LifeSpring PREGNANCY CENTERS

Privacy Practices Disclosure (PPD)

This notice describes how medical information about you may be disclosed and how you can get access to this information. Please review it carefully. The privacy practices and terms described in this notice are voluntarily undertaken. Therefore, nothing in this notice should be construed as creating any contractual or legal rights on behalf of patients. We reserve the right to modify our privacy practices and this notice at any time.

I. **Safeguarding Your Individually Identifiable Health Information (IIHI):** Individually identifiable health information (IIHI) about your past, present, or future health or condition, the provision of health care to you, or payment for health care is considered IIHI. We will extend certain protections to your IIHI. This disclosure explains how, when and why we may use or disclose your IIHI.

II. **How We May Use or Disclose Your Individually Identifiable Health Information (IIHI)**: We may use or disclose your IIHI for the purpose of treatment or our health care operations such as to doctors, nurses and other health care personnel who are involved in providing your health care. Your IIHI may be shared with outside entities performing ancillary services to your treatment. Also, we may use and/or, disclose your IIHI as may be reasonably necessary in the course of operating our medical clinic. We may also send or communicate appointment reminders but subject to our normal confidentiality policies and any special instructions that you have given. For uses beyond treatment and operations purposes, we will ordinarily seek to obtain your authorization before disclosing your IIHI. However, disclosure of your IIHI may be made without your consent or authorization when required by law, when required for public health reasons, when necessary to avert a threat of harm to you or a third person, or when other circumstances may require or reasonably warrant such disclosure.

III. **How You May Have Access to or Control of Your Individually Identifiable Health Information (IIHI):** The following is a description of the steps you may take to access or to otherwise control the disposition of your IIHI: To request restrictions on uses/disclosures: You may ask that we limit how we use or disclose your IIHI. We will consider your request, but we are not legally bound to agree to the restriction. To the extent that we do agree to such restrictions, we will abide by such restrictions except in emergency situations. We cannot agree to limit uses/disclosures that are required by law. To choose how we contact you: You may ask that we send you information at an alternative address or by alternative means. We will agree to your request so long as it is reasonably easy for us to do so. To inspect and copy your IIHI: Unless your access is restricted for clear and documented treatment reasons, you will be permitted to inspect your IIHI. We will respond to you within 30 days. If we deny your request for access, we will give you written reasons for the denial. If you want copies of your IIHI, we will make reasonable efforts to accommodate any such request. You may designate selected portions of your IIHI for copying. To request amendment of your IIHI: If you believe that there is a mistake or missing information in our record of your IIHI, you may request in writing that we correct or add to the record. We will respond within 60 days of receiving your request. Any denial will state the reasons for the denial. If we approve the request for amendment, we will change the IIHI and so inform you. We will also inform any others who have a need to know about such changes. To find out what disclosures have been made: You may request for us to provide you with a list of all disclosures of your IIHI which we have made except for such disclosures as have been made in connection with your treatment, our health care operations, or as specifically required by law. We will respond to your request within 60 days of receiving it. To receive this notice: You may receive a paper or electronic copy of this notice upon request.

IV. **Contact Person:** If you have any questions or concerns about our privacy practices, please contact our center at 434.220.3777.

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