



Speak Easy Solutions, LLC

Notice of Privacy Practices

This notice describes how your child's medical information may be used and disclosed and how you (the parent or guardian) can obtain access to this information. Please review it carefully.

Effective date of this notice: 01-01-2012

We have a legal duty to protect your Private Health Information

Speak Easy Solutions, LLC must protect your child's "Private Health Information" or "PHI" and any information regarding your child. Private health information is the name of this kind of information. We must give you a notice of our legal duties and privacy rules concerning PHI.

- We must protect PHI created or received about your child's past, present or future health condition.
- We must protect PHI that we provide to you or use to receive payment for your health care.
- We must notify you about how we protect your PHI.
- We must explain how, when and why we use and/or give out your PHI.
- We may only use and/or give out PHI as explained in this notice.

This notice gives you examples of how we use and/or give out your child's PHI. We may also use and/or give out additional PHI because of what was originally used or given out.

We must follow rules in this notice. We have the right to change the terms of this notice. We have the right to make a new notice with new rules. The new notice will cover any new PHI or any PHI already received about your child, but we will first:

- Tell you about the change.
- Make copies of the changed noticed if you ask for one.

We may use and give out your child's PHI for the following reasons

We may use and disclose PHI for treatment, payment and healthcare operations. **Speak Easy Solutions, LLC** obtains information about your child to schedule appointments, provide treatment, update family members when appropriate, and stay in communication with your referring physician or any other healthcare providers who also provide you with healthcare service. We also use information about your child to file claims to your insurance for payment of services. Finally, we use information about our clients to develop new programs of services, to conduct regular business operations, to assess how we are doing as a service provider, and other routine uses.

We may use and release PHI for other reasons without your consent.

We may use and/or release your child's PHI without your consent under the following circumstances:

- Information given to federal, state, local law or court offices.
- Information given to public health authorities for public health problems; i.e., spreading an infection.
- Information given to public health authority or other appropriate government authority authorized by law to receive reports of child abuse or neglect.
- Information given by a government authority to report a victim of abuse, neglect, or domestic violence.
- Information given to a person who may have been exposed to a disease or condition that may be spread as necessary and authorized by the public health authority.
- Information given to federal or state companies who watch over our company.
- Information given at the request of a court order or other court matters.
- Information given to law enforcement about reportable wounds or injuries.
- Information given to medical examiners in order to identify your child.
- Information given for medical research.
- Information given to stop a threat to the health and safety of your child and others.
- Information given for activities with the military, national security, presidential security, intelligence services, medical need or reasons given by the Department of State.
- Information given to a jail, prison or place that has care of your child.
- Information given to a family member, relative, friend or person that you have chosen who is involved in your child's care or payment for your child's care or is to know your child's location, general location or death.
- Information given to a public or private agency (for example, American Red Cross) for disaster relief help.

At no time will **Speak Easy Solutions, LLC** disclose or distribute information we obtain or have obtained about your child to anyone else without your expressed written consent, unless permitted or allowed by law.

We may use and/or give out your PHI for other reasons, but we must get a written okay from you.

If we use your child's PHI for reasons not in this notice, we must obtain a written approval form from the parent/guardian. If you authorize us to release your child's information, but later change your mind, you may tell us to stop at any time. We will stop using and/or giving out your child's PHI after you have informed us to do so in writing. We will not be able to stop PHI already sent.

Your rights regarding your child's PHI.

You have the right to request restriction on the uses and disclosures of private health information. When completing the **Speak Easy Solutions, LLC** "Authorization to Disclose Private Health Information" form, you may indicate what specific information you want disclosed and to whom.

You have the right to access your child's medical records, view and get copies of the records, as well as request amendments to be made to the records. You have the right to receive confidential communications from us about your child's PHI. Please contact your child's therapist regarding access to your child's records. If you would like copies of all or part of your child's records, you must send a written request to the address listed below.

You have the right to receive a history of non-routine disclosure by written request to the address listed below.

You may file a complaint about our privacy rules if you think we have

- Not followed our rules
- Not followed your request(s)
- Not paid attention to your child's rights

You may also complain to the United States Secretary of the Department of Health and Human Services.

If you complain we will not act against you or change your child's care in any way.

If you would like to make a complaint, ask about our rules or ask about your child's privacy rights, contact:

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