HIPAA Notice of Privacy Practices (NPP)

KidsHealth Pediatrics

HIPAA Notice of Privacy Practices (NPP)

Introduction

This Notice of Privacy Practices describes how your child's medical information may be used and disclosed, and how you can access this information. We are committed to protecting the privacy of our patients' health information.

Your Child's Health Information

Your child's health record contains personal information about their health. Federal law (HIPAA) requires that we maintain the privacy of this information and provide you with this notice of our legal duties and privacy practices.

How We Use and Disclose Health Information

We may use and disclose your child's health information for the following purposes:

Treatment

To provide, coordinate, or manage your child's healthcare. This includes sharing information with other healthcare providers involved in your child's care.

Payment

To bill and receive payment for services provided. This may include sharing information with your insurance company.

Healthcare Operations

For activities that improve the quality of care, such as training, auditing, and internal review.

Other Permitted Uses and Disclosures

We may also use or disclose your child's health information without your authorization when required or permitted by law, including:

- Public health reporting
- Reporting suspected abuse or neglect
- Health oversight activities
- Judicial or administrative proceedings
- Law enforcement purposes
- To avert a serious threat to health or safety

Uses and Disclosures Requiring Your Authorization

We will obtain your written authorization before using or disclosing your child's health information for purposes not described in this notice. You may revoke your authorization at any time in writing.

Your Rights Regarding Health Information

You have the right to:

- **Inspect and obtain a copy** of your child's health record
- **Request corrections** to the record
- **Request restrictions** on certain uses or disclosures
- **Request confidential communications**
- **Receive an accounting** of disclosures
- **Receive a paper copy** of this notice

Our Responsibilities

We are required to:

- Maintain the privacy of your child's health information
- Provide you with this Notice of Privacy Practices
- Follow the terms of this notice
- Notify you if a breach occurs involving your child's health information

---

Changes to This Notice

We reserve the right to change this Notice of Privacy Practices. Any changes will apply to all health information we maintain. A current copy will always be available at our clinic.

Questions or Complaints

If you have questions or concerns about this notice or believe your privacy rights have been violated, you may contact our Privacy Officer:

Privacy Officer
KidsHealth Pediatrics
Phone: (602) 374-3396
Address: 5425 E Bell Rd Ste 131 Scottsdale Arizona 85254

You may also file a complaint with the U.S. Department of Health and Human Services. We will not retaliate against you for filing a complaint.

Acknowledgment of Receipt

You will be asked to sign a form acknowledging that you received this Notice of Privacy Practices.

.