

## Lovers Lane Birth Center (LLBC) – Notice of Privacy Practices and Terms of Service

**This notice describes how your medical information may be used and how you can access to this information. The goal of our privacy policy (and federal regulations determining HIPAA Privacy Standards) is to insure that your health information is properly protected while allowing high quality health care to occur.**

When you have contact with a healthcare provider, a record of your visit is prepared. This record may contain demographics, presenting signs and symptoms, results of examinations and tests, and recommendations for care. Your medical record is the physical property of your healthcare provider, but you have rights regarding the use or disclosure of information in that record. Lovers Lane Birth Center has the right to use and disclose the information contained in your records for the following: **Plan of Care:** Protected Health Information (PHI) may be used by your midwife or other healthcare professional to evaluate the health of you and your baby, devise a plan of care and set appointments. For example, results of laboratory tests and prenatal records are available in your records to any health care professional who may assist in providing treatment or consultation regarding your care.

**Payment:** Your PHI may be used to obtain payment for services, confirm insurance coverage, billing or collection activities, and review.

**Health Care Operations:** Your PHI may be used to support financial reporting and activities, to evaluate and promote quality, for competency assurance or compliance activities.

**Law Enforcement:** Your PHI may be disclosed to law enforcement agencies to support government audits or inspections, facilitate police investigations or comply with government mandated reporting.

**Public Health Reporting:** Your PHI may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the state public health department.

**Information About Care:** Your PHI may be used to provide you with information regarding options in your care or additional information regarding your pregnancy, birth or postpartum care.

**Other Uses and Disclosures:** Any disclosure of your PHI not listed above requires your specific written authorization. If you change your mind after authorizing use or disclosure of your PHI, you may submit a written revocation of the authorization. Your decision to revoke authorization will not, however, affect or undo any use or disclosure of information that occurred before you revoke your authorization.

**Your Individual Rights:** You have rights under the HIPAA privacy standards. These include:

- the right to request restrictions on the use and disclosure of your PHI;
- the right to receive confidential communications concerned your care;
- the right to inspect and copy your PHI;
- the right to amend or submit corrections to your PHI;
- the right to receive an accounting of how and to whom your PHI has been disclosed; and
- the right to receive a printed copy of this notice.

**Release of Information:** LLBC will obtain my written authorization to release information about my treatment, except when LLBC is permitted or required by law to release information. For example, LLBC may release a copy of my patient record to insurance companies health care service plans, governmental agencies, or other entities which may be liable for all or any portion of LLBC charges.

**Teaching and Research:** I understand that apprentices or trainees may observe, examine, and participate at the request and under supervision of the primary midwife in my care as part of LLBC's educational activities. I understand my health information may be used and shared with researchers engaged in research of midwifery care, and my identification will be removed from any information provided. Use of date will be in accordance with law.

**Use and Disclosure of PHI:** Federal privacy law (HIPAA) requires LLBC to provide the following information to individuals who supply information about themselves: As a patient of LLBC, you will be asked for information about yourself, such as your address, phone number, Social Security number, insurance information, medical history and treatment, etc. The main purpose for this information is to ensure accurate identification, continuity of care, and payment for care. Federal laws authorize the maintenance of this information. Furnishing all information requested is mandatory unless otherwise noted. Failure to provide such information may affect your midwifery care and/or insurance benefits and coverage. Comments or complaints regarding Lovers Lane Birth Center's privacy policy can be submitted in writing to: Lovers Lane Birth Center, 304 South Cottonwood, Suite A, Richardson, TX 75080.

I have read, agreed to the LLBC Privacy Practices and Terms and Conditions of Service.

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**Signature of Client/Date**