

Olatubosun Oguntoye MD.

Abimbola Odukoya MD.

YOUR INFORMATION, YOUR RIGHTS, OUR RESPONSIBILITIES

Our practice is committed to educating our patients about healthcare issues that affect them. As a result, we are providing you with general information about the Privacy Rule, a federal regulation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) along with a brief overview of our Notice of Privacy. Our practice is complying with HIPAA's regulations. The following categories describe the different ways in which we may use and disclose your Individually Identifiable Health Information (IIHI) or Protected Health Information (PHI).

OUR USES AND DISCLOSURES

- Treatment
- Appointment Reminders
- Payment Treatment Options
- Disclosure Required By Law
- Fundraising HealthCare Operations
- Health-Related Benefits and Services
- Release of Information to Family / Friends

OUR USES AND DISCLOSURES IN UNIQUE SITUATIONS

- Public Health Risks
- Health Oversight Activities
- Law Enforcement
- Research
- Military
- Lawsuits
- Deceased Patients
- National Security Inmates
- Serious Threats to Health and Safety
- Organ and Tissue Donation
- Workman's Compensation

OUR USES AND DISCLOSURES ONLY IF YOU PROVIDE AUTHORIZATION

- Marketing to Patients

YOU HAVE THE RIGHT TO

- Confidential Communications
- Electronic access to PHI Request Restrictions
- Restrict disclosures to health plans for treatment paid out of pocket in full
- Inspection and Copies of your PHI
- Request modifications to patient authorization and other requirements to facilitate research
- Request an Amendment of your medical record Accounting of Disclosures
- Request disclosure of patient immunization to schools
- Request a Paper Copy of This Notice
- Enable access to decedent information by family members or others
- File a Complaint
- Opt out of fundraising communications
- Provide an Authorization for Other Uses and Disclosures
- Breach notification of unsecured PHI and ePHI

ADDITIONAL INFORMATION

The Notice of Privacy Practices is available on www.healthyhorizonsped.com. You may also visit our office for a copy of the Notice. Our practice is compliant with the Americans with Disabilities Act of 1990 and will make this Notice available to patients with disabilities upon request in alternative formats. We can also be reached at any time by calling (765)607-6160

ACTIONS YOU MAY TAKE

If you have any questions regarding this notice or our health information privacy policies; or if you believe that we may have violated your privacy rights; or disagree with a decision that we made about access to your PHI; you may contact us at the following address or telephone number:

Abimbola Odukoya MD. Healthy Horizons Pediatrics

419 E. Lincoln Rd, Kokomo IN 46902. (765) 864-2400

This Notice of Privacy Practices is effective April 1, 2014

I have read the short notice provided by Healthy Horizons Pediatrics and have been informed of how to obtain more information regarding our Notice of Privacy.

SIGNATURE

PRINT NAME OF PATIENT

DATE